

Rwanda Medical Procedure Code Database

RMP Code Detailed Nomenclature

Mapped to local nomenclature

| Specialty | Administrative | Sub-classification: | |
|-----------|----------------------------------|---------------------|----------------------------------|
| A2001 | Medical certificate | | Medical certificate |
| A2002 | Medical report | | Medical report |
| A2003 | Medical expertise | | Medical expertise |
| A2004 | Postmortem report | | Postmortem report |
| A2005 | Second opinion | | Second opinion |
| A2006 | Birth certificate | | Birth certificate |
| A2007 | Death certificate | | Death certificate |
| A2008 | Birth certificate [copy] | | Birth certificate [copy] |
| A2009 | Death certificate [copy] | | Death certificate [copy] |
| A2010 | Medical file | | Medical file |
| A2011 | Medical card | | Medical card |
| A2012 | Prescription | | Prescription |
| A2013 | Certificate of physical aptitude | | Certificate of physical aptitude |
| A2014 | Ambulance service per kilometer | | Ambulance service per kilometer |

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Specialty **Allied professional services**

Sub-classification: **Autism/PDD**

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| 82000 | <p>psychology health service provided to a child, aged under 13 years, by an eligible psychologist where:[a] the child is referred by an eligible practitioner for the purpose of assisting the practitioner with their diagnosis of the child; or[b] the child is referred by an eligible practitioner for the purpose of contributing to the child`s pervasive developmental disorder [pdd] or disability treatment plan, developed by the practitioner; and[c] for a child with pdd, the eligible practitioner is a consultant physician in the practice of his or her field of psychiatry or paediatrics; or for a child with disability, the eligible practitioner is a specialist, consultant physician or general practitioner: and[d] the psychologist attending the child is registered with the department of human services as meeting the credentialing requirements for provision of these services; and[e] the child is not an admitted patient of a hospital; and [f] the service is provided to the child individually and in person; and[g] the service lasts at least 50 minutes in duration.these items are limited to a maximum of four services per patient, consisting of any combination of the following items 82000, 82005, 82010 and 82030</p> | <p>Autism/PDD assistance with diagnosis / contribution to a treatment plan by psychologist</p> |
| 82005 | <p>speech pathology health service provided to a child, aged under 13 years, by an eligible speech pathologist where:[a] the child is referred by an eligible practitioner for the purpose of assisting the practitioner with their diagnosis of the child; or[b] the child is referred by an eligible practitioner for the purpose of contributing to the child`s pervasive developmental disorder [pdd] or disability treatment plan, developed by the practitioner; and[c] or for a child with pdd, the eligible practitioner is a consultant physician in the practice of his or her field of psychiatry or paediatrics; for a child with disability, the eligible practitioner is a specialist, consultant physician or general practitioner: and[d] the speech pathologist attending the child is registered with the department of human services as meeting the credentialing requirements for provision of these services; and[e] the child is not an admitted patient of a hospital; and[f] the service is provided to the child individually and in person; and[g] the service lasts at least 50 minutes in duration.these items are limited to a maximum of four services per patient, consisting of any combination of the following items 82000, 82005, 82010 and 82030</p> | <p>Autism/PDD assistance with diagnosis / contribution to a treatment plan by speech pathologist</p> |
| 82010 | <p>occupational therapy health service provided to a child, aged under 13 years, by an eligible occupational therapist where:[a] the child is referred by an eligible practitioner for the purpose of assisting the practitioner with their diagnosis of the child; or[b] the child is referred by an eligible practitioner for the purpose of contributing to the child`s pervasive developmental disorder [pdd] or disability treatment plan, developed by the practitioner; and[c] or for a child with pdd, the eligible practitioner is a consultant physician in the practice of his or her field of psychiatry or paediatrics; for a child with disability, the eligible practitioner is a specialist, consultant physician or general practitioner: and[d] the occupational therapist attending the child is registered with the department of human services as meeting the credentialing requirements for provision of these services; and[e] the child is not an admitted patient of a hospital; and[f] the service is provided to the child individually and in person; and[g] the service lasts at least 50 minutes in duration.these items are limited to a maximum of four services per patient, consisting of any combination of the following items 82000, 82005, 82010 and 82030</p> | <p>Autism/PDD assistance with diagnosis / contribution to a treatment plan by occupational therapist</p> |
| 82015 | <p>psychology health service provided to a child, aged under 15 years, for treatment of a pervasive developmental disorder [pdd] or eligible disability by an eligible psychologist where:[a] the child has been diagnosed with pdd or eligible disability; and[b] the child has received a pdd or disability treatment plan [while aged under 13 years] as prepared by an eligible</p> | <p>Autism/PDD treatment services by a psychologist</p> |

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practitioner; and[c] the child has been referred by an eligible practitioner for the provision of services that are consistent with the pdd or disability treatment plan; and[d] for a child with pdd, the eligible practitioner is a consultant physician in the practice of his or her field of psychiatry or paediatrics; or for a child with disability, the eligible practitioner is a specialist, consultant physician or general practitioner: and[e] the psychologist attending the child is registered with the department of human services as meeting the credentialing requirements for provision of these services; and[f] the child is not an admitted patient of a hospital; and [g] the service is provided to the child individually and in person; and[h] the service lasts at least 30 minutes in duration.these items are limited to a maximum of 20 services per patient, consisting of any combination of items 82015, 82020, 82025 and 82035

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| 82020 | <p>speech pathology health service provided to a child, aged under 15 years, for treatment of a pervasive developmental disorder [pdd] or an eligible disability by an eligible speech pathologist where:[a] the child has been diagnosed with pdd or an eligible disability ; and [b] the child has received a pdd or disability treatment plan [while aged under 13 years] as prepared by an eligible practitioner; and[c] the child has been referred by an eligible practitioner for the provision of services that are consistent with the pdd or disability treatment plan; and[d] for a child with pdd, the eligible practitioner is a consultant physician in the practice of his or her field of psychiatry or paediatrics; or for a child with disability, the eligible practitioner is a specialist, consultant physician or general practitioner: and[e] the speech pathologist attending the child is registered with the department of human services as meeting the credentialing requirements for provision of these services; and[f] the child is not an admitted patient of a hospital; and[g] the service is provided to the child individually and in person; and[h] the service lasts at least 30 minutes in duration.these items are limited to a maximum of 20 services per patient, consisting of any combination of items 82015, 82020, 82025 and 82035</p> | Autism/PDD treatment services by speech pathologist |
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| 82025 | <p>occupational therapy health service provided to a child, aged under 15 years, for treatment of a pervasive developmental disorder [pdd] or an eligible disability by an eligible occupational therapist where:[a] the child has been diagnosed with pdd or an eligible disability ; and [b] the child has received a pdd or disability treatment plan [while aged under 13 years] as prepared by an eligible practitioner; and[c] the child has been referred by an eligible practitioner for the provision of services that are consistent with the pdd or disability treatment plan; and[d] or for a child with pdd, the eligible practitioner is a consultant physician in the practice of his or her field of psychiatry or paediatrics; for a child with disability, the eligible practitioner is a specialist, consultant physician or general practitioner: and[e] the occupational therapist attending the child is registered with the department of human services as meeting the credentialing requirements for provision of these services; and[f] the child is not an admitted patient of a hospital; and[g] the service is provided to the child individually and in person; and[h] the service lasts at least 30 minutes in duration.these items are limited to a maximum of 20 services per patient, consisting of any combination of items 82015, 82020, 82025 and 82035</p> | Autism/PDD treatment services by occupational therapist |
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| 82030 | <p>Audiology, optometry, orthoptic or physiotherapy health service provided to a child, aged under 13 years, by an eligible audiologist, optometrist, orthoptist or physiotherapist where:[a] the child is referred by an eligible practitioner for the purpose of assisting the practitioner with their diagnosis of the child; or[b] the child is referred by an eligible practitioner for the purpose of contributing to the child s pervasive developmental disorder[pdd] or disability treatment plan, developed by the practitioner; and[c] for a child with pdd, the eligible practitioner is a consultant physician in the practice of his or her field of psychiatry or paediatrics; or for a child with disability, the eligible practitioner is a specialist, consultant physician or</p> | Autism/PDD assistance with diagnosis / contribution to a treatment plan by audiologist, optometrist, orthoptist, physiotherapist |
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general practitioner: and [d] the audiologist, optometrist, orthoptist or physiotherapist attending the child is registered with the department of human services as meeting the credentialing requirements for provision of these services; and[e] the child is not an admitted patient of a hospital; and[f] the service is provided to the child individually and in person; and[g] the service lasts at least 50 minutes in duration.these items are limited to a maximum of four services per patient, consisting of any combination of the following items - 82000, 82005, 82010 and 82030

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| 82035 | Audiology, optometry, orthoptic or physiotherapyaudiology, optometry, orthoptic or physiotherapy health service provided to a child, aged under 15 years, for treatment of a pervasive developmental disorder [pdd] or eligible disability by an eligible audiologist, optometrist, orthoptist or physiotherapist where:[a] the child has been diagnosed with pdd or eligible disability; and [b] the child has received a pdd or disability treatment plan [while aged under 13 years] as prepared by an eligible practitioner; and[c] the child has been referred by an eligible practitioner for the provision of services that are consistent with the pdd or disability treatment plan; and[d] for a child with pdd, the eligible practitioner is a consultant physician in the practice of his or her field of psychiatry or paediatrics; or for a child with disability, the eligible practitioner is a specialist, consultant physician or general practitioner: and [e] the audiologist, optometrist, orthoptist or physiotherapist attending the child is registered with the department of human services as meeting the credentialing requirements for provision of these services; and[f] the child is not an admitted patient of a hospital; and[g] the service is provided to the child individually and in person; and[h] the service lasts at least 30 minutes in duration.these items are limited to a maximum of 20 services per patient, consisting of any combination of items - 82015, 82020, 82025 and 82035 | Autism/PDD treatment services by audiologist, optometrist, orthoptist, physiotherapist |
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Specialty **Allied professional services**

Sub-classification: **Physiotherapy**

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| N1069 NEBULISATION | NEBULISATION |
| PT0011 1 JOINT | Joint Mobilization 1 joint |
| PT0012 2 JOINTS | Joint Mobilization 2 joints |
| PT0013 3 JOINTS | Joint Mobilization 3 joints |
| PT0014 >3 JOINTS | Joint Mobilization >3 joints |
| PT0015 SPINAL MOBILIZATION | Spinal Mobilization |
| PT0016 TRACTION -MECHANICAL USING TABLE | Mechanical traction |
| PT0021 UPPER LIMB MASSAGE | UPPER LIMB MASSAGE |
| PT0022 LOWER LIMB MASSAGE | LOWER LIMB MASSAGE |

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| PT0023 BACK/NECK MASSAGE | BACK/NECK MASSAGE |
| PT0024 GENERAL PHYSIOTHERAPY MASSAGE | GENERAL PHYSIOTHERAPY MASSAGE |
| PT0025 MYOFACIAL RELEASE TECHNIQUES | MYOFACIAL RELEASE TECHNIQUES |
| PT0031 IN ACUTE PHASE | Exercise therapy acute phase |
| PT0032 SUB ACUTE PHASE | Exercise therapy sub-acute phase |
| PT0033 CHRONIC PHASE | Exercise therapy chronic phase |
| PT0034 EXERCISE USING TREADMILL | Treadmill exercise therapy |
| PT0041 DIADYNAMIC ELECTROTHERAPY | DIADYNAMIC ELECTROTHERAPY |
| PT0042 DIATHERMY Physiotherapy | DIATHERMY Physiotherapy |
| PT0043 INTERFERENTIAL THERAPY | INTERFERENTIAL THERAPY |
| PT0044 STIMULATION ELECTROTHERPY | STIMULATION ELECTROTHERPY |
| PT0045 I.R [INFRARED]/CRYOTHERAPY | I.R [INFRARED]/CRYOTHERAPY |
| PT0046 IONIZATION Physiotherapy | IONIZATION Physiotherapy |
| PT0047 LASER PHYSIOTHERAPY | LASER PHYSIOTHERAPY |
| PT0048 MOIST HEAT physiotherapy | MOIST HEAT physiotherapy |
| PT0049 TENS [TRANSCUTANEOUS ELECTRICAL NERVE STIMULATION] | TENS [TRANSCUTANEOUS ELECTRICAL NERVE STIMULATION] |
| PT0051 CHEST PHYSIOTHERAPY TECHNIQUES | Chest PHYSIOTHERAPY IN CRITICAL CARE |
| PT0052 CARDIO PULMONARY RESUSCITATION | Cardiopulmonary Resuscitation [CPR] |
| PT0053 END STAGE OF RENAL FAILURE PHYSIOTHERAPY | Renal failure physiotherapy, end stage |

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| PT0060 PHYSIOTHERAPY IN PALLIATIVE CARE | PHYSIOTHERAPY IN PALLIATIVE CARE |
| PT0061 HYDROTHERAPY POST OPERATIVE SPINAL SURGEY REHABILITATION & DISORDERS | HYDROTHERAPY POST OPERATIVE SPINAL SURGEY REHABILITATION & DISORDERS |
| PT0062 REHABILITATION OF MUSCULOSKELATEAL DISORERS | REHABILITATION OF MUSCULOSKELATEAL DISORERS |
| PT0063 REHABILITATION FOLLOWING ORTHOPAEDIC RECONSTRUCTION | REHABILITATION FOLLOWING ORTHOPAEDIC RECONSTRUCTION |
| PT0064 WOMEN`S HEALTH REHABILITATION | WOMEN`S HEALTH REHABILITATION |
| PT0065 BURNS REHABILITATION | BURNS REHABILITATION |
| PT0066 REHABILITATION OF NEUROLOGICAL CONDITIONS | REHABILITATION OF NEUROLOGICAL CONDITIONS |
| PT0068 REHABILITATION OF TRAUMATIC CONDITIONS | REHABILITATION OF TRAUMATIC CONDITIONS |
| PT0069 SPORTS INJURIES REHABILITATIONS | SPORTS INJURIES REHABILITATIONS |
| PT0071 MEDICAL TAPPING - COMPLEX | MEDICAL TAPPING - COMPLEX |
| PT0072 MEDICAL TAPPING - SIMPLE | MEDICAL TAPPING - SIMPLE |
| PT0073 DRY NEEDLING - COMPLEX | DRY NEEDLING - COMPLEX |
| PT0074 DRY NEEDLING - SIMPLE | DRY NEEDLING - SIMPLE |
| PT0075 PATIENT EDUCATION ON PATHOLOGY,&ADVICE | PATIENT EDUCATION ON PATHOLOGY,&ADVICE |
| PT0076 HOME PHYSIOTHERAPY VISIT | HOME PHYSIOTHERAPY VISIT |
| PT0077 ERGONOMIC INTERVENTIONS | ERGONOMIC INTERVENTIONS |
| PT0410 U.S [ULTRASOUND] physiotherapy | U.S [ULTRASOUND] physiotherapy |

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PT0411 U.V [ULTRAVIOLET] physiotherapy

U.V [ULTRAVIOLET] physiotherapy

PT0412 PARAFFIN THERAPY

PARAFFIN THERAPY

PT0413 WAX BATH Physiotherapy

WAX BATH Physiotherapy

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Specialty **Anaesthesia**

Sub-classification: **ANAESTHESIA# MISCELLANEOUS**

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| 21990 | Initiation of management of anaesthesia when no procedure ensues [3 basic units] | Initiation & Management of Anaesthesia without other procedure |
| 21992 | Initiation of management of anaesthesia performed on a person under the age of 10 years in connection with a procedure covered by an item which has not been identified as attracting an anaesthetic [4 basic units] | Initiation & Management of Anaesthesia for under 10 years |
| 21997 | Initiation of management of anaesthesia in connection with a procedure covered by an item which has not been identified as attracting an anaesthetic rebate, not being a service to which item 21992 or 21965 applies where it can be demonstrated that there is a clinical need for anaesthesia [4 basic units] | Initiation & Management of Anaesthesia for other procedure covered |

Specialty **Anaesthesia**

Sub-classification: **ANAESTHESIA DIAGNOSTIC**

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| 21906 | Initiation of management of anaesthesia for injection procedure for myelography: lumbar or thoracic [5 basic units] | ANAESTHESIA FOR RADIOLOGICAL OR DIAGNOSTIC OR THERAPEUTIC ELIGIBLE SERVICE |
| 21908 | Initiation of management of anaesthesia for injection procedure for myelography: cervical [6 basic units] | ANAESTHESIA FOR RADIOLOGICAL OR DIAGNOSTIC OR THERAPEUTIC ELIGIBLE SERVICE |
| 21910 | Initiation of management of anaesthesia for injection procedure for myelography: posterior fossa [9 basic units] | ANAESTHESIA FOR RADIOLOGICAL OR DIAGNOSTIC OR THERAPEUTIC ELIGIBLE SERVICE |
| 21912 | Initiation of management of anaesthesia for injection procedure for discography: lumbar or thoracic [5 basic units] | ANAESTHESIA FOR RADIOLOGICAL OR DIAGNOSTIC OR THERAPEUTIC ELIGIBLE SERVICE |
| 21914 | Initiation of management of anaesthesia for injection procedure for discography cervical [6 basic units] | ANAESTHESIA FOR RADIOLOGICAL OR DIAGNOSTIC OR THERAPEUTIC ELIGIBLE SERVICE |
| 21915 | Initiation of management of anaesthesia for peripheral arteriogram [5 basic units] | ANAESTHESIA FOR RADIOLOGICAL OR DIAGNOSTIC OR THERAPEUTIC ELIGIBLE SERVICE |
| 21916 | Initiation of management of anaesthesia for arteriograms: cerebral, carotid or vertebral [5 basic units] | ANAESTHESIA FOR RADIOLOGICAL OR DIAGNOSTIC OR THERAPEUTIC ELIGIBLE SERVICE |

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| 21918 | Initiation of management of anaesthesia for retrograde arteriogram: brachial or femoral [5 basic units] | ANAESTHESIA FOR RADIOLOGICAL OR DIAGNOSTIC OR THERAPEUTIC ELIGIBLE SERVICE |
| 21922 | Initiation of management of anaesthesia for computerised axial tomography scanning, magnetic resonance scanning, digital subtraction angiography scanning [7 basic units] | ANAESTHESIA FOR RADIOLOGICAL OR DIAGNOSTIC OR THERAPEUTIC ELIGIBLE SERVICE |
| 21925 | Initiation of management of anaesthesia for retrograde cystography, retrograde urethrography or retrograde cystourethrography [4 basic units] | ANAESTHESIA FOR RADIOLOGICAL OR DIAGNOSTIC OR THERAPEUTIC ELIGIBLE SERVICE |
| 21926 | Initiation of management of anaesthesia for fluoroscopy [5 basic units] | ANAESTHESIA FOR RADIOLOGICAL OR DIAGNOSTIC OR THERAPEUTIC ELIGIBLE SERVICE |
| 21927 | Initiation of management of anaesthesia for barium enema or other opaque study of the small bowel [5 basic units] | ANAESTHESIA FOR RADIOLOGICAL OR DIAGNOSTIC OR THERAPEUTIC ELIGIBLE SERVICE |
| 21930 | Initiation of management of anaesthesia for bronchography [6 basic units] | ANAESTHESIA FOR RADIOLOGICAL OR DIAGNOSTIC OR THERAPEUTIC ELIGIBLE SERVICE |
| 21935 | Initiation of management of anaesthesia for phlebography [5 basic units] | ANAESTHESIA FOR RADIOLOGICAL OR DIAGNOSTIC OR THERAPEUTIC ELIGIBLE SERVICE |
| 21936 | Initiation of management of anaesthesia for heart, 2 dimensional real time transoesophageal examination [6 basic units] | ANAESTHESIA FOR RADIOLOGICAL OR DIAGNOSTIC OR THERAPEUTIC ELIGIBLE SERVICE |
| 21939 | Initiation of management of anaesthesia for peripheral venous cannulation [3 basic units] | ANAESTHESIA FOR RADIOLOGICAL OR DIAGNOSTIC OR THERAPEUTIC ELIGIBLE SERVICE |
| 21941 | Initiation of management of anaesthesia for cardiac catheterisation including coronary arteriography, ventriculography, cardiac mapping, insertion of automatic defibrillator or transvenous pacemaker [7 basic units] | ANAESTHESIA FOR RADIOLOGICAL OR DIAGNOSTIC OR THERAPEUTIC ELIGIBLE SERVICE |
| 21942 | Initiation of management of anaesthesia for cardiac electrophysiological procedures including radio frequency ablation [10 basic units] | ANAESTHESIA FOR RADIOLOGICAL OR DIAGNOSTIC OR THERAPEUTIC ELIGIBLE SERVICE |

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| 21943 | Initiation of management of anaesthesia for central vein catheterisation or insertion of right heart balloon catheter [via jugular, subclavian or femoral vein] by percutaneous or open exposure [5 basic units] | ANAESTHESIA FOR RADIOLOGICAL OR DIAGNOSTIC OR THERAPEUTIC ELIGIBLE SERVICE |
| 21945 | Initiation of management of anaesthesia for lumbar puncture, cisternal puncture, or epidural injection [5 basic units] | ANAESTHESIA FOR RADIOLOGICAL OR DIAGNOSTIC OR THERAPEUTIC ELIGIBLE SERVICE |
| 21949 | Initiation of management of anaesthesia for harvesting of bone marrow for the purpose of transplantation [5 basic units] | ANAESTHESIA FOR RADIOLOGICAL OR DIAGNOSTIC OR THERAPEUTIC ELIGIBLE SERVICE |
| 21952 | Initiation of management of anaesthesia for muscle biopsy for malignant hyperpyrexia [10 basic units] | ANAESTHESIA FOR RADIOLOGICAL OR DIAGNOSTIC OR THERAPEUTIC ELIGIBLE SERVICE |
| 21955 | Initiation of management of anaesthesia for electroencephalography [5 basic units] | ANAESTHESIA FOR RADIOLOGICAL OR DIAGNOSTIC OR THERAPEUTIC ELIGIBLE SERVICE |
| 21959 | Initiation of management of anaesthesia for brain stem evoked response audiometry [5 basic units] | ANAESTHESIA FOR RADIOLOGICAL OR DIAGNOSTIC OR THERAPEUTIC ELIGIBLE SERVICE |
| 21962 | Initiation of management of anaesthesia for electrocochleography by extratympanic method or transtympanic membrane insertion method [5 basic units] | ANAESTHESIA FOR RADIOLOGICAL OR DIAGNOSTIC OR THERAPEUTIC ELIGIBLE SERVICE |
| 21965 | Initiation of management of anaesthesia as a therapeutic procedure where it can be demonstrated that there is a clinical need for anaesthesia, not for the treatment of headache of any etiology [5 basic units] | ANAESTHESIA FOR RADIOLOGICAL OR DIAGNOSTIC OR THERAPEUTIC ELIGIBLE SERVICE |
| 21969 | Initiation of management of anaesthesia during hyperbaric therapy where the medical practitioner is not confined in the chamber [including the administration of oxygen] [8 basic units] | ANAESTHESIA FOR RADIOLOGICAL OR DIAGNOSTIC OR THERAPEUTIC ELIGIBLE SERVICE |
| 21970 | Initiation of management of anaesthesia during hyperbaric therapy where the medical practitioner is confined in the chamber [including the administration of oxygen] [15 basic units] | ANAESTHESIA FOR RADIOLOGICAL OR DIAGNOSTIC OR THERAPEUTIC ELIGIBLE SERVICE |
| 21973 | Initiation of management of anaesthesia for brachytherapy using radioactive sealed sources [5 basic units] | ANAESTHESIA FOR RADIOLOGICAL OR DIAGNOSTIC OR THERAPEUTIC ELIGIBLE SERVICE |

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| 21976 | Initiation of management of anaesthesia for therapeutic nuclear medicine [5 basic units] | ANAESTHESIA FOR RADIOLOGICAL OR DIAGNOSTIC OR THERAPEUTIC ELIGIBLE SERVICE |
| 21980 | Initiation of management of anaesthesia for radiotherapy [5 basic units] | ANAESTHESIA FOR RADIOLOGICAL OR DIAGNOSTIC OR THERAPEUTIC ELIGIBLE SERVICE |
| 21981 | anaesthetic agent allergy testing, using skin sensitivity methods in a patient with a history of prior anaphylactic or anaphylactoid reaction or cardiovascular collapse associated with the management of anaesthesia agents [4 basic units] | ANAESTHESIA FOR RADIOLOGICAL OR DIAGNOSTIC OR THERAPEUTIC ELIGIBLE SERVICE |

Specialty **Anaesthesia**

Sub-classification: **ANAESTHESIA FOR BURNS**

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| 21878 | Initiation of management of anaesthesia for excision or debridement of burns, with or without skin grafting where the area of burn involves not more than 3% of total body surface [3 basic units] | Initiation & Management of Anaesthesia for Burns |
| 21879 | Initiation of management of anaesthesia for excision or debridement of burns, with or without skin grafting, where the area of burn involves more than 3% but less than 10% of total body surface [5 basic units] | Initiation & Management of Anaesthesia for Burns |
| 21880 | Initiation of management of anaesthesia for excision or debridement of burns, with or without skin grafting, where the area of burn involves 10% or more but less than 20% of total body surface [7 basic units] | Initiation & Management of Anaesthesia for Burns |
| 21881 | Initiation of management of anaesthesia for excision or debridement of burns, with or without skin grafting, where the area of burn involves 20% or more but less than 30% of total body surface [9 basic units] | Initiation & Management of Anaesthesia for Burns |
| 21882 | Initiation of management of anaesthesia for excision or debridement of burns, with or without skin grafting, where the area of burn involves 30% or more but less than 40% of total body surface [11 basic units] | Initiation & Management of Anaesthesia for Burns |
| 21883 | Initiation of management of anaesthesia for excision or debridement of burns, with or without skin grafting, where the area of burn involves 40% or more but less than 50% of total body surface [13 basic units] | Initiation & Management of Anaesthesia for Burns |
| 21884 | Initiation of management of anaesthesia for excision or debridement of burns, with or without skin grafting, where the area of burn involves 50% or more but less than 60% of total body surface [15 basic units] | Initiation & Management of Anaesthesia for Burns |
| 21885 | Initiation of management of anaesthesia for excision or debridement of burns, with or without skin grafting, where the area of burn involves 60% or more but less than 70% of total body surface [17 basic units] | Initiation & Management of Anaesthesia for Burns |
| 21886 | Initiation of management of anaesthesia for excision or debridement of burns, with or without skin grafting, where the area of burn involves 70% or more but less than 80% of total body surface [19 basic units] | Initiation & Management of Anaesthesia for Burns |
| 21887 | Initiation of management of anaesthesia for excision or debridement of burns, with or without skin grafting, where the area of burn involves 80% or more of total body surface [21 basic units] | Initiation & Management of Anaesthesia for Burns |

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Specialty **Anaesthesia**

Sub-classification: **Anaesthesia for Dental Service**

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| 22900 | Initiation of management by a medical practitioner of anaesthesia for extraction of tooth or teeth with or without incision of soft tissue or removal of bone [6 basic units] | Anesthesia for dental extraction |
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| 22905 | Initiation of management of anaesthesia for restorative dental work [6 basic units] | Anesthesia for restorative dental work |
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Specialty **Anaesthesia**

Sub-classification: **Consultation**

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| C6 | Pre-anesthetic visit | Pre-anesthetic visit |
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Specialty **Anaesthesia**

Sub-classification: **Consultation**

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| 17609 | professional attendance on a patient by a specialist practising in his or her specialty of anaesthesia if: [a] the attendance is by video conference; and [b] item 17610, 17615, 17620, 17625, 17640, 17645, 17650, or 17655 applies to the attendance; and [c] the patient is not an admitted patient; and [d] the patient: [i] is located both: [a] within a telehealth eligible area; and [b] at the time of the attendance—at least 15 kms by road from the specialist; or [ii] is a care recipient in a residential care service; or [iii] is a patient of: [a] an aboriginal medical service; or [b] an aboriginal community controlled health service for which a direction made under subsection 19 [2] of the act applies . | Anaesthesia Management Plan |
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| 17610 | Anaesthetist, pre-anaesthesia consultation [Professional attendance by a medical practitioner in the practice of anaesthesia] a brief consultation involving a targeted history and limited examination [including the cardio-respiratory system] and of not more than 15 minutes duration, not being a service associated with a service to which items 2801 - 3000 apply | ANAESTHETIST, PRE-ANAESTHESIA |
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| 17615 | A consultation on a patient undergoing advanced surgery or who has complex medical problems, involving a selective history and an extensive examination of multiple systems and the formulation of a written patient management plan documented in the patient notes - and of more than 15 minutes but not more than 30 minutes duration, not being a service associated with a service to which items 2801 - 3000 applies | ANAESTHETIST, PRE-ANAESTHESIA |
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| 17620 | A consultation on a patient undergoing advanced surgery or who has complex medical problems involving a detailed history and comprehensive examination of multiple systems and the formulation of a written patient management plan documented in the patient notes - and of more than 30 minutes but not more than 45 minutes duration, not being a service associated with a service to which items 2801 3000 apply | ANAESTHETIST, PRE-ANAESTHESIA |
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| 17625 | A consultation on a patient undergoing advanced surgery or who has complex medical problems involving an exhaustive history and comprehensive examination of multiple systems , the formulation of a written patient management plan following discussion with relevant health care professionals and/or the patient, involving medical planning of high complexity documented in the patient notes - and of more than 45 minutes duration, not being a service associated with a | ANAESTHETIST, PRE-ANAESTHESIA |
|-------|---|-------------------------------|

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service to which items 2801 3000 apply

| | | |
|-------|---|--|
| 17640 | Anaesthetist, consultation [other than prior to anaesthesia] [Professional attendance by a specialist anaesthetist in the practice of anaesthesia where the patient is referred to him or her] - a brief consultation involving a short history and limited examination - and of not more than 15 minutes duration, not being a service associated with a service to which items 2801 3000 apply | ANAESTHETIST, REFERRED CONSULTATION [other than prior to anaesthesia] |
| 17645 | A consultation involving a selective history and examination of multiple systems and the formulation of a written patient management plan - and of more than 15 minutes but not more than 30 minutes duration, not being a service associated with a service to which items 2801 3000 apply. | ANAESTHETIST, REFERRED CONSULTATION [other than prior to anaesthesia] |
| 17650 | A consultation involving a detailed history and comprehensive examination of multiple systems and the formulation of a written patient management plan - and of more than 30 minutes but not more than 45 minutes duration, not being a service associated with a service to which items 2801 3000 apply | ANAESTHETIST, REFERRED CONSULTATION [other than prior to anaesthesia] |
| 17655 | - a consultation involving an exhaustive history and comprehensive examination of multiple systems and the formulation of a written patient management plan following discussion with relevant health care professionals and/or the patient, involving medical planning of high complexity, - and of more than 45 minutes duration, not being a service associated with a service to which items 2801 - 3000 apply. | ANAESTHETIST, REFERRED CONSULTATION [other than prior to anaesthesia] |

Specialty **Anaesthesia**

Sub-classification: **FOREARM WRIST AND HAND**

| | | |
|-------|---|--|
| 21800 | Initiation of management of anaesthesia for procedures on the skin or subcutaneous tissue of the forearm, wrist or hand [3 basic units] | Initiation & Management of Anaesthesia for FOREARM WRIST AND HAND |
| 21810 | Initiation of management of anaesthesia for procedures on the nerves, muscles, tendons, fascia, or bursae of the forearm, wrist or hand [4 basic units] | Initiation & Management of Anaesthesia for FOREARM WRIST AND HAND |
| 21820 | Initiation of management of anaesthesia for closed procedures on the radius, ulna, wrist, or hand bones when performed in the operating theatre of a hospital [3 basic units] | Initiation & Management of Anaesthesia for FOREARM WRIST AND HAND |
| 21830 | Initiation of management of anaesthesia for open procedures on the radius, ulna, wrist, or hand bones, not being a service to which another item in this subgroup applies [4 basic units] | Initiation & Management of Anaesthesia for FOREARM WRIST AND HAND |
| 21832 | Initiation of management of anaesthesia for total wrist replacement [7 basic units] | Initiation & Management of Anaesthesia for FOREARM WRIST AND HAND |
| 21834 | Initiation of management of anaesthesia for arthroscopic procedures of the wrist joint [4 basic units] | Initiation & Management of Anaesthesia for FOREARM WRIST AND HAND |
| 21840 | Initiation of management of anaesthesia for procedures on the arteries of forearm, wrist or hand, not being a service to which another item in this subgroup applies [8 basic units] | Initiation & Management of Anaesthesia for FOREARM WRIST AND HAND |

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RMP Code Detailed Nomenclature

Mapped to local nomenclature

| | | |
|-------|---|---|
| 21842 | Initiation of management of anaesthesia for embolectomy of artery of forearm, wrist or hand [6 basic units] | Initiation & Management of Anaesthesia for FOREARM WRIST AND HAND |
| 21850 | Initiation of management of anaesthesia for procedures on the veins of forearm, wrist or hand, not being a service to which another item in this subgroup applies [4 basic units] | Initiation & Management of Anaesthesia for FOREARM WRIST AND HAND |
| 21860 | Initiation of management of anaesthesia for forearm, wrist, or hand cast application, removal, or repair when rendered to a patient as part of an episode of hospital treatment [3 basic units] | Initiation & Management of Anaesthesia for FOREARM WRIST AND HAND |
| 21865 | Initiation of management of anaesthesia for microvascular free tissue flap surgery involving the forearm, wrist or hand [10 basic units] | Initiation & Management of Anaesthesia for FOREARM WRIST AND HAND |
| 21870 | Initiation of management of anaesthesia for microsurgical reimplantation of forearm, wrist or hand [15 basic units] | Initiation & Management of Anaesthesia for FOREARM WRIST AND HAND |
| 21872 | Initiation of management of anaesthesia for microsurgical reimplantation of a finger [8 basic units] | Initiation & Management of Anaesthesia for FOREARM WRIST AND HAND |

Specialty **Anaesthesia**

Sub-classification: **Head**

| | | |
|-------|---|---|
| 20100 | Initiation of management of anaesthesia for procedures on the skin, subcutaneous tissue, muscles, salivary glands or superficial vessels of the head including biopsy, not being a service to which another item in this subgroup applies [5 basic units] | Initiation & Management of Anaesthesia for Head |
| 20102 | Initiation of management of anaesthesia for plastic repair of cleft lip [6 basic units] | Initiation & Management of Anaesthesia for Head |
| 20104 | Initiation of management of anaesthesia for electroconvulsive therapy [4 basic units] | Initiation & Management of Anaesthesia for Head |
| 20120 | Initiation of management of anaesthesia for procedures on external, middle or inner ear, including biopsy, not being a service to which another item in this subgroup applies [5 basic units] | Initiation & Management of Anaesthesia for Head |
| 20124 | Initiation of management of anaesthesia for otoscopy [4 basic units] | Initiation & Management of Anaesthesia for Head |
| 20140 | Initiation of management of anaesthesia for procedures on eye, not being a service to which another item in this group applies [5 basic units] | Initiation & Management of Anaesthesia for Head |
| 20142 | Initiation of management of anaesthesia for lens surgery [6 basic units] | Initiation & Management of Anaesthesia for Head |
| 20143 | Initiation of management of anaesthesia for retinal surgery [6 basic units] | Initiation & Management of Anaesthesia for Head |

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RMP Code Detailed Nomenclature

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| | | |
|-------|---|---|
| 20144 | Initiation of management of anaesthesia for corneal transplant [8 basic units] | Initiation & Management of Anaesthesia for Head |
| 20145 | Initiation of management of anaesthesia for vitrectomy [8 basic units] | Initiation & Management of Anaesthesia for Head |
| 20146 | Initiation of management of anaesthesia for biopsy of conjunctiva [5 basic units] | Initiation & Management of Anaesthesia for Head |
| 20147 | Initiation of management of anaesthesia for squint repair [6 basic units] | Initiation & Management of Anaesthesia for Head |
| 20148 | Initiation of management of anaesthesia for ophthalmoscopy [4 basic units] | Initiation & Management of Anaesthesia for Head |
| 20160 | Initiation of management of anaesthesia for procedures on nose or accessory sinuses, not being a service to which another item in this subgroup applies [6 basic units] | Initiation & Management of Anaesthesia for Head |
| 20162 | Initiation of management of anaesthesia for radical surgery on the nose and accessory sinuses [7 basic units] | Initiation & Management of Anaesthesia for Head |
| 20164 | Initiation of management of anaesthesia for biopsy of soft tissue of the nose and accessory sinuses [4 basic units] | Initiation & Management of Anaesthesia for Head |
| 20170 | Initiation of management of anaesthesia for intraoral procedures, including biopsy, not being a service to which another item in this subgroup applies [6 basic units] | Initiation & Management of Anaesthesia for Head |
| 20172 | Initiation of management of anaesthesia for repair of cleft palate [7 basic units] | Initiation & Management of Anaesthesia for Head |
| 20174 | Initiation of management of anaesthesia for excision of retropharyngeal tumour [9 basic units] | Initiation & Management of Anaesthesia for Head |
| 20176 | Initiation of management of anaesthesia for radical intraoral surgery [10 basic units] | Initiation & Management of Anaesthesia for Head |
| 20190 | Initiation of management of anaesthesia for procedures on facial bones, not being a service to which another item in this subgroup applies [5 basic units] | Initiation & Management of Anaesthesia for Head |
| 20192 | Initiation of management of anaesthesia for extensive surgery on facial bones [including prognathism and extensive facial bone reconstruction] [10 basic units] | Initiation & Management of Anaesthesia for Head |
| 20210 | Initiation of management of anaesthesia for intracranial procedures, not being a service to which another item in this subgroup applies [15 basic units] | Initiation & Management of Anaesthesia for Head |

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RMP Code Detailed Nomenclature

Mapped to local nomenclature

| | | |
|-------|---|---|
| 20212 | Initiation of management of anaesthesia for subdural taps [5 basic units] | Initiation & Management of Anaesthesia for Head |
| 20214 | Initiation of management of anaesthesia for burr holes of the cranium [9 basic units] | Initiation & Management of Anaesthesia for Head |
| 20216 | Initiation of management of anaesthesia for intracranial vascular procedures including those for aneurysms or arterio-venous abnormalities [20 basic units] | Initiation & Management of Anaesthesia for Head |
| 20220 | Initiation of management of anaesthesia for spinal fluid shunt procedures [10 basic units] | Initiation & Management of Anaesthesia for Head |
| 20222 | Initiation of management of anaesthesia for ablation of an intracranial nerve [6 basic units] | Initiation & Management of Anaesthesia for Head |
| 20225 | Initiation of management of anaesthesia for all cranial bone procedures [12 basic units] | Initiation & Management of Anaesthesia for Head |
| 20230 | Initiation of management of anaesthesia for microvascular free tissue flap surgery involving the head or face [12 basic units] | Initiation & Management of Anaesthesia for Head |

Specialty **Anaesthesia**

Sub-classification: **INTRATHORACIC**

| | | |
|-------|--|--|
| 20500 | Initiation of management of anaesthesia for open procedures on the oesophagus [15 basic units] | Initiation & Management of Anaesthesia for INTRATHORACIC |
| 20520 | Initiation of management of anaesthesia for all closed chest procedures [including rigid oesophagoscopy or bronchoscopy], not being a service to which another item in this Subgroup applies [6 basic units] | Initiation & Management of Anaesthesia for INTRATHORACIC |
| 20522 | Initiation of management of anaesthesia for needle biopsy of pleura [4 basic units] | Initiation & Management of Anaesthesia for INTRATHORACIC |
| 20524 | Initiation of management of anaesthesia for pneumocentesis [4 basic units] | Initiation & Management of Anaesthesia for INTRATHORACIC |
| 20526 | Initiation of management of anaesthesia for thoracoscopy [10 basic units] | Initiation & Management of Anaesthesia for INTRATHORACIC |
| 20528 | Initiation of management of anaesthesia for mediastinoscopy [8 basic units] | Initiation & Management of Anaesthesia for INTRATHORACIC |
| 20540 | Initiation of management of anaesthesia for thoracotomy procedures involving lungs, pleura, diaphragm, or mediastinum, not being a service to which another item in this subgroup applies [13 basic units] | Initiation & Management of Anaesthesia for INTRATHORACIC |

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Mapped to local nomenclature

| | | |
|-------|---|--|
| 20542 | Initiation of management of anaesthesia for pulmonary decortication [15 basic units] | Initiation & Management of Anaesthesia for INTRATHORACIC |
| 20546 | Initiation of management of anaesthesia for pulmonary resection with thoracoplasty [15 basic units] | Initiation & Management of Anaesthesia for INTRATHORACIC |
| 20548 | Initiation of management of anaesthesia for intrathoracic repair of trauma to trachea and bronchi [15 basic units] | Initiation & Management of Anaesthesia for INTRATHORACIC |
| 20560 | Initiation of the management of anaesthesia for: [a] open procedures on the heart, pericardium or great vessels of the chest; or [b] percutaneous insertion of a valvular prosthesis [20 basic units] | Initiation & Management of Anaesthesia for INTRATHORACIC |

Specialty **Anaesthesia**

Sub-classification: **KNEE AND POPLITEAL AREA**

| | | |
|-------|--|--|
| 21300 | Initiation of management of anaesthesia for procedures on the skin or subcutaneous tissue of the knee and/or popliteal area [3 basic units] | Initiation & Management of Anaesthesia for KNEE AND POPLITEAL AREA |
| 21321 | Initiation of management of anaesthesia for procedures on nerves, muscles, tendons, fascia or bursae of knee and/or popliteal area [4 basic units] | Initiation & Management of Anaesthesia for KNEE AND POPLITEAL AREA |
| 21340 | Initiation of management of anaesthesia for closed procedures on lower 1/3 of femur when performed in the operating theatre of a hospital [4 basic units] | Initiation & Management of Anaesthesia for KNEE AND POPLITEAL AREA |
| 21360 | Initiation of management of anaesthesia for open procedures on lower 1/3 of femur [5 basic units] | Initiation & Management of Anaesthesia for KNEE AND POPLITEAL AREA |
| 21380 | Initiation of management of anaesthesia for closed procedures on knee joint when performed in the operating theatre of a hospital [3 basic units] | Initiation & Management of Anaesthesia for KNEE AND POPLITEAL AREA |
| 21382 | Initiation of management of anaesthesia for arthroscopic procedures of knee joint [4 basic units] | Initiation & Management of Anaesthesia for KNEE AND POPLITEAL AREA |
| 21390 | Initiation of management of anaesthesia for closed procedures on upper ends of tibia, fibula, and/or patella when performed in the operating theatre of a hospital [3 basic units] | Initiation & Management of Anaesthesia for KNEE AND POPLITEAL AREA |
| 21392 | Initiation of management of anaesthesia for open procedures on upper ends of tibia, fibula, and/or patella [4 basic units] | Initiation & Management of Anaesthesia for KNEE AND POPLITEAL AREA |
| 21400 | Initiation of management of anaesthesia for open procedures on knee joint, not being a service to which another item in this subgroup applies [4 basic units] | Initiation & Management of Anaesthesia for KNEE AND POPLITEAL AREA |
| 21402 | Initiation of management of anaesthesia for knee replacement [7 basic units] | Initiation & Management of Anaesthesia for KNEE AND POPLITEAL AREA |

Rwanda Medical Procedure Code Database

RMP Code Detailed Nomenclature

Mapped to local nomenclature

| | | |
|-------|--|--|
| 21403 | Initiation of management of anaesthesia for bilateral knee replacement [10 basic units] | Initiation & Management of Anaesthesia for KNEE AND POPLITEAL AREA |
| 21404 | Initiation of management of anaesthesia for disarticulation of knee [5 basic units] | Initiation & Management of Anaesthesia for KNEE AND POPLITEAL AREA |
| 21420 | Initiation of management of anaesthesia for cast application, removal, or repair involving knee joint, undertaken in a hospital [3 basic units] | Initiation & Management of Anaesthesia for KNEE AND POPLITEAL AREA |
| 21430 | Initiation of management of anaesthesia for procedures on veins of knee or popliteal area, not being a service to which another item in this subgroup applies [4 basic units] | Initiation & Management of Anaesthesia for KNEE AND POPLITEAL AREA |
| 21432 | Initiation of management of anaesthesia for repair of arteriovenous fistula of knee or popliteal area [5 basic units] | Initiation & Management of Anaesthesia for KNEE AND POPLITEAL AREA |
| 21440 | Initiation of management of anaesthesia for procedures on arteries of knee or popliteal area, not being a service to which another item in this subgroup applies [8 basic units] | Initiation & Management of Anaesthesia for KNEE AND POPLITEAL AREA |
| 21445 | Initiation of management of anaesthesia for microvascular free tissue flap surgery involving the knee and/or popliteal area [10 basic units] | Initiation & Management of Anaesthesia for KNEE AND POPLITEAL AREA |

Specialty **Anaesthesia**

Sub-classification: **LOWER ABDOMEN**

| | | |
|-------|---|--|
| 20800 | Initiation of management of anaesthesia for procedures on the skin or subcutaneous tissue of the lower anterior abdominal walls, not being a service to which another item in this subgroup applies [3 basic units] | Initiation & Management of Anaesthesia for LOWER ABDOMEN |
| 20802 | Initiation of management of anaesthesia for lipectomy of the lower abdomen [5 basic units] | Initiation & Management of Anaesthesia for LOWER ABDOMEN |
| 20803 | Initiation of management of anaesthesia for all procedures on the nerves, muscles, tendons and fascia of the lower abdominal wall, not being a service to which another item in this Subgroup applies [4 basic units] | Initiation & Management of Anaesthesia for LOWER ABDOMEN |
| 20804 | Initiation of management of anaesthesia for microvascular free tissue flap surgery involving the anterior or posterior lower abdomen [10 basic units] | Initiation & Management of Anaesthesia for LOWER ABDOMEN |
| 20805 | Initiation of management of anaesthesia for diagnostic laparoscopic procedures [6 basic units] | Initiation & Management of Anaesthesia for LOWER ABDOMEN |
| 20806 | Initiation of management of anaesthesia for laparoscopic procedures in the lower abdomen [7 basic units] | Initiation & Management of Anaesthesia for LOWER ABDOMEN |
| 20810 | Initiation of management of anaesthesia for lower intestinal endoscopic procedures [4 basic units] | Initiation & Management of Anaesthesia for LOWER ABDOMEN |

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Mapped to local nomenclature

| | | |
|-------|---|--|
| 20815 | Initiation of management of anaesthesia for extracorporeal shock wave lithotripsy to urinary tract [6 basic units] | Initiation & Management of Anaesthesia for LOWER ABDOMEN |
| 20820 | Initiation of management of anaesthesia for procedures on the skin, its derivatives or subcutaneous tissue of the lower posterior abdominal wall [5 basic units] | Initiation & Management of Anaesthesia for LOWER ABDOMEN |
| 20830 | Initiation of management of anaesthesia for hernia repairs in lower abdomen, not being a service to which another item in this subgroup applies [4 basic units] | Initiation & Management of Anaesthesia for LOWER ABDOMEN |
| 20832 | Initiation of management of anaesthesia for repair of incisional herniae and/or wound dehiscence of the lower abdomen [6 basic units] | Initiation & Management of Anaesthesia for LOWER ABDOMEN |
| 20840 | Initiation of management of anaesthesia for all procedures within the peritoneal cavity in lower abdomen including appendectomy, not being a service to which another item in this subgroup applies [6 basic units] | Initiation & Management of Anaesthesia for LOWER ABDOMEN |
| 20841 | Initiation of management of anaesthesia for bowel resection, including laparoscopic bowel resection not being a service to which another item in this subgroup applies [8 basic units] | Initiation & Management of Anaesthesia for LOWER ABDOMEN |
| 20842 | Initiation of management of anaesthesia for amniocentesis [4 basic units] | Initiation & Management of Anaesthesia for LOWER ABDOMEN |
| 20844 | Initiation of management of anaesthesia for abdominoperineal resection, including pull through procedures, ultra low anterior resection and formation of bowel reservoir [10 basic units] | Initiation & Management of Anaesthesia for LOWER ABDOMEN |
| 20845 | Initiation of management of anaesthesia for radical prostatectomy [10 basic units] | Initiation & Management of Anaesthesia for LOWER ABDOMEN |
| 20846 | Initiation of management of anaesthesia for radical hysterectomy [10 basic units] | Initiation & Management of Anaesthesia for LOWER ABDOMEN |
| 20847 | Initiation of management of anaesthesia for ovarian malignancy [10 basic units] | Initiation & Management of Anaesthesia for LOWER ABDOMEN |
| 20848 | Initiation of management of anaesthesia for pelvic exenteration [10 basic units] | Initiation & Management of Anaesthesia for LOWER ABDOMEN |
| 20850 | Initiation of management of anaesthesia for caesarean section [12 basic units] | Initiation & Management of Anaesthesia for LOWER ABDOMEN |
| 20855 | INITIATION OF MANAGEMENT OF ANAESTHESIA for Caesarean hysterectomy or hysterectomy within 24 hours of birth [15 basic units] | Initiation & Management of Anaesthesia for LOWER ABDOMEN |
| 20860 | Initiation of management of anaesthesia for extraperitoneal procedures in lower abdomen, including those on the urinary tract, not being a service to which another item in this subgroup applies [6 basic units] | Initiation & Management of Anaesthesia for LOWER ABDOMEN |

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| | | |
|-------|--|--|
| 20862 | initiation of management of anaesthesia for renal procedures, including upper 1/3 of ureter [7 basic units] | Initiation & Management of Anaesthesia for LOWER ABDOMEN |
| 20863 | Initiation of management of anaesthesia for nephrectomy [10 basic units] | Initiation & Management of Anaesthesia for LOWER ABDOMEN |
| 20864 | Initiation of management of anaesthesia for total cystectomy [10 basic units] | Initiation & Management of Anaesthesia for LOWER ABDOMEN |
| 20866 | Initiation of management of anaesthesia for adrenalectomy [10 basic units] | Initiation & Management of Anaesthesia for LOWER ABDOMEN |
| 20867 | Initiation of management of anaesthesia for neuro endocrine tumour removal in the lower abdomen [10 basic units] | Initiation & Management of Anaesthesia for LOWER ABDOMEN |
| 20868 | Initiation of management of anaesthesia for renal transplantation [donor or recipient] [10 basic units] | Initiation & Management of Anaesthesia for LOWER ABDOMEN |
| 20880 | Initiation of management of anaesthesia for procedures on major lower abdominal vessels, not being a service to which another item in this Subgroup applies [15 basic units] | Initiation & Management of Anaesthesia for LOWER ABDOMEN |
| 20882 | Initiation of management of anaesthesia for inferior vena cava ligation [10 basic units] | Initiation & Management of Anaesthesia for LOWER ABDOMEN |
| 20884 | Initiation of management of anaesthesia for percutaneous umbrella insertion [5 basic units] | Initiation & Management of Anaesthesia for LOWER ABDOMEN |
| 20886 | Initiation of management of anaesthesia for percutaneous procedures on an intra-abdominal organ in the lower abdomen [6 basic units] | Initiation & Management of Anaesthesia for LOWER ABDOMEN |

Specialty **Anaesthesia**

Sub-classification: **LOWER LEG [BELOW KNEE]**

| | | |
|-------|--|---|
| 21460 | initiation of management of anaesthesia for procedures on the skin or subcutaneous tissue of lower leg, ankle, or foot [3 basic units] | Initiation & Management of Anaesthesia for LOWER LEG [BELOW KNEE] |
| 21461 | Initiation of management of anaesthesia for procedures on nerves, muscles, tendons, or fascia of lower leg, ankle, or foot, not being a service to which another item in this subgroup applies [4 basic units] | Initiation & Management of Anaesthesia for LOWER LEG [BELOW KNEE] |
| 21462 | Initiation of management of anaesthesia for all closed procedures on lower leg, ankle, or foot [3 basic units] | Initiation & Management of Anaesthesia for LOWER LEG [BELOW KNEE] |
| 21464 | Initiation of management of anaesthesia for arthroscopic procedure of ankle joint [4 basic units] | Initiation & Management of Anaesthesia for LOWER LEG [BELOW KNEE] |

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| | | |
|-------|---|---|
| 21472 | Initiation of management of anaesthesia for repair of achilles tendon [5 basic units] | Initiation & Management of Anaesthesia for LOWER LEG [BELOW KNEE] |
| 21474 | Initiation of management of anaesthesia for gastrocnemius recession [5 basic units] | Initiation & Management of Anaesthesia for LOWER LEG [BELOW KNEE] |
| 21480 | Initiation of management of anaesthesia for open procedures on bones of lower leg, ankle, or foot, including amputation, not being a service to which another item in this subgroup applies [4 basic units] | Initiation & Management of Anaesthesia for LOWER LEG [BELOW KNEE] |
| 21482 | Initiation of management of anaesthesia for radical resection of bone involving lower leg, ankle or foot [5 basic units] | Initiation & Management of Anaesthesia for LOWER LEG [BELOW KNEE] |
| 21484 | Initiation of management of anaesthesia for osteotomy or osteoplasty of tibia or fibula [5 basic units] | Initiation & Management of Anaesthesia for LOWER LEG [BELOW KNEE] |
| 21486 | Initiation of management of anaesthesia for total ankle replacement [7 basic units] | Initiation & Management of Anaesthesia for LOWER LEG [BELOW KNEE] |
| 21490 | Initiation of management of anaesthesia for lower leg cast application, removal or repair, undertaken in a hospital [3 basic units] | Initiation & Management of Anaesthesia for LOWER LEG [BELOW KNEE] |
| 21500 | Initiation of management of anaesthesia for procedures on arteries of lower leg, including bypass graft, not being a service to which another item in this subgroup applies [8 basic units] | Initiation & Management of Anaesthesia for LOWER LEG [BELOW KNEE] |
| 21502 | Initiation of management of anaesthesia for embolectomy of the lower leg [6 basic units] | Initiation & Management of Anaesthesia for LOWER LEG [BELOW KNEE] |
| 21520 | Initiation of management of anaesthesia for procedures on veins of lower leg, not being a service to which another item in this subgroup applies [4 basic units] | Initiation & Management of Anaesthesia for LOWER LEG [BELOW KNEE] |
| 21522 | Initiation of management of anaesthesia for venous thrombectomy of the lower leg [5 basic units] | Initiation & Management of Anaesthesia for LOWER LEG [BELOW KNEE] |
| 21530 | Initiation of management of anaesthesia for microsurgical reimplantation of lower leg, ankle or foot [15 basic units] | Initiation & Management of Anaesthesia for LOWER LEG [BELOW KNEE] |
| 21532 | Initiation of management of anaesthesia for microsurgical reimplantation of toe [8 basic units] | Initiation & Management of Anaesthesia for LOWER LEG [BELOW KNEE] |
| 21535 | Initiation of management of anaesthesia for microvascular free tissue flap surgery involving the lower leg [10 basic units] | Initiation & Management of Anaesthesia for LOWER LEG [BELOW KNEE] |

Specialty **Anaesthesia**

Sub-classification: **NECK**

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| | | |
|-------|---|---|
| 20300 | Initiation of management of anaesthesia for procedures on the skin or subcutaneous tissue of the neck not being a service to which another item in this Subgroup applies [5 basic units] | Initiation & Management of Anaesthesia for NECK |
| 20305 | Initiation of management of anaesthesia for incision and drainage of large haematoma, large abscess, cellulitis or similar lesion or epiglottitis causing life threatening airway obstruction [15 basic units] | Initiation & Management of Anaesthesia for NECK |
| 20320 | Initiation of management of anaesthesia for procedures on oesophagus, thyroid, larynx, trachea, lymphatic system, muscles, nerves or other deep tissues of the neck, not being a service to which another item in this subgroup applies [6 basic units] | Initiation & Management of Anaesthesia for NECK |
| 20321 | Initiation of management of anaesthesia for laryngectomy, hemi laryngectomy, laryngopharyngectomy or pharyngectomy [10 basic units] | Initiation & Management of Anaesthesia for NECK |
| 20330 | Initiation of management of anaesthesia for laser surgery to the airway [excluding nose and mouth] [8 basic units] | Initiation & Management of Anaesthesia for NECK |
| 20350 | Initiation of management of anaesthesia for procedures on major vessels of neck, not being a service to which another item in this subgroup applies [10 basic units] | Initiation & Management of Anaesthesia for NECK |
| 20352 | Initiation of management of anaesthesia for simple ligation of major vessels of neck [5 basic units] | Initiation & Management of Anaesthesia for NECK |
| 20355 | Initiation of management of anaesthesia for microvascular free tissue flap surgery involving the neck [12 basic units] | Initiation & Management of Anaesthesia for NECK |

Specialty **Anaesthesia**

Sub-classification: **PELVIS [EXCEPT HIP]**

| | | |
|-------|--|--|
| 21100 | Initiation of management of anaesthesia for procedures on the skin or subcutaneous tissue of the anterior pelvic region [anterior to iliac crest], except external genitalia [3 basic units] | Initiation & Management of Anaesthesia for PELVIS [EXCEPT HIP] |
| 21110 | Initiation of management of anaesthesia for procedures on the skin, its derivatives or subcutaneous tissue of the pelvic region [posterior to iliac crest], except perineum [5 basic units] | Initiation & Management of Anaesthesia for PELVIS [EXCEPT HIP] |
| 21112 | Initiation of management of anaesthesia for percutaneous bone marrow biopsy of the anterior iliac crest [4 basic units] | Initiation & Management of Anaesthesia for PELVIS [EXCEPT HIP] |
| 21114 | Initiation of management of anaesthesia for percutaneous bone marrow biopsy of the posterior iliac crest [5 basic units] | Initiation & Management of Anaesthesia for PELVIS [EXCEPT HIP] |
| 21116 | Initiation of management of anaesthesia for percutaneous bone marrow harvesting from the pelvis [6 basic units] | Initiation & Management of Anaesthesia for PELVIS [EXCEPT HIP] |
| 21120 | Initiation of management of anaesthesia for procedures on the bony pelvis [6 basic units] | Initiation & Management of Anaesthesia for PELVIS [EXCEPT HIP] |

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| | | |
|-------|---|--|
| 21130 | Initiation of management of anaesthesia for body cast application or revision when performed in the operating theatre of a hospital [3 basic units] | Initiation & Management of Anaesthesia for PELVIS [EXCEPT HIP] |
| 21140 | Initiation of management of anaesthesia for interpelviabdominal [hind-quarter] amputation [15 basic units] | Initiation & Management of Anaesthesia for PELVIS [EXCEPT HIP] |
| 21150 | Initiation of management of anaesthesia for radical procedures for tumour of the pelvis, except hind-quarter amputation [10 basic units] | Initiation & Management of Anaesthesia for PELVIS [EXCEPT HIP] |
| 21155 | Initiation of management of anaesthesia for microvascular free tissue flap surgery involving the anterior or posterior pelvis [10 basic units] | Initiation & Management of Anaesthesia for PELVIS [EXCEPT HIP] |
| 21160 | Initiation of management of anaesthesia for closed procedures involving symphysis pubis or sacroiliac joint when performed in the operating theatre of a hospital [4 basic units] | Initiation & Management of Anaesthesia for PELVIS [EXCEPT HIP] |
| 21170 | Initiation of management of anaesthesia for open procedures involving symphysis pubis or sacroiliac joint [8 basic units] | Initiation & Management of Anaesthesia for PELVIS [EXCEPT HIP] |

Specialty **Anaesthesia**

Sub-classification: **PERINEUM**

| | | |
|-------|--|---|
| 20900 | Initiation of management of anaesthesia for procedures on the skin or subcutaneous tissue of the perineum not being a service to which another item in this subgroup applies [3 basic units] | Initiation & Management of Anaesthesia for PERINEUM |
| 20902 | Initiation of management of anaesthesia for anorectal procedures [including endoscopy and/or biopsy] [4 basic units] | Initiation & Management of Anaesthesia for PERINEUM |
| 20904 | Initiation of management of anaesthesia for radical perineal procedures including radical perineal prostatectomy or radical vulvectomy [7 basic units] | Initiation & Management of Anaesthesia for PERINEUM |
| 20905 | Initiation of management of anaesthesia for microvascular free tissue flap surgery involving the perineum [10 basic units] | Initiation & Management of Anaesthesia for PERINEUM |
| 20906 | Initiation of management of anaesthesia for vulvectomy [4 basic units] | Initiation & Management of Anaesthesia for PERINEUM |
| 20910 | Initiation of management of anaesthesia for transurethral procedures [including urethroscopy], not being a service to which another item in this subgroup applies [4 basic units] | Initiation & Management of Anaesthesia for PERINEUM |
| 20911 | Initiation of management of anaesthesia for endoscopic ureteroscopic surgery including laser procedures [5 basic units] | Initiation & Management of Anaesthesia for PERINEUM |
| 20912 | Initiation of management of anaesthesia for transurethral resection of bladder tumour[s] [5 basic units] | Initiation & Management of Anaesthesia for PERINEUM |

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| | | |
|-------|---|---|
| 20914 | Initiation of management of anaesthesia for transurethral resection of prostate [7 basic units] | Initiation & Management of Anaesthesia for PERINEUM |
| 20916 | Initiation of management of anaesthesia for bleeding post-transurethral resection [7 basic units] | Initiation & Management of Anaesthesia for PERINEUM |
| 20920 | Initiation of management of anaesthesia for procedures on external genitalia, not being a service to which another item in this Subgroup applies. [4 basic units] | Initiation & Management of Anaesthesia for PERINEUM |
| 20924 | Initiation of management of anaesthesia for procedures on undescended testis, unilateral or bilateral [4 basic units] | Initiation & Management of Anaesthesia for PERINEUM |
| 20926 | Initiation of management of anaesthesia for radical orchidectomy, inguinal approach [4 basic units] | Initiation & Management of Anaesthesia for PERINEUM |
| 20928 | Initiation of management of anaesthesia for radical orchidectomy, abdominal approach [6 basic units] | Initiation & Management of Anaesthesia for PERINEUM |
| 20930 | Initiation of management of anaesthesia for orchiopexy, unilateral or bilateral [4 basic units] | Initiation & Management of Anaesthesia for PERINEUM |
| 20932 | Initiation of management of anaesthesia for complete amputation of penis [4 basic units] | Initiation & Management of Anaesthesia for PERINEUM |
| 20934 | Initiation of management of anaesthesia for complete amputation of penis with bilateral inguinal lymphadenectomy [6 basic units] | Initiation & Management of Anaesthesia for PERINEUM |
| 20936 | Initiation of management of anaesthesia for complete amputation of penis with bilateral inguinal and iliac lymphadenectomy [8 basic units] | Initiation & Management of Anaesthesia for PERINEUM |
| 20938 | Initiation of management of anaesthesia for insertion of penile prosthesis [4 basic units] | Initiation & Management of Anaesthesia for PERINEUM |
| 20940 | Initiation of management of anaesthesia for per vagina and vaginal procedures [including biopsy of vagina, cervix or endometrium], not being a service to which another item in this Subgroup applies [4 basic units] | Initiation & Management of Anaesthesia for PERINEUM |
| 20942 | Initiation of management of anaesthesia for vaginal procedures including repair operations and urinary incontinence procedures [perineal] [5 basic units] | Initiation & Management of Anaesthesia for PERINEUM |
| 20943 | Initiation of management of anaesthesia for transvaginal assisted reproductive services [4 basic units] | Initiation & Management of Anaesthesia for PERINEUM |
| 20944 | Initiation of management of anaesthesia for vaginal hysterectomy [6 basic units] | Initiation & Management of Anaesthesia for PERINEUM |

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| | | |
|-------|---|---|
| 20946 | INITIATION OF MANAGEMENT OF ANAESTHESIA for vaginal birth [8 basic units] | Initiation & Management of Anaesthesia for PERINEUM |
| 20948 | Initiation of management of anaesthesia for purse string ligation of cervix, or removal of purse string ligature, or removal of purse string ligature [4 basic units] | Initiation & Management of Anaesthesia for PERINEUM |
| 20950 | Initiation of management of anaesthesia for culdoscopy [5 basic units] | Initiation & Management of Anaesthesia for PERINEUM |
| 20952 | Initiation of management of anaesthesia for hysteroscopy [4 basic units] | Initiation & Management of Anaesthesia for PERINEUM |
| 20953 | Initiation of management of anaesthesia for endometrial ablation or resection in association with hysteroscopy [5 basic units] | Initiation & Management of Anaesthesia for PERINEUM |
| 20954 | Initiation of management of anaesthesia for correction of inverted uterus [10 basic units] | Initiation & Management of Anaesthesia for PERINEUM |
| 20956 | Initiation of management of anaesthesia for evacuation of retained products of conception, as a complication of confinement [4 basic units] | Initiation & Management of Anaesthesia for PERINEUM |
| 20958 | INITIATION OF MANAGEMENT OF ANAESTHESIA for manual removal of retained placenta or for repair of vaginal or perineal tear following birth [5 basic units] | Initiation & Management of Anaesthesia for PERINEUM |
| 20960 | Initiation of management of anaesthesia for vaginal procedures in the management of post partum haemorrhage [blood loss > 500mls] [7 basic units] | Initiation & Management of Anaesthesia for PERINEUM |

Specialty **Anaesthesia**

Sub-classification: **SHOULDER AND AXILLA**

| | | |
|-------|---|--|
| 21600 | Initiation of management of anaesthesia for procedures on the skin or subcutaneous tissue of the shoulder or axilla [3 basic units] | Initiation & Management of Anaesthesia for SHOULDER AND AXILLA |
| 21610 | Initiation of management of anaesthesia for procedures on nerves, muscles, tendons, fascia or bursae of shoulder or axilla including axillary dissection [5 basic units] | Initiation & Management of Anaesthesia for SHOULDER AND AXILLA |
| 21620 | Initiation of management of anaesthesia for closed procedures on humeral head and neck, sternoclavicular joint, acromioclavicular joint, or shoulder joint when performed in the operating theatre of a hospital [4 basic units] | Initiation & Management of Anaesthesia for SHOULDER AND AXILLA |
| 21622 | Initiation of management of anaesthesia for arthroscopic procedures of shoulder joint [5 basic units] | Initiation & Management of Anaesthesia for SHOULDER AND AXILLA |
| 21630 | Initiation of management of anaesthesia for open procedures on humeral head and neck, sternoclavicular joint, acromioclavicular joint or shoulder joint, not being a service to which another item in this subgroup applies [5 basic units] | Initiation & Management of Anaesthesia for SHOULDER AND AXILLA |

Rwanda Medical Procedure Code Database

RMP Code Detailed Nomenclature

Mapped to local nomenclature

| | | |
|-------|---|--|
| 21632 | Initiation of management of anaesthesia for radical resection involving humeral head and neck, sternoclavicular joint, acromioclavicular joint or shoulder joint [6 basic units] | Initiation & Management of Anaesthesia for SHOULDER AND AXILLA |
| 21634 | Initiation of management of anaesthesia for shoulder disarticulation [9 basic units] | Initiation & Management of Anaesthesia for SHOULDER AND AXILLA |
| 21636 | Initiation of management of anaesthesia for interthoracoscapular [forequarter] amputation [15 basic units] | Initiation & Management of Anaesthesia for SHOULDER AND AXILLA |
| 21638 | Initiation of management of anaesthesia for total shoulder replacement [10 basic units] | Initiation & Management of Anaesthesia for SHOULDER AND AXILLA |
| 21650 | Initiation of management of anaesthesia for procedures on arteries of shoulder or axilla, not being a service to which another item in this subgroup applies [8 basic units] | Initiation & Management of Anaesthesia for SHOULDER AND AXILLA |
| 21652 | Initiation of management of anaesthesia for procedures for axillary-brachial aneurysm [10 basic units] | Initiation & Management of Anaesthesia for SHOULDER AND AXILLA |
| 21654 | Initiation of management of anaesthesia for bypass graft of arteries of shoulder or axilla [8 basic units] | Initiation & Management of Anaesthesia for SHOULDER AND AXILLA |
| 21656 | Initiation of management of anaesthesia for axillary-femoral bypass graft [10 basic units] | Initiation & Management of Anaesthesia for SHOULDER AND AXILLA |
| 21670 | Initiation of management of anaesthesia for procedures on veins of shoulder or axilla [4 basic units] | Initiation & Management of Anaesthesia for SHOULDER AND AXILLA |
| 21680 | Initiation of management of anaesthesia for shoulder cast application, removal or repair, not being a service to which another item in this subgroup applies, when undertaken in a hospital [3 basic units] | Initiation & Management of Anaesthesia for SHOULDER AND AXILLA |
| 21682 | Initiation of management of anaesthesia for shoulder spica application when undertaken in a hospital [4 basic units] | Initiation & Management of Anaesthesia for SHOULDER AND AXILLA |
| 21685 | Initiation of management of anaesthesia for microvascular free tissue flap surgery involving the shoulder or the axilla [10 basic units] | Initiation & Management of Anaesthesia for SHOULDER AND AXILLA |

Specialty **Anaesthesia**

Sub-classification: **SPINE AND SPINAL CORD**

| | | |
|-------|---|--|
| 20600 | Initiation of management of anaesthesia for procedures on cervical spine and/or cord, not being a service to which another item in this subgroup applies [for myelography and discography see Items 21908 and 21914] [10 basic units] | Initiation & Management of Anaesthesia for SPINE AND SPINAL CORD |
| 20604 | Initiation of management of anaesthesia for posterior cervical laminectomy with the patient in the sitting position [13 basic units] | Initiation & Management of Anaesthesia for SPINE AND SPINAL CORD |

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Mapped to local nomenclature

| | | |
|-------|---|--|
| 20620 | Initiation of management of anaesthesia for procedures on thoracic spine and/or cord, not being a service to which another item in this subgroup applies [10 basic units] | Initiation & Management of Anaesthesia for SPINE AND SPINAL CORD |
| 20622 | Initiation of management of anaesthesia for thoracolumbar sympathectomy [13 basic units] | Initiation & Management of Anaesthesia for SPINE AND SPINAL CORD |
| 20630 | Initiation of management of anaesthesia for procedures in lumbar region, not being a service to which another item in this subgroup applies [8 basic units] | Initiation & Management of Anaesthesia for SPINE AND SPINAL CORD |
| 20632 | Initiation of management of anaesthesia for lumbar sympathectomy [7 basic units] | Initiation & Management of Anaesthesia for SPINE AND SPINAL CORD |
| 20634 | Initiation of management of anaesthesia for chemonucleolysis [10 basic units] | Initiation & Management of Anaesthesia for SPINE AND SPINAL CORD |
| 20670 | Initiation of management of anaesthesia for extensive spine and/or spinal cord procedures [13 basic units] | Initiation & Management of Anaesthesia for SPINE AND SPINAL CORD |
| 20680 | Initiation of management of anaesthesia for manipulation of spine when performed in the operating theatre of a hospital [3 basic units] | Initiation & Management of Anaesthesia for SPINE AND SPINAL CORD |
| 20690 | Initiation of management of anaesthesia for percutaneous spinal procedures, not being a service to which another item in this subgroup applies [5 basic units] | Initiation & Management of Anaesthesia for SPINE AND SPINAL CORD |

Specialty **Anaesthesia**

Sub-classification: **THERAPEUTIC AND DIAGNOSTIC SERVICES**

| | | |
|-------|---|--|
| 22001 | Collection of blood for autologous transfusion or when homologous blood is required for immediate transfusion in an emergency situation, when performed in association with the administration of anaesthesia [3 basic units] | Collection of Blood during anaesthesia |
| 22002 | Administration of blood or bone marrow already collected when performed in association with the administration of anaesthesia [4 basic units] | Administration of blood/bone marrow during anaesthesia |
| 22007 | Endotracheal intubation with flexible fiberoptic scope associated with difficult airway when performed in association with the administration of anaesthesia [4 basic units] | Endotracheal Intupation |
| 22008 | Double lumen endobronchial tube or bronchial blocker, insertion of when performed in association with the administration of anaesthesia [4 basic units] | Double lumen Endobronchial Tube insertion |
| 22012 | Blood pressure monitoring [central venous, pulmonary arterial, systemic arterial or cardiac intracavity], by indwelling catheter - once only for each type of pressure on any calendar day, up to a maximum of 4 pressures [not being a service to which item 13876 applies] when performed in association with the administration of anaesthesia [3 basic units] | Blood pressure monitoring |
| 22014 | Blood pressure monitoring [central venous, pulmonary arterial, systemic arterial or cardiac intracavity], by indwelling catheter - once only for each type of pressure on any calendar day, up to a maximum of 4 pressures [not being a service | Blood pressure monitoring |

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| | | |
|-------|--|---|
| | to which item 13876 applies] when performed in association with the administration of anaesthesia relating to another discrete operation on the same day [3 basic units] | |
| 22015 | Right heart balloon catheter, insertion of, including pulmonary wedge pressure and cardiac output measurement, when performed in association with the administration of anaesthesia [6 basic units] | Heart balloon catheter insertion |
| 22018 | Measurement of the mechanical or gas exchange function of the respiratory system, using measurements of parameters, including pressures, volumes, flow, gas concentrations in inspired or expired air, alveolar gas or blood and incorporating serial arterial blood gas analysis and a written record of the results, when performed in association with the administration of anaesthesia, not being a service associated with a service to which item 11503 applies [7 basic units] | MEASUREMENT OF THE MECHANICAL OR GAS EXCHANGE |
| 22020 | Central vein catheterisation by percutaneous or open exposure, not being a service to which item 13318 applies, when performed in association with the administration of anaesthesia [4 basic units] | Central vein Catheterisation |
| 22025 | Intraarterial cannulation when performed in association with the administration of anaesthesia [4 basic units] | Intraarterial cannulation |
| 22031 | Intrathecal or epidural injection [initial] of a therapeutic substance or substances, with or without insertion of a catheter, in association with anaesthesia and surgery, for postoperative pain management, not being a service associated with a service to which 22036 applies [5 basic units] | INTRATHECAL or EPIDURAL INJECTION [initial] |
| 22036 | Intrathecal or epidural injection [subsequent] of a therapeutic substance or substances, using an in-situ catheter, in association with anaesthesia and surgery, for postoperative pain management, not being a service associated with a service to which 22031 applies [3 basic units] | INTRATHECAL or EPIDURAL INJECTION [subsequent] |
| 22040 | Introduction of a regional or field nerve block peri-operatively performed in the induction room theatre or recovery room for the control of post operative pain via the femoral or sciatic nerves, in conjunction with hip, knee, ankle or foot surgery [2 basic units] | Field nerve block |
| 22045 | Introduction of a regional or field nerve block peri-operatively performed in the induction room, theatre or recovery room for the control of post operative pain via the femoral and sciatic nerves, in conjunction with hip, knee, ankle or foot surgery [3 basic units] | Field nerve block |
| 22050 | Introduction of a regional or field nerve block peri-operatively performed in the induction room, theatre or recovery room for the control of post operative pain via the brachial plexus in conjunction with shoulder surgery [2 basic units] | Field nerve block |
| 22051 | Intra-operative transoesophageal echocardiography - monitoring in real time of the structure and function of the heart chambers, valves and surrounding structures, including assessment of blood flow, with appropriate permanent recording during procedures on the heart, pericardium or great vessels of the chest [not in association with items 55130, 55135 or 21936] [9 basic units] | INTRA-OPERATIVE TRANSOESOPHAGEAL ECHOCARDIOGRAPHY |
| 22055 | Perfusion of limb or organ using heart-lung machine or equivalent, not being a service associated with anaesthesia to which an item in subgroup 21 applies [12 basic units] | PERFUSION OF LIMB OR ORGAN using heart-lung machine |

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Mapped to local nomenclature

| | | |
|-------|---|--|
| 22060 | Whole body perfusion, cardiac bypass, where the heart-lung machine or equivalent is continuously operated by a medical perfusionist, other than a service associated with anaesthesia to which an item in subgroup 21 applies. [20 basic units] | WHOLE BODY PERFUSION, CARDIAC [20BYPASS basic units] |
| 22065 | induced controlled hypothermia total body, being a service to which item 22060 applies, not being a service associated with anaesthesia to which an item in subgroup 21 applies [5 basic units] | INDUCED CONTROLLED HYPOTHERMIA total body |
| 22070 | Cardioplegia, blood or crystalloid, administration by any route, being a service to which item 22060 applies, not being a service associated with anaesthesia to which an item in subgroup 21 applies [10 basic units] | CARDIOPLEGIA |
| 22075 | Deep hypothermic circulatory arrest, with core temperature less than 22 c, including management of retrograde cerebral perfusion if performed, not being a service associated with anaesthesia to which an item in subgroup 21 applies [15 basic units] | DEEP HYPOTHERMIC CIRCULATORY ARREST |

Specialty **Anaesthesia**

Sub-classification: **THORAX**

| | | |
|-------|---|---|
| 20400 | Initiation of management of anaesthesia for procedures on the skin or subcutaneous tissue of the anterior part of the chest, not being a service to which another item in this subgroup applies [3 basic units] | Initiation & Management of Anaesthesia for THORAX |
| 20401 | Initiation of management of anaesthesia for procedures on the breast, not being a service to which another item in this subgroup applies [4 basic units] | Initiation & Management of Anaesthesia for THORAX |
| 20402 | Initiation of management of anaesthesia for reconstructive procedures on breast [5 basic units] | Initiation & Management of Anaesthesia for THORAX |
| 20403 | Initiation of management of anaesthesia for removal of breast lump or for breast segmentectomy where axillary node dissection is performed [5 basic units] | Initiation & Management of Anaesthesia for THORAX |
| 20404 | Initiation of management of anaesthesia for mastectomy [6 basic units] | Initiation & Management of Anaesthesia for THORAX |
| 20405 | Initiation of management of anaesthesia for reconstructive procedures on the breast using myocutaneous flaps [8 basic units] | Initiation & Management of Anaesthesia for THORAX |
| 20406 | Initiation of management of anaesthesia for radical or modified radical procedures on breast with internal mammary node dissection [13 basic units] | Initiation & Management of Anaesthesia for THORAX |
| 20410 | Initiation of management of anaesthesia for electrical conversion of arrhythmias [5 basic units] | Initiation & Management of Anaesthesia for THORAX |
| 20420 | Initiation of management of anaesthesia for procedures on the skin or subcutaneous tissue of the posterior part of the chest not being a service to which another item in this Subgroup applies [5 basic units] | Initiation & Management of Anaesthesia for THORAX |
| 20440 | Initiation of management of anaesthesia for percutaneous bone marrow biopsy of the sternum [4 basic units] | Initiation & Management of Anaesthesia for |

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Mapped to local nomenclature

| | | THORAX |
|-------|--|---|
| 20450 | Initiation of management of anaesthesia for procedures on clavicle, scapula or sternum, not being a service to which another item in this subgroup applies [5 basic units] | Initiation & Management of Anaesthesia for THORAX |
| 20452 | Initiation of management of anaesthesia for radical surgery on clavicle, scapula or sternum [6 basic units] | Initiation & Management of Anaesthesia for THORAX |
| 20470 | Initiation of management of anaesthesia for partial rib resection, not being a service to which another item in this subgroup applies [6 basic units] | Initiation & Management of Anaesthesia for THORAX |
| 20472 | Initiation of management of anaesthesia for thoracoplasty [10 basic units] | Initiation & Management of Anaesthesia for THORAX |
| 20474 | Initiation of management of anaesthesia for radical procedures on chest wall [13 basic units] | Initiation & Management of Anaesthesia for THORAX |
| 20475 | Initiation of management of anaesthesia for microvascular free tissue flap surgery involving the anterior or posterior thorax [10 basic units] | Initiation & Management of Anaesthesia for THORAX |

Specialty **Anaesthesia**

Sub-classification: **UPPER ABDOMEN**

| | | |
|-------|---|--|
| 20700 | Initiation of management of anaesthesia for procedures on the skin or subcutaneous tissue of the upper anterior abdominal wall, not being a service to which another item in this subgroup applies [3 basic units] | Initiation & Management of Anaesthesia for UPPER ABDOMEN |
| 20702 | Initiation of management of anaesthesia for percutaneous liver biopsy [4 basic units] | Initiation & Management of Anaesthesia for UPPER ABDOMEN |
| 20703 | Initiation of management of anaesthesia for all procedures on the nerves, muscles, tendons and fascia of the upper abdominal wall, not being a service to which another item in this Subgroup applies [4 basic units] | Initiation & Management of Anaesthesia for UPPER ABDOMEN |
| 20704 | Initiation of management of anaesthesia for microvascular free tissue flap surgery involving the anterior or posterior upper abdomen [10 basic units] | Initiation & Management of Anaesthesia for UPPER ABDOMEN |
| 20705 | Initiation of management of anaesthesia for diagnostic laparoscopy procedures [6 basic units] | Initiation & Management of Anaesthesia for UPPER ABDOMEN |
| 20706 | Initiation of management of anaesthesia for laparoscopic procedures in the upper abdomen, not being a service to which another item in this subgroup applies [7 basic units] | Initiation & Management of Anaesthesia for UPPER ABDOMEN |
| 20730 | Initiation of management of anaesthesia for procedures on the skin or subcutaneous tissue of the upper posterior abdominal wall, not being a service to which another item in this subgroup applies [5 basic units] | Initiation & Management of Anaesthesia for UPPER ABDOMEN |
| 20740 | Initiation of management of anaesthesia for upper gastrointestinal endoscopic procedures [5 basic units] | Initiation & Management of Anaesthesia for |

Rwanda Medical Procedure Code Database

RMP Code Detailed Nomenclature

Mapped to local nomenclature

| | | UPPER ABDOMEN |
|-------|---|--|
| 20745 | Initiation of management of anaesthesia for upper gastrointestinal endoscopic procedures in association with acute gastrointestinal haemorrhage [6 basic units] | Initiation & Management of Anaesthesia for UPPER ABDOMEN |
| 20750 | Initiation of management of anaesthesia for hernia repairs in upper abdomen, not being a service to which another item in this subgroup applies [4 basic units] | Initiation & Management of Anaesthesia for UPPER ABDOMEN |
| 20752 | Initiation of management of anaesthesia for repair of incisional hernia and/or wound dehiscence [6 basic units] | Initiation & Management of Anaesthesia for UPPER ABDOMEN |
| 20754 | Initiation of management of anaesthesia for procedures on an omphalocele [7 basic units] | Initiation & Management of Anaesthesia for UPPER ABDOMEN |
| 20756 | Initiation of management of anaesthesia for transabdominal repair of diaphragmatic hernia [9 basic units] | Initiation & Management of Anaesthesia for UPPER ABDOMEN |
| 20770 | Initiation of management of anaesthesia for procedures on major upper abdominal blood vessels [15 basic units] | Initiation & Management of Anaesthesia for UPPER ABDOMEN |
| 20790 | Initiation of management of anaesthesia for procedures within the peritoneal cavity in upper abdomen including cholecystectomy, gastrectomy, laparoscopic nephrectomy or bowel shunts [8 basic units] | Initiation & Management of Anaesthesia for UPPER ABDOMEN |
| 20791 | Initiation of the management of anaesthesia for bariatric surgery in a patient with clinically severe obesity [10 basic units] | Initiation & Management of Anaesthesia for UPPER ABDOMEN |
| 20792 | Initiation of management of anaesthesia for partial hepatectomy [excluding liver biopsy] [13 basic units] | Initiation & Management of Anaesthesia for UPPER ABDOMEN |
| 20793 | Initiation of management of anaesthesia for extended or trisegmental hepatectomy [15 basic units] | Initiation & Management of Anaesthesia for UPPER ABDOMEN |
| 20794 | Initiation of management of anaesthesia for pancreatectomy, partial or total [12 basic units] | Initiation & Management of Anaesthesia for UPPER ABDOMEN |
| 20798 | Initiation of management of anaesthesia for neuro endocrine tumour removal in the upper abdomen [10 basic units] | Initiation & Management of Anaesthesia for UPPER ABDOMEN |
| 20799 | Initiation of management of anaesthesia for percutaneous procedures on an intra-abdominal organ in the upper abdomen [6 basic units] | Initiation & Management of Anaesthesia for UPPER ABDOMEN |

Specialty **Anaesthesia**

Sub-classification: **UPPER ARM AND ELBOW**

| | | |
|-------|--|--|
| 21700 | Initiation of management of anaesthesia for procedures on the skin or subcutaneous tissue of the upper arm or elbow [3 | Initiation & Management of Anaesthesia for |
|-------|--|--|

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Mapped to local nomenclature

| | basic units] | UPPER ARM AND ELBOW |
|-------|--|--|
| 21710 | Initiation of management of anaesthesia for procedures on nerves, muscles, tendons, fascia or bursae of upper arm or elbow, not being a service to which another item in this subgroup applies [4 basic units] | Initiation & Management of Anaesthesia for UPPER ARM AND ELBOW |
| 21712 | Initiation of management of anaesthesia for open tenotomy of the upper arm or elbow [5 basic units] | Initiation & Management of Anaesthesia for UPPER ARM AND ELBOW |
| 21714 | Initiation of management of anaesthesia for tenoplasty of the upper arm or elbow [5 basic units] | Initiation & Management of Anaesthesia for UPPER ARM AND ELBOW |
| 21716 | Initiation of management of anaesthesia for tenodesis for rupture of long tendon of biceps [5 basic units] | Initiation & Management of Anaesthesia for UPPER ARM AND ELBOW |
| 21730 | Initiation of management of anaesthesia for closed procedures on the upper arm or elbow when performed in the operating theatre of a hospital [3 basic units] | Initiation & Management of Anaesthesia for UPPER ARM AND ELBOW |
| 21732 | Initiation of management of anaesthesia for arthroscopic procedures of elbow joint [4 basic units] | Initiation & Management of Anaesthesia for UPPER ARM AND ELBOW |
| 21740 | Initiation of management of anaesthesia for open procedures on the upper arm or elbow, not being a service to which another item in this subgroup applies [5 basic units] | Initiation & Management of Anaesthesia for UPPER ARM AND ELBOW |
| 21756 | Initiation of management of anaesthesia for radical procedures on the upper arm or elbow [6 basic units] | Initiation & Management of Anaesthesia for UPPER ARM AND ELBOW |
| 21760 | Initiation of management of anaesthesia for total elbow replacement [7 basic units] | Initiation & Management of Anaesthesia for UPPER ARM AND ELBOW |
| 21770 | Initiation of management of anaesthesia for procedures on arteries of upper arm, not being a service to which another item in this subgroup applies [8 basic units] | Initiation & Management of Anaesthesia for UPPER ARM AND ELBOW |
| 21772 | Initiation of management of anaesthesia for embolectomy of arteries of the upper arm [6 basic units] | Initiation & Management of Anaesthesia for UPPER ARM AND ELBOW |
| 21780 | Initiation of management of anaesthesia for procedures on veins of upper arm, not being a service to which another item in this subgroup applies [4 basic units] | Initiation & Management of Anaesthesia for UPPER ARM AND ELBOW |
| 21785 | Initiation of management of anaesthesia for microvascular free tissue flap surgery involving the upper arm or elbow [10 basic units] | Initiation & Management of Anaesthesia for UPPER ARM AND ELBOW |
| 21790 | Initiation of management of anaesthesia for microsurgical reimplantation of upper arm [15 basic units] | Initiation & Management of Anaesthesia for UPPER ARM AND ELBOW |

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Mapped to local nomenclature

| Specialty | Anaesthesia | Sub-classification: UPPER LEG [EXCEPT KNEE] | |
|-----------|--|--|--|
| 21195 | Initiation of management of anaesthesia for procedures on the skins or subcutaneous tissue of the upper leg [3 basic units] | | Initiation & Management of Anaesthesia for UPPER LEG [EXCEPT KNEE] |
| 21199 | Initiation of management of anaesthesia for procedures on nerves, muscles, tendons, fascia or bursae of the upper leg [4 basic units] | | Initiation & Management of Anaesthesia for UPPER LEG [EXCEPT KNEE] |
| 21200 | Initiation of management of anaesthesia for closed procedures involving hip joint when performed in the operating theatre of a hospital [4 basic units] | | Initiation & Management of Anaesthesia for UPPER LEG [EXCEPT KNEE] |
| 21202 | Initiation of management of anaesthesia for arthroscopic procedures of the hip joint [4 basic units] | | Initiation & Management of Anaesthesia for UPPER LEG [EXCEPT KNEE] |
| 21210 | Initiation of management of anaesthesia for open procedures involving hip joint, not being a service to which another item in this subgroup applies [6 basic units] | | Initiation & Management of Anaesthesia for UPPER LEG [EXCEPT KNEE] |
| 21212 | Initiation of management of anaesthesia for hip disarticulation [10 basic units] | | Initiation & Management of Anaesthesia for UPPER LEG [EXCEPT KNEE] |
| 21214 | Initiation of management of anaesthesia for total hip replacement or revision [10 basic units] | | Initiation & Management of Anaesthesia for UPPER LEG [EXCEPT KNEE] |
| 21216 | Initiation of management of anaesthesia for bilateral total hip replacement [14 basic units] | | Initiation & Management of Anaesthesia for UPPER LEG [EXCEPT KNEE] |
| 21220 | Initiation of management of anaesthesia for closed procedures involving upper 2/3 of femur when performed in the operating theatre of a hospital [4 basic units] | | Initiation & Management of Anaesthesia for UPPER LEG [EXCEPT KNEE] |
| 21230 | Initiation of management of anaesthesia for open procedures involving upper 2/3 of femur, not being a service to which another item in this subgroup applies [6 basic units] | | Initiation & Management of Anaesthesia for UPPER LEG [EXCEPT KNEE] |
| 21232 | Initiation of management of anaesthesia for above knee amputation [5 basic units] | | Initiation & Management of Anaesthesia for UPPER LEG [EXCEPT KNEE] |
| 21234 | Initiation of management of anaesthesia for radical resection of the upper 2/3 of femur [8 basic units] | | Initiation & Management of Anaesthesia for UPPER LEG [EXCEPT KNEE] |
| 21260 | Initiation of management of anaesthesia for procedures involving veins of upper leg, including exploration [4 basic units] | | Initiation & Management of Anaesthesia for UPPER LEG [EXCEPT KNEE] |
| 21270 | Initiation of management of anaesthesia for procedures involving arteries of upper leg, including bypass graft, not being a service to which another item in this subgroup applies [8 basic units] | | Initiation & Management of Anaesthesia for UPPER LEG [EXCEPT KNEE] |

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| 21272 | Initiation of management of anaesthesia for femoral artery ligation [4 basic units] | Initiation & Management of Anaesthesia for UPPER LEG [EXCEPT KNEE] |
| 21274 | Initiation of management of anaesthesia for femoral artery embolectomy [6 basic units] | Initiation & Management of Anaesthesia for UPPER LEG [EXCEPT KNEE] |
| 21275 | Initiation of management of anaesthesia for microvascular free tissue flap surgery involving the upper leg [10 basic units] | Initiation & Management of Anaesthesia for UPPER LEG [EXCEPT KNEE] |
| 21280 | Initiation of management of anaesthesia for microsurgical reimplantation of upper leg [15 basic units] | Initiation & Management of Anaesthesia for UPPER LEG [EXCEPT KNEE] |

Specialty **Anaesthesia**

Sub-classification: **Visite pre anesthésique par A1**

| | | |
|------|---|-------------------------|
| C6-3 | Pre anesthetic visit nurse or paramedical | Pre anesthetic A1 visit |
|------|---|-------------------------|

Specialty **Anaesthesia**

Sub-classification: **Visite pre anesthésique par anesthésiste A0**

| | | |
|--|-------------------------------------|-------------------------------------|
| | Anesthesist A0 Pre anesthetic visit | Anesthesist A0 Pre anesthetic visit |
|--|-------------------------------------|-------------------------------------|

Specialty **Anaesthesia**

Sub-classification: **Visite pre anesthésique par le medecin spécialiste**

| | | |
|------|--|--|
| C6-1 | Pre anesthetic Specialist medical doctor visit | Pre anesthetic Specialist medical doctor visit |
|------|--|--|

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| Specialty | Consultation | Sub-classification: | |
|-----------|---|---------------------|--|
| 82100 | Initial antenatal professional attendance by a participating midwife, lasting at least 40 minutes, including all of the following:[a] taking a detailed patient history;[b] performing a comprehensive examination;[c] performing a risk assessment;[d] based on the risk assessment - arranging referral or transfer of the patient s care to an obstetrician;[e] requesting pathology and diagnostic imaging services, when necessary; [f] discussing with the patient the collaborative arrangements for her maternity care and recording the arrangements in the midwife s written records in accordance with section 2e of the health insurance regulations 1975. payable once only for any pregnancy. | | Antenatal consultation |
| C10 | Family planning consultation [Barriers & Natural Methods] | | Family planning consultation [Barriers & Natural Methods] |
| C11 | Family planning consultation [Depo Provera] | | Family planning consultation [Depo Provera] |
| C12 | Family planning consultation [IUD and Implants] | | Family planning consultation [IUD and Implants] |
| C13 | Family planning consultation [Pills] | | Family planning consultation [Pills] |
| C14 | Nutrition consultation | | Nutrition consultation |
| C3 | Consultation working hours <25 minutes | | Consultation working hours <20 minutes |
| C3-2 | Consultation GP without transfer working hours <25 minutes Consultation with a GP working hours < 25 minutes | | Consultation GP without transfer working hours Consultation with a GP working days < 20 minutes |
| C3-2T | Consultation GP with transfer working hours <25 minutes | | Consultation GP with transfer working hours |
| C3-3 | Consultation A2, A1 nurse or Paramedic working hours >= 25 minutes Consultation Nurse specialist A1 without transfer working hours < 25 minutes | | Consultation A2, A1 nurse or Paramedic working hours >= 20 minutes Consultation Nurse specialist A1 without transfer working hours < 20 minutes |
| C3-3T | Consultation Nurse specialist A1 with transfer working hours < 25 minutes | | Consultation Nurse specialist A1 with transfer working hours < 20 minutes |
| C4 | Consultation afterhours, weekends, and holidays <25 minutes | | Consultation afterhours, weekends, and holidays <20 minutes |

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| | | |
|-------|---|---|
| C4-2 | Consultation GP without transfer nights, weekends and holidays < 25 minutes | Consultation GP without transfer nights, weekends and holidays |
| C4-2T | Consultation GP with transfer nights, weekends and holidays <25 minutes | Consultation GP with transfer nights, weekends and holidays |
| C4-3 | Consultation A2, A1 nurse or Paramedic working hours < 25 minutes Consultation Nurse specialist A1 without transfer afterhours, weekends and days off < 25 minutes | Consultation A2, A1 nurse or Paramedic working hours < 20 minutes Consultation Nurse specialist A1 without transfer afterhours, weekends and days off < 20 minutes |
| C4-3T | Consultation Nurse specialist A1 with transfer afterhours, weekends and days off < 25 minutes | Consultation Nurse specialist A1 with transfer afterhours, weekends and days off < 20 minutes |
| C5-1 | Inpatient followup specialist | Inpatient followup specialist |
| C5-2 | Inpatient followup visit GP | Inpatient followup visit |
| C6-2 | Post graduate anesthetic visit | Post graduate anesthetic visit |
| C7 | Monitoring of old case/chronic disease follow-up appointment | Monitoring of old case/chronic disease follow-up appointment |
| C7-1 | Monitor old case on appointment/Specialised medical doctor chronic diseases | Monitor old case on appointment/Specialised medical doctor chronic diseases |
| C7-2 | Old case/On Appointment General practitioners chronic diseases | Old case/On Appointment General practitioners chronic diseases |
| C8 | Consultation working hours 25 to 45 minutes | Consultation working hours 20 to 45 minutes |
| C8-1T | Consultation Specialist with transfer night, weekends and holidays 25 to 45 minutes | Consultation Specialist with transfer nights, weekends and holidays 20 to 45 minutes |
| C8-3T | Consultation Nurse specialist A1 with transfer working hours 25 to 45 minutes | Consultation Nurse specialist A1 with transfer working hours 20 to 45 minutes |
| C9 | Consultation afterhours, weekends, and holidays 25 to 45 minutes | Consultation afterhours, weekends, and holidays 20 to 45 minutes |
| C9-1T | Consultation Specialist with transfer working hours 25 to 45 minutes | Consultation Specialist with transfer working |

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| RMP Code Detailed Nomenclature | Mapped to local nomenclature |
|--|--|
| C9-3 Consultation A2, A1 nurse or Paramedic night, weekends and holidays < 25 minutes Consultation Nurse specialist A1 without transfer night, weekends and days off 25 to 45 minutes | hours 20 to 45 minutes Consultation A2, A1 nurse or Paramedic night, weekends and holidays < 20 minutes Consultation Nurse specialist A1 without transfer afterhours, weekends and days off 20 to 45 minutes |
| C9-3T Consultation Nurse specialist A1 with transfer night, weekends and days off 25 to 45 minutes | Consultation Nurse specialist A1 with transfer afterhours, weekends and days off 20 to 45 minutes |

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Specialty **Dental**

Sub-classification: **CONSULTATION**

| | |
|--|--|
| 88011 Comprehensive oral examination. Evaluation of all teeth, their supporting tissues and the oral tissues in order to record the condition of these structures. This evaluation includes recording an appropriate medical history and any other relevant information. | Dental Consultation - Dental Surgeon [A0] Dental Consultation - Specialist Dental Surgeon Dental Consultation - Therapist [A0] Dental Consultation - Therapist[A1] |
| 88012 Periodic oral examination. An evaluation performed on a patient of record to determine any changes in the patient's dental and medical health status since a previous comprehensive or periodic examination. | Dental consultation follow up by DENTAL Surgeon [A0] Dental consultation follow up by Specialist only Dental consultation follow up by Therapist [A0] Dental consultation follow up by Therapist [A1] |
| D0150 Comprehensive oral examination. Evaluation of all teeth, their supporting tissues and the oral tissues in order to record the condition of these structures. This evaluation includes recording an appropriate medical history and any other relevant information. | Comprehensive oral examination. Evaluation of all teeth, their supporting tissues and the oral tissues in order to record the condition of these structures. This evaluation includes recording an appropriate medical history and any other relevant information. |

Specialty **Dental**

Sub-classification: **Devitalisation**

| | |
|----------------------------|----------------------|
| D3346 Root canal treatment | Root canal treatment |
|----------------------------|----------------------|

Specialty **Dental**

Sub-classification: **ENDODONTICS**

| | |
|--|------------------------------------|
| 88414 Pulpotomy. Amputation within the pulp chamber of part of the vital pulp of a tooth. The pulp remaining in the canal[s] is then covered with a protective dressing or cement. | PULPOTOMY Pulpotomy [Pediatric] |
| 88415 Complete chemo-mechanical preparation of root canal one canal. Complete chemo-mechanical preparation including removal of pulp or necrotic debris from a canal. | Root Canal Therapy single canal |

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| | | |
|-------|---|---|
| 88417 | Root canal obturation one canal. The filling of a root canal, following chemo-mechanical preparation. | Root Canal Therapy single canal |
| 88418 | Root canal obturation each additional canal. The filling, following chemo-mechanical preparation, of each additional canal in a tooth with multiple canals. | Root Canal Therapy three or more canals it Root Canal Therapy two canals |
| D5001 | PULP CAPPING DIRECT | PULP CAPPING |
| D5006 | Non vital bleaching per tooth | Non vital bleaching per tooth |
| D7073 | PULP CAPPING Indirect | PULP CAPPING INDIRECT |

Specialty **Dental**

Sub-classification: **Extraction chirurgicale d'une dent incluse**

| | | |
|-------|---|---|
| D7241 | Surgical extraction of embedded/ impacted tooth | Surgical extraction of embedded/ impacted tooth |
|-------|---|---|

Specialty **Dental**

Sub-classification: **Extraction des restes radiculaires**

| | | |
|-------|------------------------------|------------------------------|
| D7210 | Extraction of retained roots | Extraction of retained roots |
|-------|------------------------------|------------------------------|

Specialty **Dental**

Sub-classification: **IMAGING and INVESTIGATIONS**

| | | |
|-------|--|--|
| 75009 | Orthodontic radiography — orthopantomography [panoramic radiography], including any consultation on the same occasion [AOS] [AO] | OCCLUSAL X-RAY |
| 75023 | intraoral radiography — single area, periapical or bitewing film [AOS] [AO] | PERIAPICAL X-RAY/BITE WING X-RAY |
| 88022 | Intraoral periapical or bitewing radiograph per exposure. Taking and interpreting a radiograph made with the film inside the mouth. | Bite-wing X-rays each Periapical X-rays |
| 88025 | Intraoral radiograph occlusal, maxillary, mandibular per exposure. Taking and interpreting an occlusal, maxillary or mandibular intraoral radiograph. This radiograph shows a more extensive view of teeth and maxillary or mandibular bone. | Occlusal X-rays |
| D7028 | Dimension Orthopantomogram [OPG] X-rays | Dimension Orthopantomogram [OPG] X-rays |
| D7029 | Dimentsion Orthopantomogram[OPG] or CBCT | Dimentsion Orthopantomogram[OPG] or CBCT |

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| | | |
|-------|------------------------|------------------------|
| D7042 | Lateral Oblique X-rays | Lateral Oblique X-rays |
| D7062 | Pulp-Vitality Test | Pulp-Vitality Test |

Specialty **Dental**

Sub-classification: **IMPLANTS**

| | | |
|-------|---------------------------------------|---------------------------------------|
| D7018 | Assessment | Assessment |
| D7053 | Placement of Abutment super Structure | Placement of Abutment super Structure |
| D7054 | Placement of Crown | Placement of Crown |
| D7055 | Placement of Implants | Placement of Implants |

Specialty **Dental**

Sub-classification: **ORAL SURGERY**

| | | |
|-------|---|--|
| 30266 | Salivary gland, removal of calculus from duct or meatotomy or marsupialisation, 1 or more such procedures [Anaes.] | SURGICAL REMOVAL OF SALIVARY STONE |
| 30281 | Tongue tie, mandibular frenulum or maxillary frenulum, repair of, in a person aged 2 years and over, under general anaesthesia [Anaes.] | FRENECTOMY |
| 45801 | Tumour, cyst, ulcer or scar, [other than a scar removed during the surgical approach at an operation],in the oral and maxillofacial region, up to 3 cm in diameter, removal from cutaneous or subcutaneous tissue or from mucous membrane, where the removal is by surgical excision and suture, not being a service to which item 45803 applies [Anaes.] | CYST ENUCLEATION |
| 45815 | Operation on mandible or maxilla [other than alveolar margins] for chronic osteomyelitis - 1 bone or in combination with adjoining bones [Anaes.] [Assist.] | SEQUESTRECTOMY OF THE ALVEOLAR BONE |
| 45819 | Operation on any combination of adjoining bones in the oral and maxillofacial region, being bones referred to in item 45817 [Anaes.] [Assist.] | SEQUESTRECTOMY OF THE ALVEOLAR BONE |
| 45843 | Alveolar ridge augmentation - unilateral, insertion of tissue expanding device into maxillary or mandibular alveolar ridge region for [Anaes.] [Assist.] | DENTAL ALVEOLAR REDUCTION AND FIXATION |
| 45849 | Maxillary sinus, bone graft to floor of maxillary sinus following elevation of mucosal lining [sinus lift procedure], [unilateral] [Anaes.] [Assist.] | Maxillary sinus lift |
| 45875 | Temporomandibular joint, stabilisation of, involving 1 or more of: repair of capsule, repair of ligament or internal fixation, not being a service to which another item in this Subgroup applies [Anaes.] [Assist.] | REDUCTION OF TMJ DISLOCATION |

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|-------|---|---|
| 53236 | Temporomandibular joint, stabilisation of, involving 1 or more of: repair of capsule, repair of ligament or internal fixation, not being a service to which another item in this group applies [Anaes.] [Assist.] | TMJ reduction |
| 75200 | removal of tooth or tooth fragment [other than treatment to which item 75400, 75403, 75406, 75409, 75412 or 75415 applies], if the patient is referred by an eligible orthodontist [ad]. | PEDIATRIC EXTRACTION |
| 75203 | removal of tooth or tooth fragment under general anaesthesia, if the patient is referred by an eligible orthodontist [ad] | EXTRACTION ADULT |
| 75206 | removal of each additional tooth or tooth fragment at the same attendance at which a service to which item 75200 or 75203 applies is rendered, if the patient is referred by an eligible orthodontist [AD] | EXTRACTION ADULT |
| 75400 | surgical removal of erupted tooth, if the patient is referred by an eligible orthodontist [AOS] | SURGICAL EXTRACTION OF IMPACTED TOOTH |
| 75403 | Surgical removal of tooth with soft tissue impaction, if the patient is referred by an eligible orthodontist [AOS] | EXTRACTION ADULT |
| 75406 | Surgical removal of tooth with partial bone impaction, if the patient is referred by an eligible orthodontist [AOS] | EXTRACTION ADULT |
| 88311 | Removal of a tooth or part[s] thereof first tooth extracted on a day. A procedure consisting of the removal of a tooth or part[s] thereof. Inclusive of the insertion of sutures, normal post-operative care and suture removal. | Extractions [adult] Extractions[deciduous teeth] |
| 88322 | Surgical removal of a tooth or tooth fragment not requiring removal of bone or tooth division first tooth extracted on a day. Removal of a tooth or tooth fragment where an incision and the raising of a mucoperiosteal flap is required, but where removal of bone or sectioning of the tooth is not necessary to remove the tooth. Inclusive of the insertion of sutures, normal post-operative care and suture removal. | Surgical Extraction |
| 88351 | Repair of skin and subcutaneous tissue or mucous membrane. The surgical cleaning and repair of a facial skin wound in the region of the mouth or jaws, or the repair of oral mucous membrane, where the wounds involve the subcutaneous tissues. Inclusive of the insertion of sutures, normal post-operative care and suture removal. | Soft tissue Injury Repair |
| 88384 | Repositioning of displaced tooth/teeth per tooth. A procedure following trauma where the position of the displaced tooth/teeth is corrected by manipulation. Stabilising procedures are itemised separately. Inclusive of the insertion of sutures, normal postoperative care and suture removal. | Surgical Disimpactions |
| 88386 | Splinting of displaced tooth/teeth per tooth. A procedure following trauma where the position of the displaced tooth/teeth may be stabilized by splinting. Inclusive of the insertion of sutures, normal post-operative care and suture removal. | Splinting per tooth |
| 88387 | Replantation and splinting of a tooth. Replantation of a tooth which has been avulsed or intentionally removed. It may be held in the correct position by splinting. Inclusive of the insertion of sutures, normal post-operative care and suture removal. | Reimplantation of extruded tooth within 2 hours |

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| 88392 | Drainage of abscess. Drainage and/or irrigation of an abscess other than through a root canal or at the time of extraction. The drainage may be through an incision or inserted tube. Inclusive of the insertion of sutures, normal post-operative care and suture removal. | Incision & Drainage of Dento-alveolar abscess |
| 88419 | Extirpation of pulp or debridement of root canal[s] emergency or palliative. The partial or thorough removal of pulp and/or debris from the root canal system of a tooth. This is an emergency or palliative procedure distinct from visits for scheduled endodontic treatment. | Extraction of retained roots |
| D4321 | Splinting per tooth | Splinting per tooth |
| D7012 | Allo/Auto transplantation of tooth | Allo/Auto transplantation of tooth |
| D7017 | Apicectomy | Apicectomy |
| D7019 | Biopsy | Biopsy |
| D7024 | Cyst Marsupialisation | Cyst Marsupialisation |
| D7025 | DEBRIDEMENT OF DRY SOCKETS | DEBRIDEMENT OF DRY SOCKETS |
| D7026 | Dento-alveolar and Maxillofacial splints for fractures | Dento-alveolar and Maxillofacial splints for fractures |
| D7030 | Dresssing Marsupialisation | Dresssing Marsupialisation |
| D7031 | Dry Socket Dressing | Dry Socket Dressing |
| D7039 | Incision & Drainage of Facial space abscess | Incision & Drainage of Facial space abscess |
| D7043 | Mandibulectomy/Major Oral Maxillofacial Procedures | Mandibulectomy/Major Oral Maxillofacial Procedures |
| D7049 | Operculectomy | Operculectomy |
| D7063 | Reduction and Immobilization of Maxillofacial Fracture [Lefort 1 to 4] | Reduction and Immobilization of Maxillofacial Fracture [Lefort 1 to 4] |
| D7064 | Reduction of Dental alveolar fracture[Splinting] | Reduction of Dental alveolar fracture[Splinting] |
| D7069 | Tumor Excision [under General Anesthesia] | Tumor Excision [under General Anesthesia] |

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| D7070 | Tumor Excision [under Local anesthesia] | Tumor Excision [under Local anesthesia] |
| Specialty Dental | | Sub-classification: ORTHODONTICS |
| 88731 | Retainer per tooth. A retainer or attachment fitted to a tooth to aid retention of a partial denture. The number of retainers should be indicated. | Fixed Retainer [lingual and Palatal] |
| D5730 | Reline & rebasing complete maxillary denture | Reline & rebasing complete maxillary denture |
| D5761 | Reline & rebasing partial denture | Reline & rebasing partial denture |
| D6548 | Resin bonded retainers [MARYLAND BRIDGES\0 [as crown] | Resin bonded retainers [MARYLAND BRIDGES\0 [as crown] |
| D6972 | Night guard | Night guard |
| D7010 | Adjustment Fixed Functional Orthodontic Appliance | Adjustment Fixed Functional Orthodontic Appliance |
| D7011 | Adjustment of removable orthodontic Appliance | Adjustment of removable orthodontic Appliance |
| D7034 | Fixed Functional Orthodontic Appliance Placement | Fixed Functional Orthodontic Appliance Placement |
| D7041 | Insertion of removable orthodontic appliance | Insertion of removable orthodontic appliance |
| D7051 | Orthodontic Assessment | Orthodontic Assessment |
| D7065 | Removable orthodontic appliance. | Removable orthodontic appliance. |
| D7066 | Removable orthodontic functional appliance. | Removable orthodontic functional appliance. |
| D7067 | Replacement Bracket [each] | Replacement Bracket [each] |
| D7068 | Replacement of lost wire [each] | Replacement of lost wire [each] |
| D7074 | Miniscrew Assisted Rapid Palatal Expander [MARPE] | Miniscrew Assisted Rapid Palatal Expander [MARPE] |
| D8210 | Retainer and space maintener | Retainer and space maintener |

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| | |
|---------------------------------|---------------------------------|
| Retainers and space maintainers | Retainers and space maintainers |
|---------------------------------|---------------------------------|

| | |
|-------------------------------|-------------------------|
| D8660 Retainer with expansion | Retainer with expansion |
|-------------------------------|-------------------------|

Specialty **Dental**

Sub-classification: **PERIODONTOLOGY**

| | |
|---|---------------------------------------|
| 88111 Removal of plaque and/or stain. Removal of dental plaque and/or stain from the surfaces of all teeth. | Extrinsic Stain Removal and Polishing |
|---|---------------------------------------|

| | |
|--|-----------------------------|
| 88114 Removal of calculus first visit. Removal of calculus from the surfaces of teeth. | GROSS SCALING AND POLISHING |
|--|-----------------------------|

| | |
|--|------------------------------------|
| 88213 Treatment of acute periodontal infection per visit. This item describes the treatment of acute periodontal infection[s]. It may include establishing drainage and the removal of calculus from the affected tooth [teeth]. Inclusive of the insertion of sutures, normal post-operative care and suture removal. | Periodontal Surgery [Per quadrant] |
|--|------------------------------------|

| | |
|---|-----------------------------|
| 88415 Complete chemo-mechanical preparation of root canal one canal. Complete chemo-mechanical preparation including removal of pulp or necrotic debris from a canal. | Gingivectomy [Per quadrant] |
|---|-----------------------------|

| | |
|--|---|
| 88419 Extirpation of pulp or debridement of root canal[s] emergency or palliative. The partial or thorough removal of pulp and/or debris from the root canal system of a tooth. This is an emergency or palliative procedure distinct from visits for scheduled planing per arch endodontic treatment. | Curettage of Periodontal Pockets and Root |
|--|---|

| | |
|---|---|
| D7013 Alveolar Ridge Augmentation/Bone Grafting | Alveolar Ridge Augmentation/Bone Grafting |
|---|---|

| | |
|---------------------------------------|---------------------------------|
| D7027 Desensitization [per quadrant] | Desensitization [per quadrant] |
|---------------------------------------|---------------------------------|

Specialty **Dental**

Sub-classification: **PREVENTIVE DENTISTRY**

| | |
|---|--------------------------|
| 88121 Topical application of remineralisation and/or cariostatic agents, one treatment. Application of remineralisation and/or cariostatic agents to the surfaces of the teeth. This may include activation of the agent. Not to be used as an intrinsic part of the restoration. | Topical Fluoride Therapy |
|---|--------------------------|

| | |
|---|---------------------------------|
| 88161 Fissure and/or tooth surface sealing – per tooth [first four services on a day] sealing of non-carious pits, fissures, smooth surfaces or cracks in a tooth with an adhesive material. any preparation prior to application of the sealant is included in this item number. | Fissure sealants [Per quadrant] |
|---|---------------------------------|

Specialty **Dental**

Sub-classification: **PROSTHETIC and PROSTHODONTIC**

| | |
|--|---------------------------|
| 88576 Metallic crown preformed. Placing a preformed metallic crown as a coronal restoration for a tooth. | Fitting of Crown on Tooth |
|--|---------------------------|

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| | | Stainless Steel Crown [Adult] Stainless Steel Crown [Pediatric][9] |
| 88721 | Partial maxillary denture resin, base only. Provision of a resin base for a removable dental prosthesis for the maxilla where some natural teeth remain. | Fitting of Denture, Obturator, Mouthguards, or Splints |
| 88722 | Partial mandibular denture resin, base only. Provision of a resin base for a removable dental prosthesis for the mandible where some natural teeth remain. | Fitting of Denture, Obturator, Mouthguards, or Splints |
| 88733 | Tooth/teeth [partial denture]. An item to describe each tooth added to the base of a new partial denture. The number of teeth should be indicated. | Acrylic Dentures-Each additional tooth Acrylic Dentures-One tooth |
| 88776 | Impression - dental appliance repair/modification. An item to describe taking an impression where required for the repair or modification of a dental appliance. | Impression and casting for dental appliance repair |
| D4266 | GUIDED BONE REGENERATION[GBR] | GUIDED BONE REGENERATION[GBR] |
| D470 | IMPLANT IMPRESION TAKING | IMPLANT IMPRESION TAKING |
| D5820 | Immediate denture [Maxillary] | Immediate denture [Maxillary] |
| D5821 | Immediate denture [Mandibular] | Immediate denture [Mandibular] |
| D7004 | Fitting of Denture, Obturator, Mouthguards, or Splints | Fitting of Denture, Obturator, Mouthguards, or Splints |
| D7005 | Acrylic Crowns | Acrylic Crowns |
| D7006 | Acrylic Dentures-rebasing | Acrylic Dentures-rebasing |
| D7007 | Acrylic Dentures-repair | Acrylic Dentures-repair |
| D7008 | Acrylic Dentures-Soft liner/tissue conditioner | Acrylic Dentures-Soft liner/tissue conditioner |
| D7009 | Acrylic Full Denture Per arch | Acrylic Full Denture Per arch |
| D7033 | Fitting of Bridge on Teeth per unit | Fitting of Bridge on Teeth per unit |

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| | | |
|-------|---|---|
| D7038 | Gunning splints for fractures in edentulous patients | Gunning splints for fractures in edentulous patients |
| D7040 | Inlays and Onlays | Inlays and Onlays |
| D7044 | Metal Base Denture | Metal Base Denture |
| D7045 | Occlusal Splint for Obstructive Sleep Apnoea Syndrome | Occlusal Splint for Obstructive Sleep Apnoea Syndrome |
| D7046 | Occlusal splint for Temporomandibular Disorders | Occlusal splint for Temporomandibular Disorders |
| D7047 | Occlusal splints as mouth protectors [mouth guards]: | Occlusal splints as mouth protectors [mouth guards]: |
| D7048 | Occlusal splints for cheek biting habit | Occlusal splints for cheek biting habit |
| D7052 | Periodontal splints: | Periodontal splints: |
| D7056 | Polycarboxylate Crowns | Polycarboxylate Crowns |
| D7057 | Porcelain Fused to Metal Bridge-Per Unit | Porcelain Fused to Metal Bridge-Per Unit |
| D7058 | Porcelain Fused to Metal Crown | Porcelain Fused to Metal Crown |
| D7059 | Porcelain Jacket Crown | Porcelain Jacket Crown |
| D7060 | Precious Metal Crown | Precious Metal Crown |
| D7061 | Preparation of tooth for dental crown/Bridge per unit | Preparation of tooth for dental crown/Bridge per unit |
| D7072 | Zirconium Milled Crowns, Inlays, Onlyay | Zirconium Milled Crowns, Inlays, Onlyay |
| D7720 | Implant | Implant |

Specialty **Dental**

Sub-classification: **Reduction de l^ATM**

| | | |
|-------|---|---|
| D7630 | Temporomandibular Joint [TMJ] reduction | Temporomandibular Joint [TMJ] reduction |
|-------|---|---|

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| Specialty Dental | Sub-classification: RESTORATIVE DENTISTRY | |
|-------------------------|---|---|
| 75006 | Production of dental study models [not being a service associated with a service to which item 75004 applies] prior to provision of a service to which: [a] item 75030, 75033, 75034, 75036, 75037, 75039, 75045 or 75051 applies; or [b] an item in group T8 or groups O3 to O9 applies; in a single course of treatment [AO] | IMPRESSION TAKING AND CASTING |
| 88572 | Provisional [intermediate/temporary] restoration per tooth. The provisional [intermediate] restoration of a tooth designed to last until the definitive restoration can be constructed or the tooth is removed. This item should only be used where the provisional [intermediate] restoration is not an intrinsic part of treatment. It does not include provisional [temporary] sealing of the access cavity during endodontic treatment or during construction of indirect restorations. | Temporary fillings |
| D2150 | AMALGAM FILLING: TWO SURFACES , PRIMARY/PERMANENT[TOOTH] | AMALGAM FILLING: TWO SURFACES , PRIMARY/PERMANENT[TOOTH] |
| D2160 | AMALGAM FILLING: THREE SURFACES, PRIMARY/PERMANENT[TOOTH] | AMALGAM FILLING: THREE SURFACES, PRIMARY/PERMANENT[TOOTH] |
| D2161 | AMALGAM FILLING: FOUR OR MORE SURFACES, PRIMARY/PERMANENT[TOOTH] | AMALGAM FILLING: FOUR OR MORE SURFACES, PRIMARY/PERMANENT[TOOTH] |
| D2750 | Anterior jacket metal ceramic crowns | Anterior jacket metal ceramic crowns |
| D2790 | Gold crown | Gold crown |
| D2792 | Complete metal crowns | Complete metal crowns |
| D3002 | CROWN AND BRIDGE[PER UNIT] | CROWN AND BRIDGE[PER UNIT] |
| D3005 | REMOVABLE DENTURE ONE TOOTH | REMOVABLE DENTURE ONE TOOTH |
| D3006 | VACCUM FORMED RETAINER | VACCUM FORMED RETAINER |
| D4001 | COMPOSITE SMALL | COMPOSITE SMALL |
| D4002 | COMPOSITE MEDIUM | COMPOSITE MEDIUM |
| D4003 | COMPOSITE LARGE | COMPOSITE LARGE |

Rwanda Medical Procedure Code Database

RMP Code Detailed Nomenclature

Mapped to local nomenclature

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| D4004 | COMPOSITE VENEER | COMPOSITE VENEER |
| D4005 | COMPOSITE POST CORE BUILD UP | COMPOSITE POST CORE BUILD UP |
| D6001 | GLASS IONOMER SMALL | GLASS IONOMER SMALL |
| D6002 | GLASS IONOMER MEDIUM | GLASS IONOMER MEDIUM |
| D6003 | GLASS IONOMER LARGE | GLASS IONOMER LARGE |
| D6004 | AMALGAM POST BUILD UP | AMALGAM POST BUILD UP |
| D6999 | Vaccum formed retainer | Vaccum formed retainer |
| D7001 | AMALGAM SMALL | AMALGAM SMALL |
| D7002 | AMALGAM MEDIUM | AMALGAM MEDIUM |
| D7003 | AMALGAM LARGE | AMALGAM LARGE |
| D7014 | Amalgam Class I&V | Amalgam Class I&V |
| D7015 | Amalgam Class II | Amalgam Class II |
| D7016 | Amalgam Class III | Amalgam Class III |
| D7020 | Composite Build Up | Composite Build Up |
| D7021 | Composite Class I &V | Composite Class I &V |
| D7022 | Composite Class II and IV | Composite Class II and IV |
| D7023 | Composite Class III | Composite Class III |
| D7035 | Glass Ionomer Class I &V | Glass Ionomer Class I &V |
| D7036 | Glass Ionomer Class II and IV | Glass Ionomer Class II and IV |

Rwanda Medical Procedure Code Database

RMP Code Detailed Nomenclature

Mapped to local nomenclature

| | | |
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| D7037 | Glass Ionomer Class III | Glass Ionomer Class III |
| D7050 | ORTHODONTIC ADJUSTMENT PER VISIT. | ORTHODONTIC ADJUSTMENT PER VISIT. |
| D7071 | Vital bleaching for fluorosed teeth | Vital bleaching for fluorosed teeth |

Rwanda Medical Procedure Code Database

RMP Code Detailed Nomenclature

Mapped to local nomenclature

| Specialty | Dermatology | Sub-classification: | |
|-----------|---|---------------------|----------------------------|
| 12000 | Skin sensitivity testing for allergens, using one to 20 allergens, other than a service associated with a service to which item 12012, 12017, 12021, 12022 or 12024 applies | | Prick test standard series |
| 12003 | Skin sensitivity testing for allergens, using more than 20 allergens, other than a service associated with a service to which item 12012, 12017, 12021, 12022 or 12024 applies | | Prick test standard series |
| 12012 | Epicutaneous patch testing in the investigation of allergic dermatitis using not more than 25 allergens | | Patch test standard series |
| 12017 | Epicutaneous patch testing in the investigation of allergic dermatitis using more than 25 allergens but not more than 50 allergens | | Prick test standard series |
| 12021 | Epicutaneous patch testing in the investigation of allergic dermatitis, performed by or on behalf of a specialist, or consultant physician, in the practice of his or her specialty, using more than 50 allergens but not more than 75 allergens | | Prick test standard series |
| 12022 | Epicutaneous patch testing in the investigation of allergic dermatitis, performed by or on behalf of a specialist, or consultant physician, in the practice of his or her specialty, using more than 75 allergens but not more than 100 allergens | | Prick test standard series |
| 12024 | Epicutaneous patch testing in the investigation of allergic dermatitis, performed by or on behalf of a specialist, or consultant physician, in the practice of his or her specialty, using more than 100 allergens | | Prick test standard series |
| 14050 | PUVA therapy or UVB therapy administered in whole body cabinet [not being a service associated with a service to which item 14053 applies] including associated consultations other than an initial consultation | | FULL BODY PHOTOTHERAPY |
| 14053 | PUVA therapy or UVB therapy administered to localised body areas in a hand and foot cabinet [not being a service associated with a service to which item 14050 applies] including associated consultations other than an initial consultation | | TARGETED PHOTOTHERAPY |
| 14201 | poly-l-lactic acid, one or more injections of, for the initial session only, for the treatment of severe facial lipoatrophy caused by antiretroviral therapy, when prescribed in accordance with the national health act 1953 - once per patient | | INTRALESIONAL INJECTION |
| 18362 | Botulinum Toxin Type A Purified Neurotoxin Complex [Botox], injection of, for the treatment of severe primary axillary hyperhidrosis, including all injections on any one day, if:[a] the patient is at least 12 years of age; and [b] the patient has been intolerant of, or has not responded to, topical aluminium chloride hexahydrate; and [c] the patient has not had treatment with botulinum toxin within the immediately preceding 4 months; and [d] if the patient has had treatment with botulinum toxin within the previous 12 months - the patient had treatment on no more than 2 separate occasions [Anaes.] | | INTRALESIONAL INJECTION |
| 30003 | Localised burns, dressing of, [not involving grafting] each attendance at which the procedure is performed, including any associated consultation | | Burn dressing |
| 30006 | Extensive burns, dressing of, without anaesthesia [not involving grafting] each attendance at which the procedure is performed, including any associated consultation | | Burn dressing |

Rwanda Medical Procedure Code Database

RMP Code Detailed Nomenclature

Mapped to local nomenclature

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| 30023 | Wound of soft tissue, traumatic, deep or extensively contaminated, debridement of, under general anaesthesia or regional or field nerve block, including suturing of that wound when performed [Anaes.] [Assist.] | DEBRIDEMENT OF WOUND, MINOR DEBRIDEMENT OF WOUND, MINOR |
| 30024 | Wound of soft tissue, debridement of extensively infected post-surgical incision or Fournier`s Gangrene, under general anaesthesia or regional or field nerve block, including suturing of that wound when performed [Anaes.] [Assist.] | DEBRIDEMENT OF WOUND, INTERMEDIATE DEBRIDEMENT OF WOUND , INTERMEDIATE |
| 30026 | Skin and subcutaneous tissue or mucous membrane, repair of wound of, other than wound closure at time of surgery, not on face or neck, small [not more than 7cm long], superficial, not being a service to which another item in Group T4 applies [Anaes.] | WOUND DRESSING |
| 30029 | Skin and subcutaneous tissue or mucous membrane, repair of wound of, other than wound closure at time of surgery, not on face or neck, small [not more than 7cm in length], involving deeper tissue, not being a service to which another item in Group T4 applies [Anaes.] | WOUND DRESSING |
| 30062 | Etonogestrel subcutaneous implant, removal of, as an independent procedure [Anaes.] | REMOVAL OF A FOREIGN BODY ON THE SKIN AND OR IN SOFT TISSUE |
| 30064 | Subcutaneous foreign body, removal of, requiring incision and exploration, including closure of wound if performed, as an independent procedure [Anaes.] | REMOVAL OF FOREIGN BODY |
| 30071 | Diagnostic biopsy of skin, as an independent procedure, if the biopsy specimen is sent for pathological examination [Anaes.] | BIOPSY OF GROWTH DERMOEPIDERMIC[PUNCH BIOBSY] DERMOEPIDERMIC[PUNCH BIOBSY] |
| 30072 | Diagnostic biopsy of mucous membrane, as an independent procedure, if the biopsy specimen is sent for pathological examination [Anaes.] | DERMOEPIDERMIC[PUNCH BIOBSY] |
| 30078 | Diagnostic drill biopsy of lymph gland, deep tissue or organ, as an independent procedure, where the biopsy specimen is sent for pathological examination [Anaes.] | DERMOEPIDERMIC[PUNCH BIOBSY] |
| 30096 | Diagnostic scalene node biopsy, by open procedure, where the specimen excised is sent for pathological examination [Anaes.] | BREAST LUMPECTOMY |
| 30185 | Palmar or plantar warts [10 or more], definitive removal of, excluding ablative methods alone, not being a service to which item 30186 or 30187 applies [Anaes.] | Removal of warts |
| 30186 | Palmar or plantar warts [less than 10], definitive removal of, excluding ablative methods alone, not being a service to which item 30185 or 30187 applies [Anaes.] | Removal of warts |

Rwanda Medical Procedure Code Database

RMP Code Detailed Nomenclature

Mapped to local nomenclature

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| | | Removal of warts |
| 30187 | Palmar or plantar warts, removal of, by carbon dioxide laser or erbium laser, requiring admission to a hospital, or when performed by a specialist in the practice of his/her specialty, [5 or more warts] [Anaes.] | Removal of warts |
| 30189 | warts or molluscum contagiosum [one or more], removal of, by any method [other than by chemical means], where undertaken in the operating theatre of a hospital, not being a service associated with a service to which another item in this group applies [H] [Anaes.] | Removal of warts |
| 30192 | Premalignant skin lesions [including solar keratoses], treatment of, by ablative technique [10 or more lesions] [Anaes.] | BIOPSY OF GROWTH CHEMO-CRYOTHERAPY Removal os solar keratosis |
| 30195 | Benign neoplasm of skin, other than viral verrucae [common warts] seborrheic keratoses, cysts and skin tags, treatment by electrosurgical destruction, simple curettage or shave excision, or laser photocoagulation, not being a service to which item 30196, 30197, 30202, 30203 or 30205 applies [1 or more lesions] [Anaes.] | CHEMO-CRYOTHERAPY SHAVE BIOPSY |
| 30196 | Malignant neoplasm of skin or mucous membrane proven by histopathology or confirmed by specialist opinion, removal of, by serial curettage or carbon dioxide laser or erbium laser excision-ablation, including any associated cryotherapy or diathermy, not being a service to which item 30197 applies [Anaes.] | CURETTAGE CURETTAGE |
| 30197 | Malignant neoplasm of skin or mucous membrane proven by histopathology or confirmed by specialist opinion, removal of, by serial curettage or carbon dioxide laser excision-ablation, including any associated cryotherapy or diathermy, [10 or more lesions] [Anaes.] | CURETTAGE INTRALESIONAL INJECTION |
| 30202 | Malignant neoplasm of skin or mucous membrane proven by histopathology or confirmed by specialist opinion, removal of, by liquid nitrogen cryotherapy using repeat freeze-thaw cycles, not being a service to which item 30203 applies | CURETTAGE INTRALESIONAL INJECTION |
| 30203 | Malignant neoplasm of skin or mucous membrane proven by histopathology or confirmed by specialist opinion, removal of, by liquid nitrogen cryotherapy using repeat freeze-thaw cycles [10 or more lesions] | CURETTAGE INTRALESIONAL INJECTION |
| 30207 | Skin lesions, multiple injections with hydrocortisone or similar preparations [Anaes.] | INTRALESIONAL INJECTION |

Rwanda Medical Procedure Code Database

RMP Code Detailed Nomenclature

Mapped to local nomenclature

| | | |
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| 30210 | Keloid and other skin lesions, extensive, multiple injections of hydrocortisone or similar preparations where undertaken in the operating theatre of a hospital [Anaes.] | INTRALESIONAL INJECTION |
| 30216 | Haematoma, aspiration of [Anaes.] | INCISION AND DRAINAGE OF AN ABSCESS |
| 30219 | Haematoma, furuncle, small abscess or similar lesion not requiring admission to a hospital - incision with drainage of [excluding aftercare] | ABCESS, SUPERFICIAL DRAINAGE OF SUBCUTANEOUS ABSCESS ONYCHIA, PARONYCHIA, PULP SPACE WOUND DRESSING |
| 30223 | Large haematoma, large abscess, carbuncle, cellulitis or similar lesion, requiring admission to a hospital, incision with drainage of [excluding aftercare] [Anaes.] | ABCES, DEEP CYST DRAINAGE AND OR CYST REMOVAL |
| 30224 | Percutaneous drainage of deep abscess using interventional imaging techniques - but not including imaging [Anaes.] | ABCES, DEEP |
| 31206 | Tumour, cyst, ulcer or scar [other than a scar removed during the surgical approach at an operation], removal of and suture, if: [a] the lesion size is not more than 10 mm in diameter; and [b] the removal is from a mucous membrane by surgical excision [other than by shave excision]; and [c] the specimen excised is sent for histological examination [Anaes.] | EXCISION OF SKIN TUMOR LESS THAN 5 CM. EXCISION OF SKIN TUMOR WITH PLASTY, INTERMEDIATE EXCISION OF SKIN TUMOR WITH SKIN GRAFT, MINOR EXCISION OF TUMOR WITH SECOND HEALING INTENSION, MORE THAN 5 CM EXCISION OF TUMOR WITH SECOND HEALING INTENTION LESS THAN 5 CM. |
| 31211 | Tumour, cyst, ulcer or scar [other than a scar removed during the surgical approach at an operation], removal of and suture, if: [a] the lesion size is more than 10 mm, but not more than 20 mm, in diameter; and [b] the removal is from a mucous membrane by surgical excision [other than by shave excision]; and [c] the specimen excised is sent for histological examination [Anaes.] | EXCISION OF TUMOR MORE THAN 5 CM EXCISION OF TUMOR WITH SKIN GRAFT, INTERMEDIATE |
| 31216 | Tumour, cyst, ulcer or scar [other than a scar removed during the surgical approach at an operation], removal of and suture, if: [a] the lesion size is more than 20 mm in diameter; and [b] the removal is from a mucous membrane by surgical excision [other than by shave excision]; and [c] the specimen excised is sent for histological examination [Anaes.] | EXCISION OF BENIGN /MALIGNANT TUMOR WITH PALSTY, MINOR |

Rwanda Medical Procedure Code Database

RMP Code Detailed Nomenclature

Mapped to local nomenclature

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| 31245 | Skin and subcutaneous tissue, extensive excision of, in the treatment of suppurative hidradenitis [excision from axilla, groin or natal cleft] or sycosis barbae or nuchae [excision from face or neck] [Anaes.] | WOUND DRESSING |
| 31345 | Lipoma, removal of by surgical excision or liposuction, where lesion is subcutaneous and 50mm or more in diameter, or is sub-fascial, where the specimen is sent for histological confirmation of diagnosis [Anaes.] | LIPOMA EXCISION |
| 31357 | Non-malignant skin lesion [other than viral verrucae [common warts] and seborrheic keratoses], including a cyst, ulcer or scar [other than a scar removed during the surgical approach at an operation], surgical excision [other than by shave excision] and repair of, if: [a] the lesion is excised from nose, eyelid, eyebrow, lip, ear, digit or genitalia, or from a contiguous area; and [b] the necessary excision diameter is less than 6 mm; and [c] the excised specimen is sent for histological examination; not in association with item 45201 [Anaes.] | BIOPSY OF GROWTH BIOPSY OF GROWTH EXCISIONAL BIOPSY, LESS THAN 5CM |
| 31360 | Non-malignant skin lesion [other than viral verrucae [common warts] and seborrheic keratoses], including a cyst, ulcer or scar [other than a scar removed during the surgical approach at an operation], surgical excision [other than by shave excision] and repair of, if: [a] the lesion is excised from nose, eyelid, eyebrow, lip, ear, digit or genitalia, or from a contiguous area; and [b] the necessary excision diameter is 6 mm or more; and [c] the excised specimen is sent for histological examination [Anaes.] | BIOPSY OF GROWTH EXCISIONAL BIOPSY MORE THAN 5 CM |
| 31362 | Non-malignant skin lesion [other than viral verrucae [common warts] and seborrheic keratoses], including a cyst, ulcer or scar [other than a scar removed during the surgical approach at an operation], surgical excision [other than by shave excision] and repair of, if: [a] the lesion is excised from face, neck, scalp, nipple-areola complex, distal lower limb [distal to, and including, the knee] or distal upper limb [distal to, and including, the ulnar styloid]; and [b] the necessary excision diameter is less than 14 mm; and [c] the excised specimen is sent for histological examination; not in association with item 45201 [Anaes.] | BIOPSY OF GROWTH EXCISIONAL BIOPSY MORE THAN 5 CM |
| 31364 | Non-malignant skin lesion [other than viral verrucae [common warts] and seborrheic keratoses], including a cyst, ulcer or scar [other than a scar removed during the surgical approach at an operation], surgical excision [other than by shave excision] and repair of, if: [a] the lesion is excised from face, neck, scalp, nipple-areola complex, distal lower limb [distal to, and including, the knee] or distal upper limb [distal to, and including, the ulnar styloid]; and [b] the necessary excision diameter is 14 mm or more; and [c] the excised specimen is sent for histological examination [Anaes.] | BIOPSY OF GROWTH EXCISIONAL BIOPSY MORE THAN 5 CM |
| 31366 | Non-malignant skin lesion [other than viral verrucae [common warts] and seborrheic keratoses], including a cyst, ulcer or scar [other than a scar removed during the surgical approach at an operation], surgical excision [other than by shave | BIOPSY OF GROWTH |

Rwanda Medical Procedure Code Database

RMP Code Detailed Nomenclature

Mapped to local nomenclature

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| | excision] and repair of, if: [a] the lesion is excised from any part of the body not covered by item 31357, 31360, 31362 or 31364; and [b] the necessary excision diameter is less than 15 mm; and [c] the excised specimen is sent for histological examination; not in association with item 45201 [Anaes.] | EXCISIONAL BIOPSY MORE THAN 5 CM |
| 31368 | Non-malignant skin lesion [other than viral verrucae [common warts] and seborrheic keratoses], including a cyst, ulcer or scar [other than a scar removed during the surgical approach at an operation], surgical excision [other than by shave excision] and repair of, if: [a] the lesion is excised from any part of the body not covered by item 31357, 31360, 31362 or 31364; and [b] the necessary excision diameter is at least 15 mm but not more than 30mm; and [c] the excised specimen is sent for histological examination; not in association with item 45201 [Anaes.] | BIOPSY OF GROWTH EXCISIONAL BIOPSY MORE THAN 5 CM |
| 31500 | Breast, benign lesion up to and including 50mm in diameter, including simple cyst, fibroadenoma or fibrocystic disease, open surgical biopsy or excision of, with or without frozen section histology [Anaes.] | BREAST LUMPECTOMY |
| 31503 | Breast, benign lesion more than 50mm in diameter, excision of [Anaes.] [Assist.] | BREAST LUMPECTOMY |
| 31509 | Breast, malignant tumour, open surgical biopsy of, with or without frozen section histology [Anaes.] | BREAST LUMPECTOMY |
| 31512 | Breast, malignant tumour, complete local excision of, with or without frozen section histology [Anaes.] [Assist.] | CORE NEEDLE BIOPSY OF A BREAST NODULE ON LOCAL ANAESTHESIA |
| 31515 | Breast, tumour site, re-excision of following open biopsy or incomplete excision of malignant tumour [Anaes.] [Assist.] | MODIFIED RADICAL MASTECTOMY |
| 31516 | Breast, malignant tumour, complete local excision of, with or without frozen section histology when targeted intraoperative radiotherapy [using an IntraBeam device] is performed concurrently, if the requirements of item 15900 are met for the patient [Anaes.] [Assist.] | BREAST LUMPECTOMY |
| 31519 | Breast, total mastectomy [h] [Anaes.] [Assist.] | BREAST LUMPECTOMY |
| 31524 | Breast, subcutaneous mastectomy [h] [Anaes.] [Assist.] | BREAST LUMPECTOMY |
| 31525 | Breast, mastectomy for gynecomastia, with or without liposuction [suction assisted lipolysis], not being a service associated with a service to which item 45585 applies [h] [Anaes.] [Assist.] | BREAST LUMPECTOMY |
| 31530 | Breast, biopsy of solid tumour or tissue of, using a vacuum-assisted breast biopsy device under imaging guidance, for histological examination, where imaging has demonstrated:[a] microcalcification of lesion; or[b] palpable lesion less than 1cm in diameter- including pre-operative localisation of lesion where performed, not being a service to which items 31539, 31545 or 31548 apply | BREAST LUMPECTOMY |

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RMP Code Detailed Nomenclature

Mapped to local nomenclature

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| 31533 | Fine needle aspiration of an impalpable breast lesion detected by mammography or ultrasound, imaging guided - but not including imaging [Anaes.] | BREAST LUMPECTOMY |
| 31536 | Breast, preoperative localisation of lesion of, by hookwire or similar device, using interventional imaging techniques - but not including imaging, not being a service to which item 31539, 31542 or 31545 applies [Anaes.] | BREAST LUMPECTOMY |
| 31539 | Breast, biopsy of solid tumour or tissue of, using a bore-enbloc stereotactic biopsy, for histological examination, when conducted by a surgeon as determined by the Royal Australasian College of Surgeons, and where imaging has demonstrated an impalpable lesion of less than 15mm in diameter, not being a service to which item 31530, 31536 or 31548 applies [Anaes.] | BREAST LUMPECTOMY |
| 31542 | Breast, initial guidewire localisation of lesion, by hookwire or similar device, when conducted by a radiologist as determined by the Royal Australian and New Zealand College of Radiologists, using interventional imaging techniques prior to using a bore-enbloc stereotactic biopsy - including imaging not being a service associated with a service to which item 31536 applies [Anaes.] | BREAST LUMPECTOMY |
| 31545 | Breast, biopsy of solid tumour or tissue of, using a bore-enbloc stereotactic biopsy, for histological examination, when conducted by a surgeon as determined by the Royal Australasian College of Surgeons; where imaging has demonstrated an impalpable lesion of less than 15mm in diameter, including initial guidewire localisation of lesion, by hookwire or similar device, using interventional imaging techniques and including imaging not being a service associated with a service to which item 31530, 31536 or 31548 applies [Anaes.] | BREAST LUMPECTOMY |
| 31548 | Breast, biopsy of solid tumour or tissue of, using mechanical biopsy device, for histological examination, not being a service to which items 31530, 31539 or 31545 apply [Anaes.] | BREAST LUMPECTOMY |
| 32142 | Anal skin tags or anal polyps, excision of 1 or more of [Anaes.] | WOUND DRESSING |
| 32147 | Perianal thrombosis, incision of [Anaes.] | WOUND DRESSING |
| 32500 | Varicose veins where varicosity measures 2.5mm or greater in diameter, multiple injections of sclerosant using continuous compression techniques, including associated consultation - 1 or both legs - not being a service associated with any other varicose vein operation on the same leg [excluding aftercare] - to a maximum of 6 treatments in a 12 month period [Anaes.] | INTRALESIONAL INJECTION |
| 32501 | Varicose veins where varicosity measures 2.5mm or greater in diameter, multiple injections of sclerosant using continuous compression techniques, including associated consultation - 1 or both legs - not being a service associated with any other varicose vein operation on the same leg, [excluding after-care] where it can be demonstrated that truncal reflux in the long or short saphenous veins has been excluded by duplex examination - and that a 7th or subsequent treatment [including any treatments to which item 32500 applies] is indicated in a 12 month period | INTRALESIONAL INJECTION |
| 44136 | Ingrown toe nail, operation for, under general anaesthesia [Anaes.] | EXISION AND REPAIR OF NAIL TRAUMA. |

Rwanda Medical Procedure Code Database

RMP Code Detailed Nomenclature

Mapped to local nomenclature

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| 46486 | Nail bed, accurate reconstruction of nail bed laceration using magnification, undertaken in the operating theatre of a hospital [Anaes.] | EXISION AND REPAIR OF NAIL TRAUMA. |
| 46513 | Digital nail of finger or thumb, removal of, not being a service to which item 46516 applies [Anaes.] | NAIL AVULSION NAIL BIOPSY |
| 47904 | Digital nail of toe, removal of, not being a service to which item 47906 applies [Anaes.] | IN-GROWING NAIL |
| 47915 | ingrowing nail of toe, wedge resection for, with removal of segment of nail, ungual fold and portion of the nail bed [Anaes.] | ABLATION OF INGROWING NAIL |
| 47916 | ingrowing nail of toe, partial resection of nail, with destruction of nail matrix by phenolisation, electrocautery, laser, sodium hydroxide or acid but not including excision of nail bed [Anaes.] | RESECTION OF NAIL TUMOR |
| 69306 | Microscopy and culture to detect pathogenic micro-organisms from skin or other superficial sites, including [if performed]: [a] pathogen identification and antibiotic susceptibility testing; or [b] a service described in items 69300, 69303, 69312, 69318; 1 or more tests on 1 or more specimens | DIRECT MICROSCOPY EXAMINATION FROM SKIN & NAIL LESION |

Specialty **Dermatology**

Sub-classification: **Allergy**

| | | |
|-------|---|---|
| 12000 | Skin sensitivity testing for allergens, using one to 20 allergens, other than a service associated with a service to which item 12012, 12017, 12021, 12022 or 12024 applies | PRICK TEST :FOOD ALLERGENS OR OTHER SUBSTANCE/ EACH ADDITIONAL PRICK PRICK-TEST-STANDARD SERIES |
| 12003 | Skin sensitivity testing for allergens, using more than 20 allergens, other than a service associated with a service to which item 12012, 12017, 12021, 12022 or 12024 applies | PRICK TEST :FOOD ALLERGENS OR OTHER SUBSTANCE/1ST PRICK. |
| 12012 | Epicutaneous patch testing in the investigation of allergic dermatitis using not more than 25 allergens | PATCH TEST , WITH ISOLATED OF AN ALLERGENIC COMPONENT/1ST PATCH PATCH TEST: STANDARD SERIES |
| 12017 | Epicutaneous patch testing in the investigation of allergic dermatitis using more than 25 allergens but not more than 50 allergens | PATCH TEST , WITH ISOLATED OF AN ALLERGENIC COMPONENT/EACH ADDITIONAL PATCH |
| 12021 | Epicutaneous patch testing in the investigation of allergic dermatitis, performed by or on behalf of a specialist, or consultant physician, in the practice of his or her specialty, using more than 50 allergens but not more than 75 allergens | PATCH TEST , WITH ISOLATED OF AN ALLERGENIC COMPONENT/EACH ADDITIONAL PATCH |
| 12022 | Epicutaneous patch testing in the investigation of allergic dermatitis, performed by or on behalf of a specialist, or consultant physician, in the practice of his or her specialty, using more than 75 allergens but not more than 100 allergens | PATCH TEST , WITH ISOLATED OF AN ALLERGENIC COMPONENT/EACH |

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RMP Code Detailed Nomenclature

Mapped to local nomenclature

| | | ADDITIONAL PATCH |
|------------------------------------|---|---|
| 12024 | Epicutaneous patch testing in the investigation of allergic dermatitis, performed by or on behalf of a specialist, or consultant physician, in the practice of his or her specialty, using more than 100 allergens | PATCH TEST , WITH ISOLATED OF AN ALLERGENIC COMPONENT/EACH ADDITIONAL PATCH |
| Specialty Dermatology | | |
| Sub-classification: Sutures | | |
| 30023 | Wound of soft tissue, traumatic, deep or extensively contaminated, debridement of, under general anaesthesia or regional or field nerve block, including suturing of that wound when performed [Anaes.] [Assist.] | STITCHING OF WOUND |
| 30026 | Skin and subcutaneous tissue or mucous membrane, repair of wound of, other than wound closure at time of surgery, not on face or neck, small [not more than 7cm long], superficial, not being a service to which another item in Group T4 applies [Anaes.] | STITCHING OF WOUND |
| 30029 | Skin and subcutaneous tissue or mucous membrane, repair of wound of, other than wound closure at time of surgery, not on face or neck, small [not more than 7cm in length], involving deeper tissue, not being a service to which another item in Group T4 applies [Anaes.] | STITCHING OF WOUND |
| 30032 | Skin and subcutaneous tissue or mucous membrane, repair of wound of, other than wound closure at time of surgery, on face or neck, small [not more than 7cm long], superficial [Anaes.] | LACERATION AND INCISION REPAIR OF SKIN & SOFT TISSUES |
| 30035 | Skin and subcutaneous tissue or mucous membrane, repair of wound of, other than wound closure at time of surgery, on face or neck, small [not more than 7cm long], involving deeper tissue [Anaes.] | STITCHING OF WOUND |
| 30038 | Skin and subcutaneous tissue or mucous membrane, repair of wound of, other than wound closure at time of surgery, not on face or neck, large [more than 7cm long], superficial, not being a service to which another item in Group T4 applies [Anaes.] | STITCHING OF WOUND |
| 30042 | SKIN AND SUBCUTANEOUS TISSUE OR MUCOUS MEMBRANE, REPAIR OF WOUND OF, other than wound closure at time of surgery, other than on face or neck, large [MORE THAN 7 CM LONG], involving deeper tissue, other than a service to which another item in Group T4 applies [Anaes.] | STITCHING OF WOUND |
| 30045 | Skin and subcutaneous tissue or mucous membrane, repair of wound of, other than wound closure at time of surgery, on face or neck, large [more than 7cm long], superficial [Anaes.] | STITCHING OF WOUND |
| 30049 | Skin and subcutaneous tissue or mucous membrane, repair of wound of, other than wound closure at time of surgery, on face or neck, large [more than 7cm long], involving deeper tissue [Anaes.] | STITCHING OF WOUND |
| 30052 | Full thickness laceration of ear, eyelid, nose or lip, repair of, with accurate apposition of each layer of tissue [Anaes.] [Assist.] | STITCHING OF WOUND |

Rwanda Medical Procedure Code Database

RMP Code Detailed Nomenclature

Mapped to local nomenclature

Specialty **Diagnostic Testing**

Sub-classification: **Etude des tremblements**

L77701- Testing of trembling/shaking

Testing of trembling/shaking

Specialty **Diagnostic Testing**

Sub-classification: **Potentiel évoqué somesthésique**

12207 Overnight investigation for sleep apnoea for a period of at least 8 hours duration, for a patient aged 18 years or more, if: Sleep testing
 [a] continuous monitoring of oxygen saturation and breathing using a multi-channel polygraph, and recordings of EEG, EOG, submental EMG, anterior tibial EMG, respiratory movement, airflow, oxygen saturation and ECG are performed; and
 [b] a technician is in continuous attendance under the supervision of a qualified sleep medicine practitioner; and [c] the patient is referred by a medical practitioner; and [d] the necessity for the investigation is determined by a qualified adult sleep medicine practitioner prior to the investigation; and [e] polygraphic records are analysed [for assessment of sleep stage, arousals, respiratory events and assessment of clinically significant alterations in heart rate and limb movement] with manual scoring, or manual correction of computerised scoring in epochs of not more than 1 minute, and stored for interpretation and preparation of report; and [f] interpretation and report are provided by a qualified adult sleep medicine practitioner based on reviewing the direct original recording of polygraphic data from the patient; if it can be demonstrated that a further investigation is indicated in the same 12 month period to which item 12203 applies for the adjustment or testing, or both, of the effectiveness of a positive pressure ventilatory support device [other than nasal continuous positive airway pressure] in sleep, in a patient with severe cardio-respiratory failure, and if previous studies have demonstrated failure of continuous positive airway pressure or oxygen — each additional investigation

Specialty **Diagnostic Testing**

Sub-classification: **Potentiel évoqué visuel**

10942 Testing of residual vision to provide optimum visual performance for a patient who has best corrected visual acuity of 6/15 Visual testing
 or N.12 or worse in the better eye or a horizontal visual field of less than 120 degrees and within 10 degrees above and below the horizontal midline, involving 1 or more of the following: [a] spectacle correction; [b] determination of contrast sensitivity; [c] determination of glare sensitivity; [d] prescription of magnification aids; not being a service associated with a service to which item 10916, 10921, 10922, 10923, 10924, 10925, 10926, 10927, 10928, 10929 or 10930 applies [item is subject to rule 73]

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Specialty **Electrotherapy**

Sub-classification: **Ultra Sons**

PT0041 Ultrasound

Ultrasound

Specialty **Electrotherapy**

Sub-classification: **Ultra-violet**

PT0041 Ultraviolet electrotherapy [UV]

Ultraviolet electrotherapy [UV]

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| Specialty ENT | Sub-classification: | |
|----------------------|--|---|
| 11332 | Oto-acoustic emission audiometry for the detection of permanent congenital hearing impairment, performed by or on behalf of a specialist or consultant physician, on an infant or child who is at risk due to 1 or more of the following factors: [a] admission to a neonatal intensive care unit; [b] family history of hearing impairment; [c] intra-uterine or perinatal infection [either suspected or confirmed]; [d] birthweight less than 1.5 kg; [e] craniofacial deformity; [f] birth asphyxia; [g] chromosomal abnormality, including Down`s Syndrome; [h] exchange transfusion; if: [i] the patient is referred by another medical practitioner; and [j] middle ear pathology has been excluded by specialist opinion | Otoacoustic Emission test[OAE] |
| 11339 | Electronystagmography | Electronystagmography/ Videonystagmography |
| 12000 | Skin sensitivity testing for allergens, using one to 20 allergens, other than a service associated with a service to which item 12012, 12017, 12021, 12022 or 12024 applies | Allergy test – skin prick test |
| 30023 | Wound of soft tissue, traumatic, deep or extensively contaminated, debridement of, under general anaesthesia or regional or field nerve block, including suturing of that wound when performed [Anaes.] [Assist.] | Debridement of the wound |
| 30072 | Diagnostic biopsy of mucous membrane, as an independent procedure, if the biopsy specimen is sent for pathological examination [Anaes.] | Endonasal biopsy in a child less than 5 years Nasal endoscopy under general anesthesia with biopsy Nasal endoscopy under local anesthesia with biopsy Oral cavity - biopsy |
| 30087 | Diagnostic biopsy of bone marrow by aspiration or punch biopsy of synovial membrane, where the biopsy is sent for pathological examination [Anaes.] | Punch biopsy |
| 30104 | Pre-auricular sinus, on a person 10 years of age or over. excision of, [Anaes.] | Pre auricular sinus excision under local |
| 30105 | Pre-auricular sinus, on a person under 10 years of age. Excision of [Anaes.] | Pre auricular sinus excision under general |
| 30219 | Haematoma, furuncle, small abscess or similar lesion not requiring admission to a hospital - incision with drainage of [excluding aftercare] | Incision and drainage of abscess of the nose under local anaesthesia Incision and drainage of furuncle Incision and drainage of septal hematoma/abscess under local anesthesia Incision and drainage of superficial neck abscess |

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| 30223 | Large haematoma, large abscess, carbuncle, cellulitis or similar lesion, requiring admission to a hospital, incision with drainage of [excluding aftercare] [Anaes.] | Incision and drainage of abscess of the nose under general anaesthesia Incision and drainage of deep neck abscess Incision and drainage of septal hematoma/abscess under general anesthesia |
| 30247 | Parotid gland, total extirpation of [Anaes.] [Assist.] | Parotidectomy - extended Parotidectomy - Total |
| 30250 | Parotid gland, total extirpation of with preservation of facial nerve [Anaes.] [Assist.] | Parotidectomy - Total |
| 30253 | Parotid gland, superficial lobectomy of, with exposure of facial nerve [Anaes.] [Assist.] | Parotidectomy- superficial |
| 30256 | Submandibular gland, extirpation of [Anaes.] [Assist.] | Excision of submandibular gland |
| 30259 | Sublingual gland, extirpation of [Anaes.] | Excision of sublingual gland |
| 30262 | Salivary gland, dilatation or diathermy of duct [Anaes.] | Dilatation of salivary gland duct |
| 30283 | Ranula or mucous cyst of mouth, removal of [Anaes.] | Excision of para dental cyst Excision of plunging ranula Excision of simple ranula |
| 30286 | Branchial cyst, on a person 10 years of age or over. removal of, [Anaes.] [Assist.] | Brachial arch cyst/Fistula excision Excision of deep cervical cyst |
| 30287 | Branchial cyst, on a person under 10 years of age. Removal of, [Anaes.] [Assist.] | Brachial arch cyst/Fistula excision Excision of deep cervical cyst |
| 30289 | Branchial fistula, on a person 10 years of age or over. removal of, [Anaes.] [Assist.] | Brachial arch cyst/Fistula excision Excision of a congenital fistula of the neck |
| 30293 | Cervical oesophagostomy; or closure of cervical oesophagostomy with or without plastic repair [Anaes.] [Assist.] | Oesophagotomy |

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| 30296 | Thyroidectomy, total [Anaes.] [Assist.] | Thyroidectomy – subtotal or total |
| 30308 | Bilateral subtotal thyroidectomy [Anaes.] [Assist.] | Thyroidectomy – subtotal or total |
| 30309 | Thyroidectomy, subtotal for thyrotoxicosis [Anaes.] [Assist.] | Thyroidectomy – subtotal or total |
| 30310 | Thyroid, unilateral subtotal thyroidectomy or equivalent partial thyroidectomy [Anaes.] [Assist.] | Thyroidectomy – subtotal or total Total or subtotal thyroidectomy with isolation of parathyroid glands |
| 30313 | Thyroglossal cyst, removal of [Anaes.] [Assist.] | Excision of thyroglossal duct cyst/Fistula[Sistrunck procedure] |
| 30314 | Thyroglossal cyst or fistula or both, on a person 10 years of age or over. radical removal of, including thyroglossal duct and portion of hyoid bone [Anaes.] [Assist.] | Excision of thyroglossal duct cyst/Fistula[Sistrunck procedure] |
| 31211 | Tumour, cyst, ulcer or scar [other than a scar removed during the surgical approach at an operation], removal of and suture, if: [a] the lesion size is more than 10 mm, but not more than 20 mm, in diameter; and [b] the removal is from a mucous membrane by surgical excision [other than by shave excision]; and [c] the specimen excised is sent for histological examination [Anaes.] | Oral cavity tumor resection |
| 31245 | Skin and subcutaneous tissue, extensive excision of, in the treatment of suppurative hidradenitis [excision from axilla, groin or natal cleft] or sycosis barbae or nuchae [excision from face or neck] [Anaes.] | Excision of suppurative adenitis or lymph node of the neck |
| 31345 | Lipoma, removal of by surgical excision or liposuction, where lesion is subcutaneous and 50mm or more in diameter, or is sub-fascial, where the specimen is sent for histological confirmation of diagnosis [Anaes.] | Excision lipoma |
| 31420 | Lymph node of neck, biopsy of [Anaes.] | Deep neck lymph node biopsy Lymph node biopsy Lymph node biopsy - neck |
| 31423 | Lymph nodes of neck, selective dissection of 1 or 2 lymph node levels involving removal of soft tissue and lymph nodes from one side of the neck, on a person 10 years of age or over [Anaes.] [Assist.] | Neck dissection - one or two lymph node levels [left] Neck dissection - one or two lymph node levels [right] |
| 31426 | Lymph nodes of neck, selective dissection of 3 lymph node levels involving removal of soft tissue and lymph nodes from one side of the neck [Anaes.] [Assist.] | Neck dissection - three lymph node levels [left] Neck dissection - three lymph node levels [right] |

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| 31429 | Lymph nodes of neck, selective dissection of 4 lymph node levels on one side of the neck with preservation of one or more of: internal jugular vein, sternocleido-mastoid muscle, or spinal accessory nerve [Anaes.] [Assist.] | Neck dissection: four or more lymph node levels [left] Neck dissection: four or more lymph node levels [right] |
| 31432 | Lymph nodes of neck, bilateral selective dissection of levels I, II and III [bilateral supraomohyoid dissections] [Anaes.] [Assist.] | Neck dissection - one or two lymph node levels [right] |
| 31435 | Lymph nodes of neck, comprehensive dissection of all 5 lymph node levels on one side of the neck [Anaes.] [Assist.] | Neck dissection - Radical |
| 31438 | Lymph nodes of neck, comprehensive dissection of all 5 lymph node levels on one side of the neck with preservation of one or more of: internal jugular vein, sternocleido-mastoid muscle, or spinal accessory nerve [Anaes.] [Assist.] | Neck dissection - Modified Radical |
| 38453 | Tracheal excision and repair without cardiopulmonary bypass [Anaes.] [Assist.] | Cricotracheal resection Resection and anastomosis of tracheal stenosis Tracheal resection and anastomosis |
| 38455 | Tracheal excision and repair of, with cardiopulmonary bypass [Anaes.] [Assist.] | Resection and anastomosis of tracheal stenosis |
| 39640 | Tumour involving anterior cranial fossa, removal of, involving craniotomy, radical excision of the skull base, and dural repair [Anaes.] [Assist.] | Anterior craniofacial resection |
| 41503 | Ear, removal of foreign body in, involving incision of external auditory canal [Anaes.] | Foreign body ear or nose removal under general anesthesia Foreign body removal from external auditory by surgical means Foreign body remove from external auditory canal in a child under anesthesia |
| 41506 | Aural polyp, removal of [Anaes.] | Excision of ear polyp |
| 41518 | External auditory meatus, removal of exostoses in [Anaes.] [Assist.] | Excision of external auditory canal exostosis |
| 41527 | Myringoplasty, transcanal approach [Rosen incision] [Anaes.] [Assist.] | Myringoplasty |
| 41530 | Myringoplasty, postaural or endaural approach with or without mastoid inspection [Anaes.] | Myringoplasty |
| 41539 | Ossicular chain reconstruction [Anaes.] [Assist.] | Atticotomy+/- reconstruction of attic defect |

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| | | Ossicular chain surgery |
| 41542 | Ossicular chain reconstruction and myringoplasty [Anaes.] [Assist.] | Ossicular chain surgery |
| 41545 | Mastoidectomy [cortical] [Anaes.] [Assist.] | Mastoidectomy -Cortical |
| 41551 | Mastoidectomy, intact wall technique, with myringoplasty [Anaes.] [Assist.] | Mastoidectomy- canal wall down Mastoidectomy -canal wall up |
| 41557 | Mastoidectomy [radical or modified radical] [Anaes.] [Assist.] | Mastoidectomy -Radical |
| 41569 | Decompression of facial nerve in its mastoid portion [Anaes.] [Assist.] | Facial nerve decompression |
| 41572 | Labyrinthotomy or destruction of labyrinth [Anaes.] [Assist.] | Labyrinthectomy |
| 41590 | Endolymphatic sac, transmastoid decompression with or without drainage of [Anaes.] [Assist.] | Endolymphatic sac decompression |
| 41603 | Osseo-integration procedure implantation of titanium fixture for use with implantable bone conduction hearing system device, in patients: - With a permanent or long term hearing loss; and - Unable to utilise conventional air or bone conduction hearing aid for medical or audiological reasons; and - With bone conduction thresholds that accord to recognised criteria for the implantable bone conduction hearing device being inserted. Not being a service associated with a service to which items 41554, 45794 or 45797 [Anaes.] | Bone Anchored Hearing Aid [BAHA]insertion |
| 41608 | Stapedectomy [Anaes.] [Assist.] | Stapedectomy |
| 41617 | Cochlear implant, insertion of, including mastoidectomy [Anaes.] [Assist.] | Cochlear implantation |
| 41620 | Glomus tumour, transtympanic removal of [Anaes.] [Assist.] | Glomus tumour excision |
| 41623 | Glomus tumour, transmastoid removal of, including mastoidectomy [Anaes.] [Assist.] | Glomus tumour excision |
| 41626 | Abscess or inflammation of middle ear, operation for [excluding aftercare] [Anaes.] | Myringotomy |
| 41629 | Middle ear, exploration of [Anaes.] [Assist.] | Exploratory tympanotomy and middle ear examination under microscope |
| 41632 | Middle ear, insertion of tube for drainage of [including myringotomy] [Anaes.] | Myringotomy with ventilation tube insertion - left |

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| | | Myringotomy with ventilation tube insertion - right |
| 41647 | Ear toilet requiring use of operating microscope and microinspection of tympanic membrane with or without general anaesthesia [Anaes.] | Examination of the ear under microscope Examination under anesthesia [EUA] |
| 41656 | Nasal haemorrhage, posterior, arrest of, with posterior nasal packing with or without cauterisation and with or without anterior pack [excluding aftercare] [Anaes.] | Nasal packing - posterior |
| 41659 | Nose, removal of foreign body in, other than by simple probing [Anaes.] | Foreign body ear or nose removal under general anesthesia |
| 41671 | Nasal septum, septoplasty, submucous resection or closure of septal perforation [Anaes.] | External rhinoseptoplasty with complete repair of nasal septum, nasal pyramid and nasal valve Septoplasty involving the cartilaginous and bony nasal septum Septoplasty involving the cartilaginous nasal septum |
| 41677 | Nasal haemorrhage, arrest of during an episode of epistaxis by cauterisation or nasal cavity packing or both [Anaes.] | Nasal chemical cautery Nasal electrocautery |
| 41689 | Turbinectomy or turbinectomies, partial or total, unilateral [Anaes.] | Turbinectomy or turbinoplasty - unilateral |
| 41701 | Maxillary antrum, proof puncture and lavage of under general anaesthesia [requiring admission to hospital], not being a service associated with a service to which another item in this Group applies [Anaes.] | Inferior antrostomy |
| 41707 | Maxillary artery, transantral ligation of [Anaes.] [Assist.] | Ligation of major blood vessels of the neck |
| 41710 | Antrostomy [radical] [Anaes.] [Assist.] | Caldwell- Luc operation |
| 41713 | Antrostomy [radical] with transantral ethmoidectomy or transantral vidian neurectomy [Anaes.] [Assist.] | Vidian neurectomy |
| 41722 | Oroantral fistula, plastic closure of [Anaes.] [Assist.] | Oroantral fistula repair |
| 41728 | Lateral rhinotomy with removal of tumour [Anaes.] [Assist.] | Lateral rhinotomy approach |
| 41731 | Frontonasal ethmoidectomy by external approach with or without sphenoidectomy [Anaes.] [Assist.] | External fronto-ethmoidectomy |

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| | | External speno-ethmoidectomy |
| 41734 | Radical frontoethmoidectomy with osteoplastic flap [Anaes.] [Assist.] | Frontal sinus osteoplastic flap procedure |
| 41737 | Frontal sinus, or ethmoidal sinuses on the one side, intranasal operation on [Anaes.] [Assist.] | Modified Lantrop procedure |
| 41740 | Frontal sinus, catheterisation of [Anaes.] | Endonasal Frontal Sinus Drainage [DRAF I-III] |
| 41743 | Frontal sinus, trephine of [Anaes.] [Assist.] | Frontal sinus trephination |
| 41746 | Frontal sinus, radical obliteration of [Anaes.] [Assist.] | Frontal sinus obliteration |
| 41749 | Ethmoidal sinuses, external operation on [Anaes.] [Assist.] | External ethmoidectomy |
| 41764 | Nasendoscopy or sinoscopy or fiberoptic examination of nasopharynx and larynx, one or more of these procedures, unilateral or bilateral examination [Anaes.] | Flexible nasopharyngolaryngoscopy [flexiscope] Nasal endoscopy under local anesthesia without biopsy |
| 41767 | Nasopharyngeal angiofibroma, removal of [Anaes.] [Assist.] | Excision of Angiofibroma - open |
| 41773 | Pharyngeal pouch, endoscopic resection of [Dohlman`s operation] [Anaes.] [Assist.] | Dohlman`s procedure |
| 41776 | Cricopharyngeal myotomy with or without inversion of pharyngeal pouch [Anaes.] [Assist.] | Cricopharyngeal myotomy+/-Excision of pharyngeal pouch |
| 41779 | Pharyngotomy [lateral], with or without total excision of tongue [Anaes.] [Assist.] | Total pharyngectomy |
| 41782 | Partial pharyngectomy via pharyngotomy [Anaes.] [Assist.] | Pharyngectomy |
| 41785 | Partial pharyngectomy via pharyngotomy with partial or total glossectomy [Anaes.] [Assist.] | Glossectomy - partial Glossectomy – total Partial glossectomy Pharyngectomy Total glossectomy |

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| 41786 | Uvulopalatopharyngoplasty, with or without tonsillectomy, by any means [Anaes.] [Assist.] | Uvulopalatopharyngoplasty [UPPP] |
| 41789 | Tonsils or tonsils and adenoids, removal of, in a person aged less than 12 years [including any examination of the postnasal space and nasopharynx and the infiltration of local anaesthetic], not being a service to which item 41764 applies [Anaes.] | Adenoidectomy Quinsy tonsillectomy Tonsillectomy - Pediatric |
| 41793 | Tonsils or tonsils and adenoids, removal of, in a person 12 years of age or over [including any examination of the postnasal space and nasopharynx and the infiltration of local anaesthetic], not being a service to which item 41764 applies [Anaes.] | Adenoidectomy Quinsy tonsillectomy Tonsillectomy - Adult |
| 41801 | Adenoids, removal of [including any examination of the postnasal space and nasopharynx and the infiltration of local anaesthetic], not being a service to which item 41764 applies [Anaes.] | Adenoidectomy |
| 41807 | Peritonsillar abscess [quinsy], incision of [Anaes.] | Incision and drainage of Peritonsillar/Retropahyngal abscess under general anesthesia Incision and drainage of peritonsillar abscess under general anaesthesia |
| 41810 | Uvulotomy or uvulectomy [Anaes.] | Excision of tumor of the uvula |
| 41816 | Oesophagoscopy [with rigid oesophagoscope] [Anaes.] | Oesophagoscopy |
| 41822 | Oesophagoscopy [with rigid oesophagoscope] with biopsy [Anaes.] | Oesophagoscopy with biopsy |
| 41825 | Oesophagoscopy [with rigid oesophagoscope] with removal of foreign body [Anaes.] [Assist.] | Oesophagoscopy with foreign body removal |
| 41834 | Laryngectomy [total] [Anaes.] [Assist.] | Total laryngectomy Total laryngectomy or partial horizontal or hemilaryngectomy |
| 41846 | Larynx, direct examination of the supraglottic, glottic and subglottic regions, not being a service associated with any other procedure on the larynx or with the administration of a general anaesthetic [Anaes.] | Biopsy of larynx |

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| | | Biopsy of larynx in a child less than 5 years |
| 41855 | Micro-laryngoscopy [Anaes.] [Assist.] | Direct laryngoscopy-Exploration |
| 41858 | Micro-laryngoscopy with removal of juvenile papillomata [Anaes.] [Assist.] | Direct laryngoscopy-Biopsy Excision of laryngeal papillomatosis Excision of laryngeal polyp Micro-laryngeal surgery |
| 41861 | micro-laryngoscopy with removal of benign lesions of the larynx by laser surgery [Anaes.] [Assist.] | Laser laryngoplasty |
| 41867 | Micro-laryngoscopy with arytenoidectomy [Anaes.] [Assist.] | Arytenoidectomy Cordopexy or arytenoidopexy |
| 41873 | Larynx, fractured, operation for [Anaes.] [Assist.] | Repair of larynx |
| 41876 | Larynx, external operation on, or laryngofissure, with or without cordectomy [Anaes.] [Assist.] | Cordectomy or frontolateral partial laryngectomy External repair of laryngocele Laryngofissure Laryngotracheal reconstruction Repair of larynx |
| 41879 | Laryngoplasty or tracheoplasty, including tracheostomy [Anaes.] [Assist.] | Laryngoplasty/Supraglottoplasty |
| 41881 | Tracheostomy by open exposure of the trachea, including separation of the strap muscles or division of the thyroid isthmus, where performed [Anaes.] [Assist.] | Tracheostomy |
| 41892 | Bronchoscopy with 1 or more endobronchial biopsies or other diagnostic or therapeutic procedures [Anaes.] | Bronchoscopy and biopsy |
| 41895 | Bronchus, removal of foreign body in [Anaes.] [Assist.] | Bronchoscopy for foreign body removal |
| 41898 | Fibreoptic bronchoscopy with 1 or more transbronchial lung biopsies, with or without bronchial or bronchoalveolar lavage, with or without the use of interventional imaging [Anaes.] [Assist.] | Bronchoscopy for exploration |

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| 41901 | Endoscopic laser resection of endobronchial tumours for relief of obstruction including any associated endoscopic procedures [Anaes.] [Assist.] | Laser arytenoidectomy/tenotomy of vocal cord |
| 41904 | Bronchoscopy with dilatation of tracheal stricture [Anaes.] | Laryngotracheal dilatation and /or infiltration |
| 41905 | Trachea or bronchus, dilatation of stricture and endoscopic insertion of stent [Anaes.] [Assist.] | Endolaryngeal stenting for treatment of laryngeal stenosis |
| 42545 | Orbit, decompression of, for dysthyroid eye disease, by fenestration of 2 or more walls, or by the removal of intraorbital peribulbar and retrobulbar fat from each quadrant of the orbit, 1 eye [Anaes.] [Assist.] | Orbital decompression - endoscopic |
| 42623 | Dacryocystorhinostomy [Anaes.] [Assist.] | Dacryocystorhinostomy |
| 42761 | Division of anterior or posterior synechiae, as an independent procedure, other than by laser [Anaes.] [Assist.] | Nasal synerchia release |
| 42872 | Eyebrow, elevation of, for paretic states [Anaes.] | Blepharoplasty Brow lift |
| 43021 | Photodynamic therapy, one eye, including the infusion of verteporfin continuously through a peripheral vein, using a non-thermal laser at a wavelength of 689nm, for the treatment of choroidal neovascularisation. | Photodynamic therapy |
| 43022 | Photodynamic therapy, both eyes, including the infusion of verteporfin continuously through a peripheral vein, using a non-thermal laser at a wavelength of 689nm, for the treatment of choroidal neovascularisation. | Photodynamic therapy |
| 45239 | Direct, indirect or local flap, revision of, by incision and suture, not being a service to which item 45240 applies [Anaes.] | Local flap reconstruction |
| 45506 | Scar, of face or neck, not more than 3 cm in length, revision of, where undertaken in the operating theatre of a hospital, or where performed by a specialist in the practice of his or her specialty [Anaes.] | Facial soft tissue laceration repair under general anesthesia Facial soft tissue suturing under general anesthesia |
| 45575 | Facial nerve paralysis, free fascia graft for [Anaes.] [Assist.] | Facial nerve transposition |
| 45578 | Facial nerve paralysis, muscle transfer for [Anaes.] [Assist.] | Facial nerve transposition Treatment of facial nerve paralysis by muscular transposition |
| 45581 | Facial nerve palsy, excision of tissue for [Anaes.] | Facial reanimation for facial nerve palsy |
| 45596 | Maxilla, total resection of [Anaes.] [Assist.] | Maxillectomy-Total |

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| 45597 | Maxilla, total resection of both maxillae [Anaes.] [Assist.] | Maxillectomy - extended Weber Ferguson approach |
| 45645 | Choanal atresia, repair of by puncture and dilatation [Anaes.] | Surgical treatment of choanal atresia [bilateral] Surgical treatment of choanal atresia [unilateral] |
| 45646 | Choanal atresia, correction by open operation with bone removal [Anaes.] [Assist.] | Surgical treatment of choanal atresia [bilateral] Surgical treatment of choanal atresia [unilateral] |
| 45647 | Face, contour restoration of 1 region, using autogenous bone or cartilage graft [not being a service to which item 45644 applies] [Anaes.] [Assist.] | Face lift |
| 45660 | External ear, complex total reconstruction of, using multiple costal cartilage grafts to form a framework, including the harvesting and sculpturing of the cartilage and its insertion, for congenital absence, microtia or post-traumatic loss of entire or substantial portion of pinna [first stage] - performed by a specialist in the practice of his or her specialty [Anaes.] [Assist.] | Reconstruction of the pinna for treatment of pinna aplasia or traumatic amputation |
| 45661 | External ear, complex total reconstruction of, elevation of costal cartilage framework using cartilage previously stored in abdominal wall, including the use of local skin and fascia flaps and full thickness skin graft to cover cartilage [second stage] - performed by a specialist in the practice of his or her specialty [Anaes.] [Assist.] | Reconstruction of the pinna for treatment of pinna aplasia or traumatic amputation |
| 45707 | Cleft palate, primary repair [Anaes.] [Assist.] | Cleft soft palate repair |
| 45710 | Cleft palate, secondary repair, closure of fistula using local flaps [Anaes.] | Cleft soft palate repair |
| 45713 | Cleft palate, secondary repair, lengthening procedure [Anaes.] [Assist.] | Cleft soft palate repair |
| 45714 | Oro-nasal fistula, plastic closure of, including services to which item 45200, 45203 or 45239 applies [Anaes.] [Assist.] | Closure of oronasal or oroantral fistula |
| 45716 | Velo-pharyngeal incompetence, pharyngeal flap for, or pharyngoplasty for [Anaes.] | Pharyngoplasty |
| 45720 | Mandible or maxilla, unilateral osteotomy or osteectomy of, including transposition of nerves and vessels and bone grafts taken from the same site and excluding services to which item 47933or 47936 apply [Anaes.] [Assist.] | Modeling and functional adaptation by osteotomy and osteosynthesis material, a free compound of transplant tissue or several tissues [bone and soft tissues or cartilage], with microvascular anastomosis |
| 45723 | Mandible or maxilla, unilateral osteotomy or osteectomy of, including transposition of nerves and vessels and bone grafts | Modeling and functional adaptation of a tissue |

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| | taken from the same site and stabilisation with fixation by wires, screws, plates or pins, or any combination, and excluding services to which item 47933 or 47936 apply [Anaes.] [Assist.] | transplant pedicled or free, with microvascular anastomosis |
| 45726 | Mandible or maxilla, bilateral osteotomy or osteectomy of, including transposition of nerves and vessels and bone grafts taken from the same site, and excluding services to which item 47933 or 47936 apply [Anaes.] [Assist.] | Modeling and functional adaptation of a tissue transplant pedicled or free, with microvascular anastomosis |
| 45729 | Mandible or maxilla, bilateral osteotomy or osteectomy of, including transposition of nerves and vessels and bone grafts taken from the same site and stabilisation with fixation by wires, screws, plates or pins, or any combination, and excluding services to which item 47933 or 47936 apply [Anaes.] [Assist.] | Modeling and functional adaptation of a tissue transplant pedicled or free, with microvascular anastomosis |
| 45803 | Tumours, cysts, ulcers or scars, [other than a scar removed during the surgical approach at an operation], in the oral and maxillofacial region, up to 3 cm in diameter, removal from cutaneous or subcutaneous tissue or from mucous membrane, where the removal is by surgical excision and suture, and the procedure is performed on more than 3 but not more than 10 lesions [Anaes.] [Assist.] | Excision of sinonasal tumor combined approaches Excision of sinonasal tumor -endoscopic Excision of sinonasal tumor-open Excision of sinonasal tumor- open extended Excision of sublingual gland tumor Excision of submandibular gland tumor |
| 45809 | Tumour or deep cyst [other than a cyst associated with a tooth or tooth fragment unless it has been established by radiological examination that there is a minimum of 5mm separation between the cyst lining and tooth structure or where a tumour or cyst has been proven by positive histopathology], in the oral and maxillofacial region, removal of, requiring wide excision, not being a service to which another item in this subgroup applies [Anaes.] [Assist.] | Excision of floor of the mouth tumor |
| 45811 | Tumour, in the oral and maxillofacial region, removal of, from soft tissue [including muscle, fascia and connective tissue], extensive excision of, without skin or mucosal graft [Anaes.] [Assist.] | Excision of floor of the mouth tumor |
| 45813 | Tumour, in the oral and maxillofacial region, removal of, from soft tissue [including muscle, fascia and connective tissue], extensive excision of, with skin or mucosal graft [Anaes.] [Assist.] | Excision of floor of the mouth tumor |
| 45888 | Foreign body, in the oral and maxillofacial region, deep, removal of using interventional imaging techniques [Anaes.] [Assist.] | Foreign body removal in the pharynx: tonsil, tongue base or piriform fossa under local anaesthesia |
| 45975 | Maxilla, unilateral or bilateral, treatment of fracture of, not requiring splinting | Reduction and fixation of maxillary fracture involving the orbit |

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| 45984 | Maxilla, treatment of a complicated fracture of, involving viscera, blood vessels or nerves requiring open reduction not involving plate[s] [Anaes.] [Assist.] | Reduction and fixation of maxillary fracture involving the orbit |
| 47738 | Nasal bones, treatment of fracture of, by reduction [Anaes.] | Closed reduction of nasal bone fracture Nasal bone fracture reduction - closed |
| 47741 | Nasal bones, treatment of fracture of, by open reduction involving osteotomies [Anaes.] [Assist.] | Nasal bone fracture reduction - open |
| 52003 | Skin and subcutaneous tissue or mucous membrane, repair of recent wound of, on face or neck, small [not more than 7 cm long], involving deeper tissue [Anaes.] | Facial soft tissue suturing /simple under local anesthesia |
| 52006 | Skin and subcutaneous tissue or mucous membrane, repair of recent wound of, on face or neck, large [more than 7 cm long], superficial [Anaes.] | Facial soft tissue suturing /Multiple under local anesthesia |
| 52010 | Full thickness laceration of ear, eyelid, nose or lip, repair of, with accurate apposition of each layer of tissue [Anaes.] [Assist.] | Oral cavity laceration repair |
| 52024 | Biopsy of skin or mucous membrane, as an independent procedure [Anaes.] | Punch biopsy - nose |
| 52055 | Haematoma, small abscess or cellulitis in the oral and maxillofacial region, not requiring admission to a hospital, incision with drainage of [excluding after-care] | Drainage of orbital abscess - open Incision and drainage of peritonsillar abscess under local anaestheisa Pinna hematoma evacuation |
| 52057 | Large haematoma, large abscess, carbuncle, cellulitis or similar lesion in the oral and maxillofacial region, incision with drainage of [excluding after-care] [Anaes.] | Excision and marsupialization of sublingual cyst |
| 52058 | Percutaneous drainage of deep abscess in the oral and maxillofacial region, using interventional imaging techniques — but not including imaging [Anaes.] | Drainage of orbital subperiosteal abscess - endoscopic |
| 52081 | Tongue tie, division or excision of frenulum [Anaes.] | Frenulectomy [tongue tie release] |
| 52440 | Cleft lip, unilateral — primary repair, 1 stage, without anterior palate repair [Anaes.] [Assist.] | Cleft lip repair - simple |
| 52442 | Cleft lip, unilateral — primary repair, 1 stage, with anterior palate repair [Anaes.] [Assist.] | Cleft lip repair - simple |
| 52444 | Cleft lip, bilateral — primary repair, 1 stage, without anterior palate repair [Anaes.] [Assist.] | Cleft lip repair - double |
| 52446 | Cleft lip, bilateral — primary repair, 1 stage, with anterior palate repair [Anaes.] [Assist.] | Cleft lip repair - double |

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| 52456 | Cleft lip reconstruction using full thickness flap [Abbe or similar], first stage [Anaes.] [Assist.] | Cleft lip repair - staged |
| 52458 | Cleft lip reconstruction using full thickness flap [Abbe or similar], second stage [Anaes.] | Cleft lip repair - staged |
| 52800 | Neurolysis by open operation, without transposition, not being a service associated with a service to which item 52803 applies [Anaes.] [Assist.] | Accessory nerve neurolysis - left Accessory nerve neurolysis - right Facial nerve neurolysis - left Facial nerve neurolysis - right Recurrent laryngeal nerve neurolysis - left Recurrent laryngeal nerve neurolysis - right |
| 52821 | Nerve graft to nerve trunk [cable graft] including harvesting of nerve graft using microsurgical techniques [Anaes.] [Assist.] | Facial nerve graft |
| 53000 | Maxillary antrum, proof puncture and lavage of [Anaes.] | Antral washout Antral washout with drug irrigation |
| 53054 | Nasendoscopy or sinoscopy or fiberoptic examination of nasopharynx — 1 or more of these procedures [Anaes.] | Nasal endoscopy under general anesthesia without biopsy |
| 53058 | Nasal haemorrhage, posterior, arrest of, with posterior nasal packing with or without cauterisation and with or without anterior pack [Anaes.] | Nasal packing - anterior |
| 53062 | Post-surgical nasal haemorrhage, arrest of during an episode of epistaxis by cauterisation or nasal cavity packing or both [Anaes.] | Nasal electrocautery |
| 82324 | Audiology health service, consisting of an impedance audiogram involving tympanometry and measurement of static compliance and acoustic reflex performed on a person by an eligible audiologist [not being a service associated with a service to which item 82309, 82312, 82315 or 82318 applies] if: [a] the service is performed pursuant to a written request made by an eligible practitioner to assist the eligible practitioner in the diagnosis and/or treatment and/or management of ear disease or a related disorder in the person; and [b] the eligible practitioner is: [i] a specialist in the specialty of otolaryngology head and neck surgery; or [ii] a specialist or consultant physician in the specialty of neurology; and [c] the service is not performed for the purpose of a hearing screening; and [d] the person is not an admitted patient of a hospital; and [e] the service is performed on the person individually and in person; and [f] after the service, the eligible audiologist provides a copy of the results of the service performed, together with relevant comments in writing that the eligible audiologist has on those results, to the eligible practitioner who requested the service; and [g] a service to which item | Tympanometry |

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11324 applies has not been performed on the person on the same day.

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| N1085 | See nursing procedures | Removal of stitches/staples Removal of ventilation tube |
| Specialty ENT | | |
| Sub-classification: Diagnostic Audiology Services | | |
| 11300 | Brain stem evoked response audiometry [Anaes.] | Brain stem evoked response audiometry |
| 11303 | Electrocochleography, extratympanic method, 1 or both ears | ELECTROCOCHLEOGRAPHY, extratympanic method |
| 11304 | Electrocochleography, transtympanic membrane insertion technique, 1 or both ears | ELECTROCOCHLEOGRAPHY, transtympanic membrane insertion technique |
| 11306 | Non-determinate audiometry | Audiometry Tinnitus studies |
| 11309 | Audiogram, air conduction | Audiogram |
| 11312 | Audiogram, air and bone conduction or air conduction and speech discrimination | Audiogram |
| 11315 | Audiogram, air and bone conduction and speech | Audiogram |
| 11318 | Audiogram, air and bone conduction and speech, with other cochlear tests | Audiogram |
| 11324 | Impedance audiogram involving tympanometry and measurement of static compliance and acoustic reflex performed by, or on behalf of, a specialist in the practice of his or her specialty, if the patient is referred by a medical practitioner — not being a service associated with a service to which item 11309, 11312, 11315 or 11318 applies | Impedance audiogram |
| 11330 | Impedance audiogram if the patient is not referred by a medical practitioner — 1 examination in any 4 week period | Impedance audiogram |
| 11333 | Caloric test of labyrinth or labyrinths | Caloric test of Labyrinth Inner ear assessment: caloric tests, rotatory chair with nystagmography recording and report |
| 11336 | Simultaneous bithermal caloric test of labyrinths | Caloric test of Labyrinth |

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| | | Inner ear assessment: caloric tests, rotatory chair with nystagmography recording and report |
| 11339 | Electronystagmography | Inner ear assessment: caloric tests, rotatory chair with nystagmography recording and report |
| 82300 | Audiology health service, consisting of brain stem evoked response audiometry, performed on a person by an eligible audiologist if: the service is performed pursuant to a written request made by an audiology health service, consisting of brain stem evoked response audiometry, performed on a person by an eligible audiologist if: [a] the service is performed pursuant to a written request made by an eligible practitioner to assist the eligible practitioner in the diagnosis and/or treatment and/or management of ear disease or a related disorder in the person; and [b] the eligible practitioner is a specialist in the specialty of otolaryngology head and neck surgery; and [c] the service is not performed for the purpose of a hearing screening; and [d] the person is not an admitted patient of a hospital; and [e] the service is performed on the person individually and in person; and [f] after the service, the eligible audiologist provides a copy of the results of the service performed, together with relevant comments in writing that the eligible audiologist has on those results, to the eligible practitioner who requested the service. [g] a service to which item 11300 applies has not been performed on the person on the same day. | Brain stem evoked response audiometry |
| 82306 | Audiology health service, consisting of non-determinate audiometry performed on a person by an eligible audiologist if: [a] Audiometry the service is performed pursuant to a written request made by an eligible practitioner to assist the eligible practitioner in the diagnosis and/or treatment and/or management of ear disease or a related disorder in the person; and [b] the eligible practitioner is a specialist in the specialty of otolaryngology head and neck surgery; and [c] the service is not performed for the purpose of a hearing screening; and [d] the person is not an admitted patient of a hospital; and [e] the service is performed on the person individually and in person; and [f] after the service, the eligible audiologist provides a copy of the results of the service performed, together with relevant comments in writing that the eligible audiologist has on those results, to the eligible practitioner who requested the service; and [g] a service to which item 11306 applies has not been performed on the person on the same day. | |
| 82309 | Audiology health service, consisting of an air conduction audiogram performed on a person by an eligible audiologist if: [a] Air conduction audiogram the service is performed pursuant to a written request made by an eligible practitioner to assist the eligible practitioner in the diagnosis and/or treatment and/or management of ear disease or a related disorder in the person; and [b] the eligible practitioner is: [i] a specialist in the specialty of otolaryngology head and neck surgery; or [ii] a specialist or consultant physician in the specialty of neurology; and [c] the service is not performed for the purpose of a hearing screening; and [d] the person is not an admitted patient of a hospital; and [e] the service is performed on the person individually and in person; and [f] after the service, the eligible audiologist provides a copy of the results of the service performed, together with relevant comments in writing that the eligible audiologist has on those results, to the eligible practitioner who requested the service; and [g] a service to which item 11309 applies has not been performed on the person on the same day. | |
| 82312 | Audiology health service, consisting of an air and bone conduction audiogram or air conduction and speech discrimination Speech audiometry conducted in conjunction | |

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audiogram performed on a person by an eligible audiologist if: the service is performed pursuant to a written request made with pure tone audiometry by an eligible practitioner to assist the eligible practitioner in the diagnosis and/or treatment and/or management of ear disease or a related disorder in the person; and the eligible practitioner is: [i] a specialist in the specialty of otolaryngology head and neck surgery; or [ii] a specialist or consultant physician in the specialty of neurology; and the service is not performed for the purpose of a hearing screening; and the person is not an admitted patient of a hospital; and the service is performed on the person individually and in person; and after the service, the eligible audiologist provides a copy of the results of the service performed, together with relevant comments in writing that the eligible audiologist has on those results, to the eligible practitioner who requested the service; and a service to which item 11312 applies has not been performed on the person on the same day.

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| 82315 | Audiology health service, consisting of an air and bone conduction and speech discrimination audiogram performed on a person by an eligible audiologist if: [a] the service is performed pursuant to a written request made by an eligible practitioner to assist the eligible practitioner in the diagnosis and/or treatment and/or management of ear disease or a related disorder in the person; and [b] the eligible practitioner is: [i] a specialist in the specialty of otolaryngology head and neck surgery; or [ii] a specialist or consultant physician in the specialty of neurology; and [c] the service is not performed for the purpose of a hearing screening; and [d] the person is not an admitted patient of a hospital; and [e] the service is performed on the person individually and in person; and [f] after the service, the eligible audiologist provides a copy of the results of the service performed, together with relevant comments in writing that the eligible audiologist has on those results, to the eligible practitioner who requested the service; and [g] a service to which item 11315 applies has not been performed on the person on the same day. | Speech audiometry conducted in conjunction with pure tone audiometry |
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| 82318 | Audiology health service, consisting of an air and bone conduction and speech discrimination audiogram with other cochlear tests performed on a person by an eligible audiologist if: [a] the service is performed pursuant to a written request made by an eligible practitioner to assist the eligible practitioner in the diagnosis and/or treatment and/or management of ear disease or a related disorder in the person; and [b] the eligible practitioner is: [i] a specialist in the specialty of otolaryngology head and neck surgery; or [ii] a specialist or consultant physician in the specialty of neurology; and [c] the service is not performed for the purpose of a hearing screening; and [d] the person is not an admitted patient of a hospital; and [e] the service is performed on the person individually and in person; and [f] after the service, the eligible audiologist provides a copy of the results of the service performed, together with relevant comments in writing that the eligible audiologist has on those results, to the eligible practitioner who requested the service; and [g] a service to which item 11318 applies has not been performed on the person on the same day. | Cochlear implant testing |
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Cochlear tests

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| 82324 | Audiology health service, consisting of an impedance audiogram involving tympanometry and measurement of static compliance and acoustic reflex performed on a person by an eligible audiologist [not being a service associated with a service to which item 82309, 82312, 82315 or 82318 applies] if: [a] the service is performed pursuant to a written request made by an eligible practitioner to assist the eligible practitioner in the diagnosis and/or treatment and/or management of ear disease or a related disorder in the person; and [b] the eligible practitioner is: [i] a specialist in the specialty of otolaryngology head and neck surgery; or [ii] a specialist or consultant physician in the specialty of neurology; and [c] the | Impedence audiogram |
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service is not performed for the purpose of a hearing screening; and [d] the person is not an admitted patient of a hospital; and [e] the service is performed on the person individually and in person; and [f] after the service, the eligible audiologist provides a copy of the results of the service performed, together with relevant comments in writing that the eligible audiologist has on those results, to the eligible practitioner who requested the service; and [g] a service to which item 11324 applies has not been performed on the person on the same day.

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| 82332 | Audiology health service, consisting of an oto-acoustic emission audiometry for the detection of permanent congenital hearing impairment, performed by an eligible audiologist on an infant or child in circumstances in which: [a] the service is performed pursuant to a written request made by an eligible practitioner who is: [i] a specialist in the specialty of otolaryngology head and neck surgery; or [ii] a specialist or consultant physician in the specialty of neurology; and [b] the infant or child is at risk due to 1 or more of the following factors: [i] admission to a neonatal intensive care unit; [ii] family history of hearing impairment; [iii] intra-uterine or perinatal infection [either suspected or confirmed]; [iv] birthweight less than 1.5kg; [v] craniofacial deformity; [vi] birth asphyxia; [vii] chromosomal abnormality, including down syndrome; [viii] exchange transfusion; [c] middle ear pathology has been excluded by specialist opinion; and [d] the infant or child is not an admitted patient of a hospital; and [e] the service is performed on the infant or child individually and in person; and [f] after the service, the eligible audiologist provides a copy of the results of the service performed, together with relevant comments in writing that the eligible audiologist has on those results, to the eligible practitioner who requested the service; and [g] a service to which item 11332 applies has not been performed on the infant or child on the same day. | Oto-Acoustic emission audiogram |
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Specialty **ENT**

Sub-classification: **Endoscopic surgery**

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| 41737 | Frontal sinus, or ethmoidal sinuses on the one side, intranasal operation on [Anaes.] [Assist.] | Functional endoscopic sinus surgery of ethmoidal sinuses – bilateral Functional endoscopic sinus surgery of ethmoidal sinuses – unilateral Functional endoscopic sinus surgery of frontal sinus – bilateral Functional endoscopic sinus surgery of frontal sinus – unilateral Functional endoscopic sinus surgery of maxillary sinus – bilateral Functional endoscopic sinus surgery of maxillary sinus – unilateral |
| 41752 | Sphenoidal sinus, intranasal operation on [Anaes.] [Assist.] | Functional endoscopic sinus surgery of sphenoid sinus – bilateral Functional endoscopic sinus surgery of sphenoid sinus – unilateral |

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| 41764 Nasendoscopy or sinoscopy or fibreoptic examination of nasopharynx and larynx, one or more of these procedures, unilateral or bilateral examination [Anaes.] | Functional endoscopic sinus surgery of ethmoidal sinuses – bilateral Functional endoscopic sinus surgery of ethmoidal sinuses – unilateral Functional endoscopic sinus surgery of frontal sinus – bilateral Functional endoscopic sinus surgery of frontal sinus – unilateral Functional endoscopic sinus surgery of maxillary sinus – bilateral Functional endoscopic sinus surgery of maxillary sinus – unilateral Functional endoscopic sinus surgery of sphenoid sinus – bilateral Functional endoscopic sinus surgery of sphenoid sinus – unilateral |
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Specialty **ENT**

Sub-classification: **Endoscopy**

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| 41725 Ethmoidal artery or arteries, transorbital ligation of [unilateral] [Anaes.] [Assist.] | Endoscopic ethmoidal artery ligation |
| 41904 Bronchoscopy with dilatation of tracheal stricture [Anaes.] | Endoscopic resection of tracheal stenosis |
| 42545 Orbit, decompression of, for dysthyroid eye disease, by fenestration of 2 or more walls, or by the removal of intraorbital peribulbar and retrobulbar fat from each quadrant of the orbit, 1 eye [Anaes.] [Assist.] | Endoscopic decompression of the orbit or optic nerve |

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| Specialty | General Surgery | Sub-classification: | |
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| 13109 | Indwelling peritoneal catheter [Tenckhoff or similar] for dialysis insertion and fixation of [Anaes.] | | TENKOFF CATHETER INSERTION |
| 13110 | Tenckhoff peritoneal dialysis catheter, removal of [including catheter cuffs] [Anaes.] | | TENKOFF CATHETER REMOVAL |
| 30003 | Localised burns, dressing of, [not involving grafting] each attendance at which the procedure is performed, including any associated consultation | | BURN dressing |
| 30006 | Extensive burns, dressing of, without anaesthesia [not involving grafting] each attendance at which the procedure is performed, including any associated consultation | | BURN dressing |
| 30010 | Localised burns, dressing of, under general anaesthesia [not involving grafting] [Anaes.] | | BURN dressing |
| 30014 | Extensive burns, dressing of, under general anaesthesia [not involving grafting] [Anaes.] | | BURN dressing |
| 30017 | Burns, excision of, under general anaesthesia, involving not more than 10 per cent of body surface, where grafting is not carried out during the same operation [Anaes.] [Assist.] | | BURNS excision |
| 30020 | Burns, excision of, under general anaesthesia, involving more than 10 per cent of body surface, where grafting is not carried out during the same operation [Anaes.] [Assist.] | | BURNS excision |
| 30023 | Wound of soft tissue, traumatic, deep or extensively contaminated, debridement of, under general anaesthesia or regional or field nerve block, including suturing of that wound when performed [Anaes.] [Assist.] | | WOUND CLOSURE WOUND DEBRIDEMENT |
| 30024 | Wound of soft tissue, debridement of extensively infected post-surgical incision or Fournier`s Gangrene, under general anaesthesia or regional or field nerve block, including suturing of that wound when performed [Anaes.] [Assist.] | | WOUND CLOSURE WOUND DEBRIDEMENT |
| 30026 | Skin and subcutaneous tissue or mucous membrane, repair of wound of, other than wound closure at time of surgery, not on face or neck, small [not more than 7cm long], superficial, not being a service to which another item in Group T4 applies [Anaes.] | | WOUND CLOSURE WOUND DEBRIDEMENT |
| 30029 | Skin and subcutaneous tissue or mucous membrane, repair of wound of, other than wound closure at time of surgery, not on face or neck, small [not more than 7cm in length], involving deeper tissue, not being a service to which another item in Group T4 applies [Anaes.] | | WOUND CLOSURE WOUND DEBRIDEMENT |

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| 30038 | Skin and subcutaneous tissue or mucous membrane, repair of wound of, other than wound closure at time of surgery, not on face or neck, large [more than 7cm long], superficial, not being a service to which another item in Group T4 applies [Anaes.] | WOUND CLOSURE WOUND DEBRIDEMENT |
| 30042 | SKIN AND SUBCUTANEOUS TISSUE OR MUCOUS MEMBRANE, REPAIR OF WOUND OF, other than wound closure at time of surgery, other than on face or neck, large [MORE THAN 7 CM LONG], involving deeper tissue, other than a service to which another item in Group T4 applies [Anaes.] | WOUND CLOSURE WOUND DEBRIDEMENT |
| 30058 | Postoperative haemorrhage, control of, under general anaesthesia, as an independent procedure [Anaes.] | HAEMORRHAGE [POSTOPERATIVE] |
| 30064 | Subcutaneous foreign body, removal of, requiring incision and exploration, including closure of wound if performed, as an independent procedure [Anaes.] | FOREIGN BODY Removal |
| 30068 | Foreign body in muscle, tendon or other deep tissue, removal of, as an independent procedure [Anaes.] [Assist.] | FOREIGN BODY Removal |
| 30075 | DIAGNOSTIC BIOPSY OF LYMPH GLAND, MUSCLE OR OTHER DEEP TISSUE OR ORGAN, as an independent procedure, if the biopsy specimen is sent for pathological examination [Anaes.] | LYMPH NODES BIOPSY/ DISSECTION |
| 30107 | GANGLION OR SMALL BURSA, excision of, other than a service associated with a service to which another item in this Group applies [Anaes.] | GANGLION CYST EXCISION |
| 30111 | Bursa [large], including olecranon, calcaneum or patella, excision of [Anaes.] [Assist.] | GANGLION CYST EXCISION |
| 30114 | Bursa, semimembranosus [Baker`s cyst], excision of [Anaes.] [Assist.] | GANGLION CYST EXCISION |
| 30216 | Haematoma, aspiration of [Anaes.] | ABSCCESS DRAINAGE. |
| 30219 | Haematoma, furuncle, small abscess or similar lesion not requiring admission to a hospital - incision with drainage of [excluding aftercare] | ABSCCESS DRAINAGE. |
| 30223 | Large haematoma, large abscess, carbuncle, cellulitis or similar lesion, requiring admission to a hospital, incision with drainage of [excluding aftercare] [Anaes.] | ABSCCESS DRAINAGE. |
| 30224 | Percutaneous drainage of deep abscess using interventional imaging techniques - but not including imaging [Anaes.] | ABSCCESS DRAINAGE. |
| 30225 | Abscess drainage tube, exchange of using interventional imaging techniques - but not including imaging [Anaes.] | ABSCCESS DRAINAGE. |
| 30226 | Muscle, excision of [limited] or fasciotomy [Anaes.] | FASCIOTOMY |

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| 30229 | Muscle, excision of [extensive] [Anaes.] [Assist.] | FASCIOTOMY |
| 30232 | Muscle, ruptured, repair of [limited], not associated with external wound [Anaes.] | MUSCLES RUPTURED repair |
| 30235 | Muscle, ruptured, repair of [extensive], not associated with external wound [Anaes.] [Assist.] | MUSCLES RUPTURED repair |
| 30238 | Fascia, deep, repair of, for herniated muscle [Anaes.] | MUSCLES RUPTURED repair |
| 30296 | Thyroidectomy, total [Anaes.] [Assist.] | THYROIDECTOMY |
| 30297 | Thyroidectomy following previous thyroid surgery [Anaes.] [Assist.] | THYROIDECTOMY |
| 30303 | Sentinel lymph node biopsy or biopsies for breast cancer, involving dissection in a level ii/iii axilla, using lymphotropic dye injection, not being a service associated with a service to which item 30299, 30300 or 30302 applies [Anaes.] [Assist.] | BREAST MASS EXCISION |
| 30306 | Total hemithyroidectomy [Anaes.] [Assist.] | THYROIDECTOMY |
| 30308 | Bilateral subtotal thyroidectomy [Anaes.] [Assist.] | THYROIDECTOMY |
| 30309 | Thyroidectomy, subtotal for thyrotoxicosis [Anaes.] [Assist.] | THYROIDECTOMY |
| 30310 | Thyroid, unilateral subtotal thyroidectomy or equivalent partial thyroidectomy [Anaes.] [Assist.] | THYROIDECTOMY |
| 30313 | Thyroglossal cyst, removal of [Anaes.] [Assist.] | THYROGLOSSAL CYST REMOVAL |
| 30314 | Thyroglossal cyst or fistula or both, on a person 10 years of age or over. radical removal of, including thyroglossal duct and portion of hyoid bone [Anaes.] [Assist.] | THYROGLOSSAL CYST REMOVAL |
| 30315 | Parathyroid operation for hyperparathyroidism [Anaes.] [Assist.] | PARATHYROID REMOVAL |
| 30321 | Retroperitoneal neuroendocrine tumour, removal of [Anaes.] [Assist.] | DIAPHRAGMATIC HERNIA REPAIR RETROPERITONEAL TUMOR EXCISION |
| 30323 | Retroperitoneal neuroendocrine tumour, removal of, requiring complex and extensive dissection [Anaes.] [Assist.] | RETROPERITONEAL TUMOR EXCISION |
| 30324 | Adrenal gland tumour, excision of [Anaes.] [Assist.] | ADRENALECTOMY |
| 30329 | Lymph glands of groin, limited excision of [Anaes.] | LYMPH NODES BIOPSY/ DISSECTION |

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| 30330 | Lymph glands of groin, radical excision of [Anaes.] [Assist.] | LYMPH NODES BIOPSY/ DISSECTION |
| 30332 | Lymph nodes of axilla, limited excision of [sampling] [Anaes.] [Assist.] | LYMPH NODES BIOPSY/ DISSECTION |
| 30335 | Lymph nodes of axilla, complete excision of, to level I [Anaes.] [Assist.] | LYMPH NODES BIOPSY/ DISSECTION |
| 30336 | Lymph nodes of axilla, complete excision of, to level II or level III [Anaes.] [Assist.] | LYMPH NODES BIOPSY/ DISSECTION |
| 30373 | Laparotomy [exploratory], including associated biopsies, where no other intra-abdominal procedure is performed [Anaes.] [Assist.] | LAPAROTOMY EXPLORATIVE |
| 30375 | Caecostomy, enterostomy, colostomy, enterotomy, colotomy, cholecystostomy, gastrostomy, gastrotomy, on a person 10 years of age or over. reduction of intussusception, removal of meckel's diverticulum, suture of perforated peptic ulcer, simple repair of ruptured viscus, reduction of volvulus, pyloroplasty [adult] or drainage of pancreas [Anaes.] [Assist.] | PYLOROPLASTY STOMA |
| 30376 | Laparotomy involving division of peritoneal adhesions [where no other intraabdominal procedure is performed] on a person 10 years of age or over [Anaes.] [Assist.] | LAPAROTOMY + ADHESIOLYSIS |
| 30378 | Laparotomy involving division of adhesions in conjunction with another intraabdominal procedure where the time taken to divide the adhesions is between 45 minutes and 2 hours, on a person 10 years of age or over [Anaes.] [Assist.] | LAPAROTOMY + ADHESIOLYSIS |
| 30379 | Laparotomy with division of extensive adhesions [duration greater than 2 hours] with or without insertion of long intestinal tube [Anaes.] [Assist.] | LAPAROTOMY + ADHESIOLYSIS |
| 30382 | Enterocutaneous fistula, radical repair of, involving extensive dissection and resection of bowel [Anaes.] [Assist.] | ENTEROCUTANEOUS FISTULA REPAIR |
| 30385 | Laparotomy for control of postoperative haemorrhage, where no other procedure is performed [Anaes.] [Assist.] | LAPAROTOMY FOR CONTROL OF POST OP HAEMORRHAGE LAPAROTOMY FOR DAMAGE CONTROL |
| 30388 | Laparotomy for trauma involving 3 or more organs [Anaes.] [Assist.] | LAPAROTOMY FOR INTRAPERITONEAL BLEEDING |
| 30390 | Laparoscopy, diagnostic, not being a service associated with any other laparoscopic procedure, on a person 10 years of age or over [Anaes.] | LAPAROSCOPY DIAGNOSTIC |
| 30391 | Laparoscopy, with biopsy [Anaes.] [Assist.] | LAPAROSCOPY DIAGNOSTIC |
| 30394 | Laparotomy for drainage of subphrenic abscess, pelvic abscess, appendiceal abscess, ruptured appendix or for peritonitis from any cause, with or without appendectomy [Anaes.] [Assist.] | ABSCESS DRAINAGE. |

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| 30396 | Laparotomy for gross intra peritoneal sepsis requiring debridement of fibrin, with or without removal of foreign material or enteric contents, with lavage of the entire peritoneal cavity via a major abdominal incision with or without closure of abdomen and with or without mesh or zipper insertion [Anaes.] [Assist.] | LAPAROTOMY FOR PERITONITIS |
| 30397 | Laparostomy, via wound previously made and left open or closed with zipper, involving change of dressings or packs, and with or without drainage of loculated collections [Anaes.] | LAPAROSTOMY CLOSURE |
| 30399 | Laparostomy, final closure of wound made at previous operation, after removal of dressings or packs and removal of mesh or zipper if previously inserted [Anaes.] [Assist.] | LAPAROSTOMY CLOSURE |
| 30400 | Laparotomy with insertion of portacath for administration of cytotoxic therapy including placement of reservoir [Anaes.] [Assist.] | PORT-A-CATH INSERTION |
| 30402 | Retroperitoneal abscess, drainage of, not involving laparotomy [Anaes.] [Assist.] | ABSCESS DRAINAGE. REROPERITONEAL ABSCESS |
| 30403 | Ventral, incisional, or recurrent hernia or burst abdomen, repair of with or without mesh [Anaes.] [Assist.] | HERNIA [EPIGASTRIC] REPAIR |
| 30405 | Ventral or incisional hernia, [excluding recurrent inguinal or femoral hernia], repair of, requiring muscle transposition, mesh hernioplasty or resection of strangulated bowel [Anaes.] [Assist.] | HERNIA [EPIGASTRIC] REPAIR |
| 30406 | Paracentesis abdominis [Anaes.] | DIAGNOSTIC PERITONEAL LAVAGE |
| 30409 | Liver biopsy, percutaneous [Anaes.] | LIVER BIOPSY |
| 30411 | Liver biopsy by wedge excision when performed in association with another intraabdominal procedure [Anaes.] | LIVER BIOPSY |
| 30412 | Liver biopsy by core needle, when performed in conjunction with another intra-abdominal procedure [Anaes.] | LIVER BIOPSY |
| 30414 | Liver, subsegmental resection of, [local excision], other than for trauma [Anaes.] [Assist.] | LIVER RESECTION |
| 30415 | Liver, segmental resection of, other than for trauma [Anaes.] [Assist.] | LIVER RESECTION |
| 30417 | Liver cysts, laparoscopic marsupialisation of 5 or more, including any cyst greater than 5cm in diameter [Anaes.] [Assist.] | LIVER RESECTION |
| 30418 | Liver, lobectomy of, other than for trauma [Anaes.] [Assist.] | LIVER RESECTION |
| 30419 | Liver tumours, destruction of, by hepatic cryotherapy, not being a service associated with a service to which item 50950 or 50952 apply [Anaes.] [Assist.] | LIVER RESECTION |

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| 30421 | Liver, tri-segmental resection [extended lobectomy] of, other than for trauma [Anaes.] [Assist.] | LIVER RESECTION |
| 30422 | Liver, repair of superficial laceration of, for trauma [Anaes.] [Assist.] | LIVER LACERATION REPAIR |
| 30425 | Liver, repair of deep multiple lacerations of, or debridement of, for trauma [Anaes.] [Assist.] | LIVER LACERATION REPAIR |
| 30427 | Liver, segmental resection of, for trauma [Anaes.] [Assist.] | LIVER RESECTION |
| 30428 | Liver, lobectomy of, for trauma [Anaes.] [Assist.] | LIVER RESECTION |
| 30430 | Liver, extended lobectomy [tri-segmental resection] of, for trauma [Anaes.] [Assist.] | LIVER RESECTION |
| 30431 | Liver abscess, open abdominal drainage of [Anaes.] [Assist.] | LIVER ABCESS/CYST DRAINAGE |
| 30433 | Liver abscess [multiple], open abdominal drainage of [Anaes.] [Assist.] | LIVER ABCESS/CYST DRAINAGE |
| 30434 | Hydatid cyst of liver, peritoneum or viscus, complete removal of contents of, with or without suture of biliary radicles [Anaes.] [Assist.] | LIVER ABCESS/CYST DRAINAGE |
| 30436 | Hydatid cyst of liver, peritoneum or viscus, complete removal of contents of, with or without suture of biliary radicles, with omentoplasty or myeloplasty [Anaes.] [Assist.] | LIVER ABCESS/CYST DRAINAGE |
| 30437 | Hydatid cyst of liver, total excision of, by cysto-pericystectomy [membrane plus fibrous wall] [Anaes.] [Assist.] | LIVER ABCESS/CYST DRAINAGE |
| 30438 | Hydatid cyst of liver, excision of, with drainage and excision of liver tissue [Anaes.] [Assist.] | LIVER ABCESS/CYST DRAINAGE |
| 30442 | Choledochoscopy in conjunction with another procedure [Anaes.] | BILIARY TREE SURGERY |
| 30443 | Cholecystectomy [Anaes.] [Assist.] | BILIARY TREE SURGERY |
| 30445 | Laparoscopic cholecystectomy [Anaes.] [Assist.] | BILIARY TREE SURGERY |
| 30446 | Laparoscopic cholecystectomy when procedure is completed by laparotomy [Anaes.] [Assist.] | BILIARY TREE SURGERY |
| 30448 | Laparoscopic cholecystectomy, involving removal of common duct calculi via the cystic duct [Anaes.] [Assist.] | BILIARY TREE SURGERY |
| 30449 | Laparoscopic cholecystectomy with removal of common duct calculi via laparoscopic choledochotomy [Anaes.] [Assist.] | BILIARY TREE SURGERY |
| 30454 | Choledochotomy [with or without cholecystectomy], with or without removal of calculi [Anaes.] [Assist.] | BILIARY TREE SURGERY |

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| 30455 | Choledochotomy [with or without cholecystectomy], with removal of calculi including biliary intestinal anastomosis [Anaes.] [Assist.] | BILIARY TREE SURGERY |
| 30457 | Choledochotomy, intrahepatic, involving removal of intrahepatic bile duct calculi [Anaes.] [Assist.] | BILIARY TREE SURGERY |
| 30458 | Transduodenal operation on sphincter of Oddi, involving 1 or more of, removal of calculi, sphincterotomy, sphincteroplasty, biopsy, local excision of peri-ampullary or duodenal tumour, sphincteroplasty of the pancreatic duct, pancreatic duct septoplasty, with or without choledochotomy [Anaes.] [Assist.] | BILIARY TREE SURGERY |
| 30460 | Cholecystoduodenostomy, cholecystoenterostomy, choledochojejunostomy or Roux-en-Y as a bypass procedure when no prior biliary surgery performed [Anaes.] [Assist.] | BILIARY TREE SURGERY |
| 30461 | Radical resection of porta hepatis with biliary-enteric anastomoses, not being a service associated with a service to which item 30443, 30454, 30455, 30458 or 30460 applies [Anaes.] [Assist.] | BILIARY TREE SURGERY |
| 30469 | Biliary stricture, repair of, after 1 or more operations on the biliary tree [Anaes.] [Assist.] | BILIARY TREE SURGERY |
| 30472 | Hepatic or common bile duct, repair of, as the primary procedure subsequent to partial or total transection of bile duct or ducts [Anaes.] [Assist.] | BILIARY TREE SURGERY |
| 30475 | Endoscopic dilatation of stricture of upper gastrointestinal tract [including the use of imaging intensification where clinically indicated] [Anaes.] | ENDOSCOPY with balloon dilatation of gastric or gastroduodenal stricture |
| 30481 | Percutaneous gastrostomy [initial procedure], including any associated imaging services [Anaes.] | STOMA |
| 30482 | Percutaneous gastrostomy [repeat procedure], including any associated imaging services [Anaes.] | STOMA |
| 30484 | Endoscopic retrograde cholangiopancreatography [Anaes.] | ERCP |
| 30496 | Vagotomy, truncal or selective, with or without pyloroplasty or gastroenterostomy [Anaes.] [Assist.] | VAGOTOMY |
| 30497 | Vagotomy and antrectomy [Anaes.] [Assist.] | VAGOTOMY +GASTROJEJUNOSTMY |
| 30499 | Vagotomy, highly selective [Anaes.] [Assist.] | VAGOTOMY + PYLOROPLASTY |
| 30500 | Vagotomy, highly selective with duodenoplasty for peptic stricture [Anaes.] [Assist.] | VAGOTOMY + PYLOROPLASTY |
| 30502 | Vagotomy, highly selective, with dilatation of pylorus [Anaes.] [Assist.] | VAGOTOMY + PYLOROPLASTY |
| 30503 | Vagotomy or antrectomy, or both, for peptic ulcer following previous operation for peptic ulcer [Anaes.] [Assist.] | VAGOTOMY + PYLOROPLASTY |

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| 30505 | Bleeding peptic ulcer, control of, involving suture of bleeding point or wedge excision [Anaes.] [Assist.] | BLEEDING PEPTIC ULCER |
| 30506 | Bleeding peptic ulcer, control of, involving suture of bleeding point or wedge excision, and vagotomy and pyloroplasty or gastroenterostomy [Anaes.] [Assist.] | BLEEDING PEPTIC ULCER |
| 30508 | Bleeding peptic ulcer, control of, involving suture of bleeding point or wedge excision, and highly selective vagotomy [Anaes.] [Assist.] | BLEEDING PEPTIC ULCER |
| 30509 | Bleeding peptic ulcer, control of, involving gastric resection [other than wedge resection] [Anaes.] [Assist.] | BLEEDING PEPTIC ULCER |
| 30515 | Gastroenterostomy [including gastroduodenostomy] or enterocolostomy or enteroenterostomy not being a service to which any of items 31569 to 31581 apply [Anaes.] [Assist.] | GASTRO-JEJUNOSTOMY |
| 30518 | Partial gastrectomy, not being a service associated with a service to which any of items 31569 to 31581 apply [Anaes.] [Assist.] | GASTRECTOMY |
| 30520 | Gastric tumour, removal of, by local excision, not being a service to which item 30518 applies [Anaes.] [Assist.] | GASTRECTOMY |
| 30521 | Gastrectomy, total, for benign disease [Anaes.] [Assist.] | GASTRECTOMY |
| 30523 | Gastrectomy, subtotal radical, for carcinoma, [including splenectomy when performed] [Anaes.] [Assist.] | GASTRECTOMY |
| 30524 | Gastrectomy, total radical, for carcinoma [including extended node dissection and distal pancreatectomy and splenectomy when performed] [Anaes.] [Assist.] | GASTRECTOMY |
| 30526 | Gastrectomy, total, and including lower oesophagus, performed by left thoraco-abdominal incision or opening of diaphragmatic hiatus, [including splenectomy when performed] [Anaes.] [Assist.] | GASTRECTOMY |
| 30527 | Antireflux operation by fundoplasty, via abdominal or thoracic approach, with or without closure of the diaphragmatic hiatus not being a service to which item 30601 applies [Anaes.] [Assist.] | FUNDOPLASTY |
| 30530 | Antireflux operation by cardiopexy, with or without fundoplasty [Anaes.] [Assist.] | FUNDOPLASTY |
| 30533 | Oesophagogastric myotomy [Heller`s operation] via abdominal or thoracic approach, with fundoplasty, with or without closure of the diaphragmatic hiatus by laparoscopy or open operation [Anaes.] [Assist.] | OESOCARDIOMYOTOMY [Heller PROCEDURE] |
| 30535 | Oesophagectomy with gastric reconstruction by abdominal mobilisation and thoracotomy [Anaes.] [Assist.] | OESOPHAGECTOMY |
| 30536 | Oesophagectomy involving gastric reconstruction by abdominal mobilisation, thoracotomy and anastomosis in the neck or chest - 1 surgeon [Anaes.] [Assist.] | OESOPHAGECTOMY |
| 30538 | Oesophagectomy involving gastric reconstruction by abdominal mobilisation, thoracotomy and anastomosis in the neck or chest- conjoint surgery, principal surgeon [including aftercare] [Anaes.] [Assist.] | OESOPHAGECTOMY |

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| 30539 | Oesophagectomy involving gastric reconstruction by abdominal mobilisation, thoracotomy and anastomosis in the neck or chest - conjoint surgery, co-surgeon [Assist.] | OESOPHAGECTOMY |
| 30545 | Oesophagectomy with colon or jejunal anastomosis, [abdominal and thoracic mobilisation with thoracic anastomosis] - 1 surgeon [Anaes.] [Assist.] | OESOPHAGECTOMY |
| 30548 | Oesophagectomy with colon or jejunal anastomosis, [abdominal and thoracic mobilisation with thoracic anastomosis] - conjoint surgery, co-surgeon [Assist.] | OESOPHAGECTOMY |
| 30560 | Oesophageal perforation, repair of, by thoracotomy [Anaes.] [Assist.] | OESOPHAGEAL PERFORATION REPAIR |
| 30564 | Small bowel strictureplasty for chronic inflammatory bowel disease [Anaes.] [Assist.] | SMALL BOWEL STRICTURE |
| 30565 | Small intestine, resection of, without anastomosis [including formation of stoma] [Anaes.] [Assist.] | SMALL BOWEL RESECTION |
| 30566 | Small intestine, resection of, with anastomosis, on a person 10 years of age or over [Anaes.] [Assist.] | SMALL BOWEL RESECTION |
| 30568 | Intraoperative enterotomy for visualisation of the small intestine by endoscopy [Anaes.] [Assist.] | SMALL BOWEL RESECTION |
| 30569 | Endoscopic examination of small bowel with flexible endoscope passed at laparotomy, with or without biopsies [Anaes.] [Assist.] | SMALL BOWEL RESECTION |
| 30571 | Appendectomy, not being a service to which item 30574 applies on a person 10 years of age or over [Anaes.] [Assist.] | APPENDICECTOMY |
| 30572 | Laparoscopic appendectomy, on a person 10 years of age or over [Anaes.] [Assist.] | APPENDICECTOMY |
| 30574 | Appendectomy, when performed in conjunction with any other intraabdominal procedure through the same incision [Anaes.] | APPENDICECTOMY |
| 30575 | Pancreatic abscess, laparotomy and external drainage of, not requiring retro-pancreatic dissection [Anaes.] [Assist.] | PANCREAS ABSCESS |
| 30577 | Pancreatic necrosectomy for pancreatic necrosis or abscess formation requiring major pancreatic or retro-pancreatic dissection, excluding aftercare [Anaes.] [Assist.] | PANCREATECTOMY |
| 30583 | Distal pancreatectomy [Anaes.] [Assist.] | PANCREATECTOMY |
| 30584 | Pancreatico-duodenectomy, Whipple`s operation, with or without preservation of pylorus [Anaes.] [Assist.] | PANCREATECTOMY |
| 30586 | Pancreatic cyst anastomosis to stomach or duodenum - by open or endoscopic means [Anaes.] [Assist.] | PANCREATIC PSEUDOCYST DRAINAGE |

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| 30587 | Pancreatic cyst, anastomosis to Roux loop of jejunum [Anaes.] [Assist.] | PANCREATIC PSEUDOCYST DRAINAGE |
| 30589 | Pancreatico-jejunostomy for pancreatitis or trauma [Anaes.] [Assist.] | PANCREATICO-JEJUNOSTOMY |
| 30590 | Pancreatico-jejunostomy following previous pancreatic surgery [Anaes.] [Assist.] | PANCREATICO-JEJUNOSTOMY |
| 30594 | Pancreatectomy for pancreatitis following previously attempted drainage procedure or partial resection [Anaes.] [Assist.] | PANCREATECTOMY |
| 30596 | Splenorrhaphy or partial splenectomy [Anaes.] [Assist.] | SPLENORRHAPHY |
| 30597 | Splenectomy [Anaes.] [Assist.] | SPLENECTOMY |
| 30599 | Splenectomy, for massive spleen [weighing more than 1500gms] or involving thoraco-abdominal incision [Anaes.] [Assist.] | SPLENECTOMY |
| 30600 | Diaphragmatic hernia, traumatic, repair of [Anaes.] [Assist.] | DIAPHRAGMATIC HERNIA REPAIR |
| 30601 | Diaphragmatic hernia, congenital repair of, by thoracic or abdominal approach, not being a service to which any of items 31569 to 31581 apply, on a person 10 years of age or over [Anaes.] [Assist.] | DIAPHRAGMATIC HERNIA REPAIR |
| 30602 | Portal hypertension, porto-caval shunt for [Anaes.] [Assist.] | PORTAL HYPERTENSION shunt |
| 30603 | Portal hypertension, meso-caval shunt for [Anaes.] [Assist.] | PORTAL HYPERTENSION shunt |
| 30605 | Portal hypertension, selective spleno-renal shunt for [Anaes.] [Assist.] | PORTAL HYPERTENSION shunt |
| 30606 | Portal hypertension, oesophageal transection via stapler or oversew of gastric varices with or without devascularisation [Anaes.] [Assist.] | PORTAL HYPERTENSION oesophageal transection |
| 30608 | Small intestine, resection of, with anastomosis, on a person under 10 years of age [Anaes.] [Assist.] | SMALL BOWEL RESECTION |
| 30609 | Femoral or inguinal hernia, laparoscopic repair of, not being a service associated with a service to which item 30614 applies [Anaes.] [Assist.] | HERNIA [FEMORAL/INGUINAL] REPAIR /BILATERAL |
| 30611 | Benign tumour of soft tissue, excluding tumours of skin, cartilage, and bone, simple lipomas covered by item 31345 and lipomata - removal of by surgical excision, where the specimen excised is sent for histological confirmation of diagnosis, on a person under 10 years of age , not being a service to which another item in this group applies [Anaes.] [Assist.] | SOFT TISSUES MASS [LARGE] EXCISION |
| 30614 | Femoral or inguinal hernia or infantile hydrocele, repair of, not being a service to which item 30403 or 30615 applies, on a person 10 years of age or over [Anaes.] [Assist.] | HERNIA [FEMORAL/INGUINAL] REPAIR |

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| 30615 | Strangulated, incarcerated or obstructed hernia, repair of, without bowel resection, on a person 10 years of age or over [Anaes.] [Assist.] | HERNIA [FEMORAL/INGUINAL] REPAIR |
| 30619 | Laparoscopic splenectomy, on a person under 10 years of age [Anaes.] [Assist.] | SPLENECTOMY |
| 30621 | Repair of symptomatic umbilical, epigastric or linea alba hernia requiring mesh or other fromal repair of, in a person 10 years of age or over, other than a service to which item 30403 or 30405 applies [Anaes.] [Assist.] | HERNIA [EPIGASTRIC] REPAIR |
| 30622 | Caecostomy, enterostomy, colostomy, enterotomy, colotomy, cholecystostomy, gastrostomy, gastrotomy, reduction of intussusception, removal of meckel`s diverticulum, suture of perforated peptic ulcer, simple repair of ruptured viscus, reduction of volvulus, pyloroplasty or drainage of pancreas on a person under 10 years of age [Anaes.] [Assist.] | PYLOROPLASTY STOMA |
| 30623 | Laparotomy involving division of peritoneal adhesions [where no other intraabdominal procedure is performed] on a person under 10 years of age [Anaes.] [Assist.] | LAPAROTOMY + ADHESIOLYSIS |
| 30626 | Laparotomy involving division of adhesions in conjunction with another intraabdominal procedure where the time taken to divide the adhesions is between 45 minutes and 2 hours, on a person under 10 years of age [Anaes.] [Assist.] | LAPAROTOMY + ADHESIOLYSIS |
| 30627 | Laparoscopy, diagnostic, not being a service associated with any other laparoscopic procedure, on a person under 10 years of age [Anaes.] | LAPAROSCOPY DIAGNOSTIC |
| 30637 | Enterostomy or colostomy, closure of not involving resection of bowel, on a person under 10 years of age [Anaes.] [Assist.] | COLOSTOMY CLOSURE ILEOSTOMY CLOSURE |
| 30639 | Colostomy or ileostomy, refashioning of, on a person under 10 years of age [Anaes.] [Assist.] | COLOSTOMY REVISION ILEOSTOMY REVISION |
| 30640 | Repair of large and irreducible scrotal hernia, where duration of surgery exceeds 2 hours, in a person 10 years of age or over, other than a service to which item 30403, 30405, 30614, 30615 or 30621 applies [Anaes.] [Assist.] | HERNIA [INGUINAL] REPAIR |
| 30644 | Exploration of spermatic cord, inguinal approach, with or without testicular biopsy and with or without excision of spermatic cord and testis on a person 10 years of age or over [Anaes.] [Assist.] | APPENDICECTOMY |
| 30646 | Laparoscopic appendicectomy, on a person under 10 years of age [Anaes.] [Assist.] | APPENDICECTOMY |
| 30649 | Haemorrhage, arrest of, following circumcision requiring general anaesthesia on a person under 10 years of age [Anaes.] | CIRCUMCISION arrest of haemorrhage CIRCUMCISION arrest of haemorrhage |

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| 30654 | Circumcision of the penis [other than a service to which item 30658 applies] | CIRCUMCISION |
| 30658 | Circumcision of the penis, when performed in conjunction with a service to which an item in group t7 or group t10 applies [Anaes.] | CIRCUMCISION |
| 30663 | Haemorrhage, arrest of, following circumcision requiring general anaesthesia on a person 10 years of age or over [Anaes.] | CIRCUMCISION arrest of haemorrhage |
| 30666 | Paraphimosis or phimosis, reduction of, under general anaesthesia, with or without dorsal incision, not being a service associated with a service to which another item in this Group applies [Anaes.] | CIRCUMCISION |
| 30676 | Pilonidal sinus or cyst, or sacral sinus or cyst, excision of [Anaes.] | PILONIDAL SINUS EXCISION |
| 30679 | Pilonidal sinus, injection of sclerosant fluid under anaesthesia [Anaes.] | PILONIDAL SINUS Sclerosant fluid injection |
| 31206 | Tumour, cyst, ulcer or scar [other than a scar removed during the surgical approach at an operation], removal of and suture, if: [a] the lesion size is not more than 10 mm in diameter; and [b] the removal is from a mucous membrane by surgical excision [other than by shave excision]; and [c] the specimen excised is sent for histological examination [Anaes.] | EXCISION OF TUMOR INVOLVING THE SKIN |
| 31211 | Tumour, cyst, ulcer or scar [other than a scar removed during the surgical approach at an operation], removal of and suture, if: [a] the lesion size is more than 10 mm, but not more than 20 mm, in diameter; and [b] the removal is from a mucous membrane by surgical excision [other than by shave excision]; and [c] the specimen excised is sent for histological examination [Anaes.] | EXCISION OF TUMOR INVOLVING THE SKIN |
| 31216 | Tumour, cyst, ulcer or scar [other than a scar removed during the surgical approach at an operation], removal of and suture, if: [a] the lesion size is more than 20 mm in diameter; and [b] the removal is from a mucous membrane by surgical excision [other than by shave excision]; and [c] the specimen excised is sent for histological examination [Anaes.] | EXCISION OF TUMOR INVOLVING THE SKIN |
| 31345 | Lipoma, removal of by surgical excision or liposuction, where lesion is subcutaneous and 50mm or more in diameter, or is sub-fascial, where the specimen is sent for histological confirmation of diagnosis [Anaes.] | LIPOMA REMOVAL |
| 31350 | Benign tumour of soft tissue, excluding tumours of skin, cartilage, and bone, simple lipomas covered by item 31345 and lipomata, removal of by surgical excision, where the specimen excised is sent for histological confirmation of diagnosis, on a person 10 years of age or over, not being a service to which another item in this Group applies [Anaes.] [Assist.] | EXCISION OF TUMOR INVOLVING THE SKIN SOFT TISSUES MASS [LARGE] EXCISION |
| 31355 | Malignant tumour of soft tissue, excluding tumours of skin, cartilage and bone, removal of by surgical excision, where histological proof of malignancy has been obtained, not being a service to which another item in this Group applies [Anaes.] [Assist.] | EXCISION OF TUMOR INVOLVING THE SKIN SOFT TISSUES MASS [LARGE] EXCISION |
| 31420 | Lymph node of neck, biopsy of [Anaes.] | LYMPH NODES BIOPSY/ DISSECTION |

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| 31423 | Lymph nodes of neck, selective dissection of 1 or 2 lymph node levels involving removal of soft tissue and lymph nodes from one side of the neck, on a person 10 years of age or over [Anaes.] [Assist.] | LYMPH NODES BIOPSY/ DISSECTION |
| 31426 | Lymph nodes of neck, selective dissection of 3 lymph node levels involving removal of soft tissue and lymph nodes from one side of the neck [Anaes.] [Assist.] | LYMPH NODES BIOPSY/ DISSECTION |
| 31429 | Lymph nodes of neck, selective dissection of 4 lymph node levels on one side of the neck with preservation of one or more of: internal jugular vein, sternocleido-mastoid muscle, or spinal accessory nerve [Anaes.] [Assist.] | LYMPH NODES BIOPSY/ DISSECTION |
| 31432 | Lymph nodes of neck, bilateral selective dissection of levels I, II and III [bilateral supraomohyoid dissections] [Anaes.] [Assist.] | LYMPH NODES BIOPSY/ DISSECTION |
| 31435 | Lymph nodes of neck, comprehensive dissection of all 5 lymph node levels on one side of the neck [Anaes.] [Assist.] | LYMPH NODES BIOPSY/ DISSECTION |
| 31438 | Lymph nodes of neck, comprehensive dissection of all 5 lymph node levels on one side of the neck with preservation of one or more of: internal jugular vein, sternocleido-mastoid muscle, or spinal accessory nerve [Anaes.] [Assist.] | LYMPH NODES BIOPSY/ DISSECTION |
| 31454 | Laparoscopy with drainage of pus, bile or blood, as an independent procedure [Anaes.] [Assist.] | LAPAROTOMY FOR PERITONITIS |
| 31462 | Operative feeding jejunostomy performed in conjunction with major upper gastro-intestinal resection [Anaes.] [Assist.] | FEEDING JEJUNOSTOMY |
| 31464 | Antireflux operation by fundoplasty, via abdominal or thoracic approach, with or without closure of the diaphragmatic hiatus, by laparoscopic technique - not being a service to which item 30601 applies [Anaes.] [Assist.] | FUNDOPLASTY |
| 31466 | Antireflux operation by fundoplasty, via abdominal or thoracic approach, with or without closure of the diaphragmatic hiatus, revision procedure, by laparoscopy or open operation [Anaes.] [Assist.] | FUNDOPLASTY |
| 31468 | Para-oesophageal hiatus hernia, repair of, with complete reduction of hernia, resection of sac and repair of hiatus, with or without fundoplication [Anaes.] [Assist.] | FUNDOPLASTY |
| 31470 | Laparoscopic splenectomy, on a person 10 years of age or over [Anaes.] [Assist.] | SPLENECTOMY |
| 31500 | Breast, benign lesion up to and including 50mm in diameter, including simple cyst, fibroadenoma or fibrocystic disease, open surgical biopsy or excision of, with or without frozen section histology [Anaes.] | BREAST MASS EXCISION |
| 31503 | Breast, benign lesion more than 50mm in diameter, excision of [Anaes.] [Assist.] | BREAST MASS EXCISION |
| 31506 | Breast, abnormality detected by mammography or ultrasound where guidewire or other localisation procedure is performed, excision biopsy of [Anaes.] [Assist.] | BREAST MASS EXCISION |
| 31509 | Breast, malignant tumour, open surgical biopsy of, with or without frozen section histology [Anaes.] | BREAST MASS EXCISION |

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| 31512 | Breast, malignant tumour, complete local excision of, with or without frozen section histology [Anaes.] [Assist.] | BREAST MASS EXCISION |
| 31515 | Breast, tumour site, re-excision of following open biopsy or incomplete excision of malignant tumour [Anaes.] [Assist.] | BREAST MASS EXCISION |
| 31519 | Breast, total mastectomy [h] [Anaes.] [Assist.] | BREAST MASS EXCISION |
| 31524 | Breast, subcutaneous mastectomy [h] [Anaes.] [Assist.] | BREAST MASS EXCISION |
| 31533 | Fine needle aspiration of an impalpable breast lesion detected by mammography or ultrasound, imaging guided - but not including imaging [Anaes.] | BREAST MASS EXCISION |
| 31548 | Breast, biopsy of solid tumour or tissue of, using mechanical biopsy device, for histological examination, not being a service to which items 31530, 31539 or 31545 apply [Anaes.] | BREAST MASS EXCISION |
| 31551 | Breast, haematoma, seroma or inflammatory condition including abscess, granulomatous mastitis or similar, exploration and drainage of when undertaken in the operating theatre of a hospital, excluding aftercare [Anaes.] | BREAST MASS EXCISION DRAINAGE/ASPIRATION OF SEROMA |
| 31569 | Adjustable gastric band, placement of, with or without crural repair taking 45 minutes or less, for a patient with clinically severe obesity [Anaes.] [Assist.] | GASTRECTOMY |
| 31572 | Gastric bypass by Roux-en-Y including associated anastomoses, with or without crural repair taking 45 minutes or less, for a patient with clinically severe obesity not being associated with a service to which item 30515 applies [Anaes.] [Assist.] | GASTRECTOMY |
| 31575 | Sleeve gastrectomy, with or without crural repair taking 45 minutes or less, for a patient with clinically severe obesity [Anaes.] [Assist.] | GASTRECTOMY |
| 31578 | Gastroplasty [excluding by gastric plication], with or without crural repair taking 45 minutes or less, for a patient with clinically severe obesity [Anaes.] [Assist.] | GASTRECTOMY |
| 31581 | Gastric bypass by biliopancreatic diversion with or without duodenal switch including gastric resection and anastomoses, with or without crural repair taking 45 minutes or less, for a patient with clinically severe obesity [Anaes.] [Assist.] | GASTRECTOMY |
| 31584 | Surgical reversal of adjustable gastric banding [removal or replacement of gastric band], gastric bypass, gastroplasty [excluding by gastric plication] or biliopancreatic diversion being services to which items 31569 to 31581 apply [Anaes.] [Assist.] | GASTRECTOMY GASTRECTOMY |
| 31587 | Adjustment of gastric band as an independent procedure including any associated consultation | GASTRECTOMY |

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| 31590 | Adjustment of gastric band reservoir, repair, revision or replacement of [Anaes.] [Assist.] | GASTRECTOMY |
| 32000 | Large intestine, resection of, without anastomosis, including right hemicolectomy [including formation of stoma] [Anaes.] [Assist.] | LARGE INTESTINE RESECTION |
| 32003 | Large intestine, resection of, with anastomosis, including right hemicolectomy [Anaes.] [Assist.] | LARGE INTESTINE RESECTION |
| 32004 | Large intestine, subtotal colectomy [resection of right colon, transverse colon and splenic flexure] without anastomosis, not being a service associated with a service to which item 32000, 32003, 32005 or 32006 applies [Anaes.] [Assist.] | LARGE INTESTINE RESECTION |
| 32005 | Large intestine, subtotal colectomy [resection of right colon, transverse colon and splenic flexure] with anastomosis, not being a service associated with a service to which item 32000, 32003, 32004 or 32006 applies [Anaes.] [Assist.] | LARGE INTESTINE RESECTION |
| 32006 | Left hemicolectomy, including the descending and sigmoid colon [including formation of stoma] [Anaes.] [Assist.] | LARGE INTESTINE RESECTION |
| 32009 | Total colectomy and ileostomy [Anaes.] [Assist.] | LARGE INTESTINE RESECTION |
| 32012 | Total colectomy and ileorectal anastomosis [Anaes.] [Assist.] | LARGE INTESTINE RESECTION |
| 32015 | Total colectomy with excision of rectum and ileostomy 1 surgeon [Anaes.] [Assist.] | LARGE INTESTINE RESECTION |
| 32018 | Total colectomy with excision of rectum and ileostomy, combined synchronous operation; abdominal resection [including aftercare] [Anaes.] [Assist.] | LARGE INTESTINE RESECTION |
| 32021 | Total colectomy with excision of rectum and ileostomy, combined synchronous operation; perineal resection [Assist.] | LARGE INTESTINE RESECTION |
| 32024 | Rectum, high restorative anterior resection with intraperitoneal anastomosis [of the rectum] greater than 10cm from the anal verge excluding resection of sigmoid colon alone not being a service associated with a service to which item 32103, 32104 or 32106 applies [Anaes.] [Assist.] | ANTERIOR RESECTION OF THE RECTUM |
| 32025 | Rectum, low restorative anterior resection with extraperitoneal anastomosis [of the rectum] less than 10 cm from the anal verge, with or without covering stoma not being a service associated with a service to which item 32103, 32104 or 32106 applies [Anaes.] [Assist.] | ANTERIOR RESECTION OF THE RECTUM |
| 32026 | Rectum, ultra low restorative resection, with or without covering stoma, where the anastomosis is sited in the anorectal region and is 6cm or less from the anal verge [Anaes.] [Assist.] | ANTERIOR RESECTION OF THE RECTUM |
| 32028 | Rectum, low or ultra low restorative resection, with peranal sutured coloanal anastomosis, with or without covering stoma [Anaes.] [Assist.] | ANTERIOR RESECTION OF THE RECTUM |
| 32030 | Rectosigmoidectomy [Hartmann`s operation] [Anaes.] [Assist.] | RECTOSIGMOID RESECTION[Hartmann`s procedure] |

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| 32033 | Restoration of bowel following Hartmann`s or similar operation, including dismantling of the stoma [Anaes.] [Assist.] | RECTOSIGMOID STOMA CLOSURE |
| 32036 | Sacrococcygeal and presacral tumour excision of [Anaes.] [Assist.] | SACROCOCCYGEAL AND PRESACRAL TUMOUR EXCISION |
| 32039 | Rectum and anus, abdominoperineal resection of - 1 surgeon [Anaes.] [Assist.] | ABDOMINAL PERINEAL RESECTION |
| 32042 | Rectum and anus, abdominoperineal resection of, combined synchronous operation, abdominal resection [Anaes.] [Assist.] | ABDOMINAL PERINEAL RESECTION |
| 32045 | Rectum and anus, abdominoperineal resection of, combined synchronous operation - perineal resection [Assist.] | ABDOMINAL PERINEAL RESECTION |
| 32046 | Rectum and anus, abdomino-perineal resection of, combined synchronous operation - perineal resection where the perineal surgeon also provides assistance to the abdominal surgeon [Assist.] | ABDOMINAL PERINEAL RESECTION |
| 32094 | Endoscopic dilatation of colorectal strictures including colonoscopy [Anaes.] | DILATATION OF ANO-RECTAL STRICTURE |
| 32096 | Rectal biopsy, full thickness, under general anaesthesia, or under epidural or spinal [intrathecal] nerve block where undertaken in a hospital [Anaes.] [Assist.] | RECTAL BIOPSY |
| 32099 | Rectal tumour of 5cm or less in diameter, per anal submucosal excision of [Anaes.] [Assist.] | RECTAL TUMOUR, of less than 4 cm in diameter, per anal excision |
| 32102 | Rectal tumour of greater than 5cm in diameter, indicated by pathological examination, per anal submucosal excision of [Anaes.] [Assist.] | RECTAL TUMOUR, of less than 4 cm in diameter, per anal excision |
| 32103 | rectal tumour, of less than 4 cm in diameter, per anal excision of, using rectoscopy incorporating either 3 dimensional or 2 dimensional optic viewing systems, if removal is unable to be performed during colonoscopy or by local excision, other than a service associated with a service to which item 32024, 32025, 32104 or 32106 applies [Anaes.] [Assist.] | RECTAL TUMOUR, of less than 4 cm in diameter, per anal excision |
| 32104 | rectal tumour, of 4 cm or greater in diameter, per anal excision of, using rectoscopy incorporating either 3 dimensional or 2 dimensional optic viewing systems, if removal is unable to be performed during colonoscopy or by local excision, other than a service associated with a service to which item 32024, 32025, 32103 or 32106 applies [Anaes.] [Assist.] | RECTAL TUMOUR, of less than 4 cm in diameter, per anal excision |
| 32105 | Anorectal carcinoma per anal full thickness excision of [Anaes.] [Assist.] | RECTAL TUMOUR, of less than 4 cm in diameter, per anal excision |
| 32108 | Rectal tumour, transsphincteric excision of [Kraske or similar operation] [Anaes.] [Assist.] | RECTAL TUMOUR, of less than 4 cm in diameter, per anal excision |
| 32111 | Rectal prolapse, Delorme procedure for [Anaes.] [Assist.] | RECTOPEXY FOR RECTAL PROLAPSE |
| 32112 | Rectal prolapse, perineal recto-sigmoidectomy for [Anaes.] [Assist.] | RECTOPEXY FOR RECTAL PROLAPSE |

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| 32114 | Rectal stricture, per anal release of [Anaes.] | RECTOPEXY FOR RECTAL PROLAPSE |
| 32115 | Rectal stricture, dilatation of [Anaes.] | RECTAL STRICTURE RECTOPEXY FOR RECTAL PROLAPSE |
| 32117 | Rectal prolapse, abdominal rectopexy of [Anaes.] [Assist.] | RECTOPEXY FOR RECTAL PROLAPSE |
| 32120 | Rectal prolapse, perineal repair of [Anaes.] [Assist.] | RECTOPEXY FOR RECTAL PROLAPSE |
| 32123 | Anal stricture, anoplasty for [Anaes.] [Assist.] | ANAL STRICTURE |
| 32126 | Anal incontinence, Parks` intersphincteric procedure for [Anaes.] [Assist.] | ANAL SPHINCTER REPAIR |
| 32129 | Anal sphincter, direct repair of [Anaes.] [Assist.] | ANAL SPHINCTER REPAIR |
| 32132 | Haemorrhoids or rectal prolapse sclerotherapy for [Anaes.] | HEMORRHOIDS SCLEROTHERAPY HEMORRHOIDS |
| 32135 | Haemorrhoids or rectal prolapse rubber band ligation of, with or without sclerotherapy, cryotherapy or infra red therapy for [Anaes.] | HEMORRHOIDS BAND LIGATION |
| 32138 | Haemorrhoidectomy including excision of anal skin tags when performed [Anaes.] | HEMORRHOIDECTOMY |
| 32139 | Haemorrhoidectomy involving third or fourth degree haemorrhoids, including excision of anal skin tags when performed [Anaes.] [Assist.] | HEMORRHOIDECTOMY |
| 32142 | Anal skin tags or anal polyps, excision of 1 or more of [Anaes.] | ANAL POLYPS OR TAGS |
| 32145 | Anal skin tags or anal polyps, excision of 1 or more of, undertaken in the operating theatre of a hospital [Anaes.] | ANAL POLYPS OR TAGS |
| 32147 | Perianal thrombosis, incision of [Anaes.] | HEMORRHOIDECTOMY |
| 32150 | Operation for fissureinano, including excision or sphincterotomy but excluding dilatation only [Anaes.] [Assist.] | ANAL FISSURE REPAIR |
| 32153 | Anus, dilatation of, under general anaesthesia, with or without disimpaction of faeces, not being a service associated with a service to which another item in this Group applies [Anaes.] | ANUS STRICTURE DILATATION DILATATION OF ANO-RECTAL STRICTURE |

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| 32156 | Fistula-in-ano, subcutaneous, excision of [Anaes.] | ANAL FISTULA excision |
| 32159 | Anal fistula, treatment of, by excision or by insertion of a seton, or by a combination of both procedures, involving the lower half of the anal sphincter mechanism [Anaes.] [Assist.] | ANAL FISTULA excision |
| 32162 | Anal fistula, treatment of, by excision or by insertion of a seton, or by a combination of both procedures, involving the upper half of the anal sphincter mechanism [Anaes.] [Assist.] | ANAL FISTULA repair |
| 32165 | Anal fistula, repair of by mucosal flap advancement [Anaes.] [Assist.] | ANAL FISTULA repair |
| 32166 | Anal fistula - readjustment of Seton [Anaes.] | ANAL FISTULA readjustment of Seton |
| 32171 | Anorectal examination, with or without biopsy, under general anaesthetic, not being a service associated with a service to which another item in this Group applies [Anaes.] | ANORECTAL EXAMINATION |
| 32174 | Intra-anal, perianal or ischio-rectal abscess, drainage of [excluding aftercare] [Anaes.] | PERIANAL ABCESS DRAINAGE |
| 32175 | Intra-anal, perianal or ischio-rectal abscess, draining of, undertaken in the operating theatre of a hospital [excluding aftercare] [Anaes.] | PERIANAL ABCESS DRAINAGE |
| 32511 | Varicose veins, complete dissection at the sapheno-femoral and sapheno-popliteal junction -1 leg - with or without either ligation or stripping, or both, of the long or short saphenous veins, for the first time on the same leg, including excision or injection of either tributaries or incompetent perforating veins, or both [Anaes.] [Assist.] | VARICOSE VEINS AVULSIONS/ PHLEBECTOMIES |
| 32514 | Varicose veins, ligation of the long or short saphenous vein on the same leg, with or without stripping, by re-operation for recurrent veins in the same territory - 1 leg - including excision or injection of either tributaries or incompetent perforating veins, or both [Anaes.] [Assist.] | VARICOSE VEINS AVULSIONS/ PHLEBECTOMIES |
| 32520 | Varicose veins, abolition of venous reflux by occlusion of a primary or recurrent great [long] or small [short] saphenous vein of one leg [and major tributaries of saphenous veins as necessary], using a laser probe introduced by an endovenous catheter, where it is documented by duplex ultrasound that the great or small saphenous vein [whichever is to be treated] demonstrates reflux of 0.5 seconds or longer, including all preparation and immediate clinical aftercare [including excision or injection of either tributaries or incompetent perforating veins, or both] but not including radiofrequency diathermy or radiofrequency ablation, and not provided on the same occasion as a service described in any of items 32500, 32501, 32504 or 32507. [Anaes.] | VARICOSE VEINS SCLEROTHERAPY |
| 32522 | Varicose veins, abolition of venous reflux by occlusion of a primary or recurrent great [long] and small [short] saphenous vein of one leg [and major tributaries of saphenous veins as necessary], using a laser probe introduced by an endovenous catheter, where it is documented by duplex ultrasound that the great and small saphenous veins demonstrate reflux of 0.5 seconds or longer, including all preparation and immediate clinical aftercare [including excision or injection of either tributaries or incompetent perforating veins, or both] but not including radiofrequency diathermy or radiofrequency ablation, and not provided on the same occasion as a service described in any of items 32500, 32501, 32504 or 32507 | VARICOSE VEINS SCLEROTHERAPY |

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| | [Anaes.] | |
|-------|---|------------------------------|
| 32523 | Varicose veins, abolition of venous reflux by occlusion of a primary or recurrent great [long] or small [short] saphenous vein of one leg [and major tributaries of saphenous veins as necessary], using a radiofrequency catheter introduced by an endovenous catheter, where it is documented by duplex ultrasound that the great or small saphenous vein [whichever is to be treated] demonstrates reflux of 0.5 seconds or longer, including all preparation and immediate clinical aftercare [including excision or injection of either tributaries or incompetent perforating veins, or both], but not including endovenous laser therapy, and not provided on the same occasion as a service described in any of items 32500, 32501, 32504 or 32507 [Anaes.] | VARICOSE VEINS SCLEROTHERAPY |
| 32526 | Varicose veins, abolition of venous reflux by occlusion of a primary or recurrent great [long] and small [short] saphenous vein of one leg [and major tributaries of saphenous veins as necessary], using a radiofrequency catheter introduced by an endovenous catheter, where it is documented by duplex ultrasound that the great and small saphenous veins demonstrate reflux of 0.5 seconds or longer, including all preparation and immediate clinical aftercare [including excision or injection of either tributaries or incompetent perforating veins, or both], but not including endovenous laser therapy, and not provided on the same occasion as a service described in any of items 32500, 32501, 32504 or 32507 [Anaes.] | VARICOSE VEINS SCLEROTHERAPY |
| 38600 | Central cannulation for cardiopulmonary bypass excluding post-operative management, not being a service associated with a service to which another item in this Subgroup applies [Anaes.] [Assist.] | VENOUS CUTDOWN |
| 38806 | Intercostal drain, insertion of, not involving resection of rib [excluding aftercare] [Anaes.] | CHEST TUBE INSERTION |
| 43837 | Congenital diaphragmatic hernia, repair by thoracic or abdominal approach, with diagnosis confirmed in the first 24 hours of life [Anaes.] [Assist.] | DIAPHRAGMATIC HERNIA REPAIR |
| 43838 | Diaphragmatic hernia, congenital repair of, by thoracic or abdominal approach, not being a service to which any of items 31569 to 31581 apply, on a person under 10 years of age [Anaes.] [Assist.] | DIAPHRAGMATIC HERNIA REPAIR |
| 43840 | Congenital diaphragmatic hernia, repair by thoracic or abdominal approach, diagnosed after the first day of life and before 20 days of age [Anaes.] [Assist.] | DIAPHRAGMATIC HERNIA REPAIR |
| 43933 | Idiopathic intussusception, laparotomy and manipulative reduction of [Anaes.] [Assist.] | INTUSSUSCEPTION |
| 43936 | Intussusception, laparotomy and resection with anastomosis [Anaes.] [Assist.] | INTUSSUSCEPTION |
| 47916 | ingrowing nail of toe, partial resection of nail, with destruction of nail matrix by phenolisation, electrocautery, laser, sodium hydroxide or acid but not including excision of nail bed [Anaes.] | INGROWING NAIL EXCISION |

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| Specialty GYN | Sub-classification: | |
|---|---------------------|-------------------------------------|
| 16511 Cervix, purse string ligation of [Anaes.] | | CERCLAGE OF THE CERVIX |
| 16512 Cervix, removal of purse string ligature of [Anaes.] | | CERCLAGE OF THE CERVIX |
| 16520 Caesarean section and postoperative care for 7 days, if the patient's care has been transferred by another medical practitioner for management of the confinement and the attending medical practitioner has not provided any of the antenatal care [Anaes.] | | CESARIAN SECTION |
| 16522 Management of labour and birth, or birth alone, [including caesarean section], on or after 23 weeks gestation, if in the course of antenatal supervision or intrapartum management one or more of the following conditions is present, including postnatal care for 7 days: [a] fetal loss; [b] multiple pregnancy; [c] antepartum haemorrhage that is: [i] of greater than 200 ml; or [ii] associated with disseminated intravascular coagulation; [d] placenta praevia on ultrasound in the third trimester with the placenta within 2 cm of the internal cervical os; [e] baby with a birth weight less than or equal to 2,500 g; [f] trial of vaginal birth in a patient with uterine scar where there has been a planned vaginal birth after caesarean section; [g] trial of vaginal breech birth where there has been a planned vaginal breech birth; [h] prolonged labour greater than 12 hours with partogram evidence of abnormal cervimetric progress as evidenced by cervical dilatation at less than 1 cm/hr in the active phase of labour [after 3 cm cervical dilatation and effacement until full dilatation of the cervix]; [i] acute fetal compromise evidenced by: [i] scalp pH less than 7.15; or [ii] scalp lactate greater than 4.0; [j] acute fetal compromise evidenced by at least one of the following significant cardiotocograph abnormalities: [i] prolonged bradycardia [less than 100 bpm for more than 2 minutes]; [ii] absent baseline variability [less than 3 bpm]; [iii] sinusoidal pattern; [iv] complicated variable decelerations with reduced [3 to 5 bpm] or absent baseline variability; [v] late decelerations; [k] pregnancy induced hypertension of at least 140/90 mm Hg associated with: [i] at least 2+ proteinuria on urinalysis; or [ii] protein-creatinine ratio greater than 30 mg/mmol; or [iii] platelet count less than 150 x 10 ⁹ /L; or [iv] uric acid greater than 0.36 mmol/L; [l] gestational diabetes mellitus requiring at least daily blood glucose monitoring; [m] mental health disorder [whether arising prior to pregnancy, during pregnancy or postpartum] that is demonstrated by: [i] the patient requiring hospitalisation; or [ii] the patient receiving ongoing care by a psychologist or psychiatrist to treat the symptoms of a mental health disorder; or [iii] the patient having a GP mental health treatment plan; or [iv] the patient having a management plan prepared in accordance with item 291; [n] disclosure or evidence of domestic violence; [o] any of the following conditions either diagnosed pre-pregnancy or evident at the first antenatal visit before 20 weeks gestation: [i] pre-existing hypertension requiring antihypertensive medication prior to pregnancy; [ii] cardiac disease [co-managed with a specialist physician and with echocardiographic evidence of myocardial dysfunction]; [iii] previous renal or liver transplant; [iv] renal dialysis; [v] chronic liver disease with documented oesophageal varices; [vi] renal insufficiency in early pregnancy [serum creatinine greater than 110 mmol/L]; [vii] neurological disorder that confines the patient to a wheelchair throughout pregnancy; [viii] maternal height of less than 148 cm; [ix] a body mass index greater than or equal to 40; [x] pre-existing diabetes mellitus on medication prior to pregnancy; [xi] thyrotoxicosis requiring medication; [xii] previous thrombosis or thromboembolism requiring anticoagulant therapy through pregnancy and the early puerperium; [xiii] thrombocytopenia with platelet count of | | CESARIAN SECTION WITH COMPLICATIONS |

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| | less than 100,000 prior to 20 weeks gestation; [xiv] HIV, hepatitis B or hepatitis C carrier status positive; [xv] red cell or platelet iso-immunisation; [xvi] cancer with metastatic disease; [xvii] illicit drug misuse during pregnancy [Anaes.] | |
| 16570 | Acute inversion of the uterus, vaginal correction of, as an independent procedure [Anaes.] | REDUCTION OF INVERTED UTERINE |
| 16571 | Cervix, repair of extensive laceration or lacerations [Anaes.] | REPAIR OF CERVICAL TEAR |
| 16573 | Third degree tear, involving anal sphincter muscles and rectal mucosa, repair of, as an independent procedure [Anaes.] | SECONDARY SUTURE OF THE EPISIOTOMY |
| 30390 | Laparoscopy, diagnostic, not being a service associated with any other laparoscopic procedure, on a person 10 years of age or over [Anaes.] | DIAGNOSTIC LAPAROSCOPY |
| 31450 | Laparoscopic division of adhesions, as an independent procedure, where the time taken is 1 hour or less [Anaes.] [Assist.] | LAPAROSCOPIC ADHESIOLYSIS/ TUBAL PLASTY |
| 31452 | Laparoscopic division of adhesions, as an independent procedure, where the time taken is more than 1 hour [Anaes.] [Assist.] | LAPAROSCOPIC ADHESIOLYSIS/ TUBAL PLASTY |
| 35502 | Intrauterine device, introduction of, for the control of idiopathic menorrhagia, and endometrial biopsy to exclude endometrial pathology, not being a service associated with a service to which another item in this Group applies [Anaes.] | INSERTION OF THE INTRA UTERINE DEVICE |
| 35503 | Intra uterine contraceptive device, introduction of, if the service is not associated with a service to which another item in this Group applies [other than a service mentioned in item 30062] [Anaes.] | INSERTION OF THE INTRA UTERINE DEVICE |
| 35506 | Intrauterine contraceptive device, removal of under general anaesthesia, not being a service associated with a service to which another item in this Group applies [Anaes.] | REMOVAL OF THE INTRAUTRINE DEVICE |
| 35509 | Hymenectomy [Anaes.] | HYMENECTOMY |
| 35513 | Bartholin`s cyst, excision of [Anaes.] | MARSUPIALIZATION OF THE BARTHOLIN`S CYST GLAND |
| 35517 | Bartholin`s cyst or gland, marsupialisation of [Anaes.] | MARSUPIALIZATION OF THE BARTHOLIN`S CYST GLAND |
| 35518 | Ovarian cyst aspiration, for cysts of at least 4cm in diameter in a premenopausal person and at least 2cm in diameter in a postmenopausal person, by abdominal or vaginal route, using interventional imaging techniques and not associated with services provided for assisted reproductive techniques [Anaes.] | OVARIAN CYSTECTOMY |
| 35520 | Bartholin`s abscess, incision of [Anaes.] | INCISION AND DRAINAGE OF THE BATHOLIN`S GLAND ABSCESS |
| 35536 | Vulva, wide local excision of suspected malignancy or hemivulvectomy, 1 or both procedures [Anaes.] [Assist.] | EXCISION OF A SIMPLE VULVAR CONDYLOMAS |

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| | | SIMPLE PARTIAL VULVECTOMY |
| 35539 | Colposcopically directed CO ₂ laser therapy for previously confirmed intraepithelial neoplastic changes of the cervix, vagina, vulva, urethra or anal canal, including any associated biopsies 1 anatomical site [Anaes.] | CAUTERIZATION OF EXTENSIVE VULVAR CONDYLOMA |
| 35542 | Colposcopically directed CO ₂ laser therapy for previously confirmed intraepithelial neoplastic changes of the cervix, vagina, vulva, urethra or anal canal, including any associated biopsies 2 or more anatomical sites [Anaes.] [Assist.] | CAUTERIZATION OF EXTENSIVE VULVAR CONDYLOMA |
| 35545 | Colposcopically directed CO ₂ laser therapy for condylomata, unsuccessfully treated by other methods [Anaes.] | CAUTERIZATION OF EXTENSIVE VULVAR CONDYLOMA |
| 35548 | Vulvectomy, radical, for malignancy [Anaes.] [Assist.] | SIMPLE PARTIAL VULVECTOMY |
| 35569 | Plastic repair to enlarge vaginal orifice [Anaes.] | VAGINAL PLASTY |
| 35570 | Anterior vaginal compartment repair by vaginal approach [involving repair of urethrocoele and cystocele] with or without mesh, not being a service associated with a service to which item 35573, 35577 or 35578 applies [Anaes.] [Assist.] | ANTERIOR COLPORHAPHY |
| 35571 | Posterior vaginal compartment repair by vaginal approach [involving one or more of the following; repair of perineum, rectocele or enterocele] with or without mesh, not being a service associated with a service to which item 35573, 35577 or 35578 applies [Anaes.] [Assist.] | POSTERIOR COLPORHAPHY REPAIR OF THE PERINEAL TEAR |
| 35573 | Anterior and posterior vaginal compartment repair by vaginal approach [involving both anterior and posterior compartment defects] with or without mesh, not being a service associated with a service to which item 35577 or 35578 applies [Anaes.] [Assist.] | ANTERIOR COLPORHAPHY REPAIR OF THE PERINEAL TEAR |
| 35623 | Hysteroscopic resection of myoma, or myoma and uterine septum resection [where both are performed], followed by endometrial ablation by laser or diathermy [Anaes.] | HYSTEROSCOPIC REPAIR OF UTERINE SEPTUM |
| 35626 | Hysteroscopy, including biopsy, performed by a specialist in the practice of his or her specialty where the patient is referred to him or her for the investigation of suspected intrauterine pathology [with or without local anaesthetic], not being a service associated with a service to which item 35627 or 35630 applies | HYSTEROSCOPY DIAGNOSTIC |
| 35627 | Hysteroscopy with dilatation of the cervix performed in the operating theatre of a hospital - not being a service associated with a service to which item 35626 or 35630 applies [Anaes.] | DIAGNOSTIC HYSTEROSCOPY UNDER GENERAL ANESTHESIA |
| 35630 | Hysteroscopy, with endometrial biopsy, performed in the operating theatre of a hospital - not being a service associated with a service to which item 35626 or 35627 applies [Anaes.] | DIAGNOSTIC HYSTEROSCOPY UNDER GENERAL ANESTHESIA |
| 35633 | Hysteroscopy with uterine adhesiolysis or polypectomy or tubal catheterisation [including for insertion of device for | HYSTEROSCOPIC LYSIS OF INTRA |

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| | sterilisation] or removal of iud which cannot be removed by other means, 1 or more of [Anaes.] | UTERINE SYNECHIAE HYSTEROSCOPIC POLYPECTOMY |
| 35637 | Laparoscopy, involving puncture of cysts, diathermy of endometriosis, ventrosuspension, division of adhesions or similar procedure - 1 or more procedures with or without biopsy - not being a service associated with any other laparoscopic procedure or hysterectomy [Anaes.] [Assist.] | LAPAROSCOPIC ADHESIOLYSIS/ TUBAL PLASTY |
| 35638 | Complicated operative laparoscopy, including use of laser when required, for 1 or more of the following procedures; oophorectomy, ovarian cystectomy, myomectomy, salpingectomy or salpingostomy, ablation of moderate or severe endometriosis requiring more than 1 hours operating time, or division of utero-sacral ligaments for significant dysmenorrhoea - not being a service associated with any other intraperitoneal or retroperitoneal procedure except item 30393 [Anaes.] [Assist.] | EXCISION OF THE CERVICAL MYOMA HYSTEROSCOPIC MYOMECTOMY LAPAROSCOPIC MYOMECTOMY LAPAROSCOPIC UNILATERAL OVARIAN CYSTECTOMY LAPAROSCOPIC UNILATERAL SALPINGECTOMY FOR ECTOPIC PREGNANCY MYOMECTOMY OVARIAN CYSTECTOMY |
| 35640 | UTERUS, CURETTAGE OF, with or without dilatation [including curettage for incomplete miscarriage] under general anaesthesia, or under epidural or spinal [intrathecal] nerve block, including procedures to which item 35626, 35627 or 35630 applies,if performed [Anaes.] | CURETTAGE |
| 35643 | EVACUATION OF THE CONTENTS OF THE GRAVID UTERUS BY CURETTAGE OR SUCTION CURETTAGE other than a service to which item 35640 applies, including procedures to which item 35626, 35627 or 35630 applies, if performed [Anaes.] | CURETTAGE |
| 35647 | Cervix, large loop excision of transformation zone together with colposcopy for previously confirmed intraepithelial neoplastic changes of the cervix, including any local anaesthesia and biopsies, not being a service associated with a service to which item 35644 applies [Anaes.] | CONISATION ASSISTED BY A SPECIALIST ANAESTHESIST |
| 35648 | Cervix, large loop excision diathermy for previously confirmed intraepithelial neoplastic changes of the cervix, including any local anaesthesia and biopsies, in conjunction with ablative treatment of additional areas of intraepithelial change of 1 or more sites of vagina, vulva, urethra or anus, not being a service associated with a service to which item 35645 applies [Anaes.] | CONISATION ASSISTED BY A SPECIALIST ANAESTHESIST |

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| 35649 | Hysterotomy or uterine myomectomy, abdominal [Anaes.] [Assist.] | ADENOFIBROMECTOMY EXCISION OF THE CERVICAL MYOMA HYSTEROSCOPIC MYOMECTOMY MYOMECTOMY |
| 35653 | Hysterectomy, abdominal, sub total or total, with or without removal of uterine adnexae [Anaes.] [Assist.] | TOTAL ABDOMINAL HYSTERECTOMY |
| 35657 | Hysterectomy, vaginal, with or without uterine curettage, not being a service to which item 35673 applies. note: Strict legal requirements apply in relation to sterilisation procedures on minors. Medicare benefits are not payable for services not rendered in accordance with relevant Commonwealth and State and Territory law. Observe the explanatory note before submitting a claim. [Anaes.] [Assist.] | VAGINAL HYSTERECTOMY |
| 35661 | Hysterectomy, abdominal, requiring extensive retroperitoneal dissection with or without exposure of 1 or both ureters, for the management of severe endometriosis, pelvic inflammatory disease or benign pelvic tumours, with or without conservation of ovaries [Anaes.] [Assist.] | TOTAL ABDOMINAL HYSTERECTOMY |
| 35664 | Radical hysterectomy with radical excision of pelvic lymph glands [with or without excision of uterine adnexae] for proven malignancy including excision of any 1 or more of parametrium, paracolpos, upper vagina or contiguous pelvic peritoneum and involving ureterolysis where performed [Anaes.] [Assist.] | LAPAROSCOPIC WERTHEIM'S HYSTERECTOMY |
| 35667 | Radical hysterectomy without gland dissection [with or without excision of uterine adnexae] for proven malignancy including excision of any 1 or more of parametrium, paracolpos, upper vagina or contiguous pelvic peritoneum and involving ureterolysis where performed [Anaes.] [Assist.] | LAPAROSCOPIC WERTHEIM'S HYSTERECTOMY |
| 35670 | Hysterectomy, abdominal, with radical excision of pelvic lymph glands, with or without removal of uterine adnexae [Anaes.] [Assist.] | RADICAL HYSTERECTOMY |
| 35673 | Hysterectomy, vaginal, [with or without uterine curettage] with salpingectomy, oophorectomy or excision of ovarian cyst, 1 or more, 1 or both sides [Anaes.] [Assist.] | VAGINAL HYSTERECTOMY |
| 35680 | Bicornuate uterus, plastic reconstruction for [Anaes.] [Assist.] | LAPAROSCOPIC REPAIR OF UTERINE MALFORMATION |
| 35684 | Uterus, suspension or fixation of, as an independent procedure [Anaes.] [Assist.] | LAPAROSCOPIC REPAIR OF UTERINE MALFORMATION LAPAROSCOPIC REPAIR OF UTERINE MALFORMATION REPAIR OF UTERINE RUPTURE ASSISTED BY ANAESTHIST A1 |

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| | | REPAIR OF UTERINE RUPTURE ASSISTED BY ANAESTHIST A1 REPAIR OF UTERINE RUPTURE ASSISTED BY SPECIALIST ANAESTHETIST |
| 35688 | Sterilisation by transection or resection of fallopian tubes, via abdominal or vaginal routes or via laparoscopy using diathermy or any other method note: Strict legal requirements apply in relation to sterilisation procedures on minors. Medicare benefits are not payable for services not rendered in accordance with relevant Commonwealth and State and Territory law. Observe the explanatory note before submitting a claim. [Anaes.] [Assist.] | MINI LAPAROTOMY FOR TUBAL LIGATION |
| 35691 | Sterilisation by interruption of fallopian tubes, when performed in conjunction with Caesarean section note: Strict legal requirements apply in relation to sterilisation procedures on minors. Medicare benefits are not payable for services not rendered in accordance with relevant Commonwealth and State and Territory law. Observe the explanatory note before submitting a claim. [Anaes.] [Assist.] | OPEN BILATERAL TUBAL LIGATION |
| 35713 | LAPAROTOMY, involving OOPHORECTOMY, SALPINGECTOMY, SALPINGO-OOPHORECTOMY, removal of OVARIAN, PARAOVARIAN, FIMBRIAL or BROAD LIGAMENT CYST - one such procedure, other than a service associated with hysterectomy [Anaes.] [Assist.] | OPEN BILATERAL TUBAL LIGATION OPEN BILATERAL TUBAL LIGATION |
| 35717 | LAPAROTOMY, involving OOPHORECTOMY, SALPINGECTOMY, SALPINGO-OOPHORECTOMY, removal of OVARIAN, PARAOVARIAN, FIMBRIAL or BROAD LIGAMENT CYST - 2 or more such procedures, unilateral or bilateral, other than a service associated with hysterectomy [Anaes.] [Assist.] | OPEN BILATERAL TUBAL LIGATION |
| 35729 | Ovarian transposition out of the pelvis, in conjunction with radical hysterectomy for invasive malignancy [Anaes.] | RADICAL HYSTERECTOMY |
| 35750 | Laparoscopically assisted hysterectomy, including any associated laparoscopy [Anaes.] [Assist.] | LAPAROSCOPIC HYSTERECTOMY |
| 35753 | Laparoscopically assisted hysterectomy with one or more of the following procedures: salpingectomy, oophorectomy, excision of ovarian cyst or treatment of moderate endometriosis, one or both sides, including any associated laparoscopy [Anaes.] [Assist.] | LAPAROSCOPIC HYSTERECTOMY |
| 35754 | Laparoscopically assisted hysterectomy which requires dissection of endometriosis, or other pathology, from the ureter, one or both sides, including any associated laparoscopy, including when performed with one or more of the following procedures: salpingectomy, oophorectomy, excision of ovarian cyst, or treatment of endometriosis, not being a service to which item 35641 applies [Anaes.] [Assist.] | LAPAROSCOPIC HYSTERECTOMY |
| 35756 | Laparoscopically assisted hysterectomy, when procedure is completed by open hysterectomy, including any associated laparoscopy [Anaes.] [Assist.] | LAPAROSCOPIC HYSTERECTOMY |
| 37029 | Vesicovaginal fistula, closure of by abdominal approach [Anaes.] [Assist.] | REPAIR OF A COMPLEX VESICO VAGINAL FISTULA [OR RECTAL] |

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| 37044 | Bladder stress incontinence, suprapubic procedure for, eg Burch colposuspension, with or without mesh, not being a service associated with a service to which item 30405 or 35599 applies [Anaes.] [Assist.] | LAPAROSCOPIC BURCH PROCEDURE |
| 37333 | Urethrovaginal fistula, closure of [Anaes.] [Assist.] | REPAIR OF A COMPLEX VESICO VAGINAL FISTULA [OR RECTAL] |
| 37336 | Urethrorectal fistula, closure of [Anaes.] [Assist.] | REPAIR OF A COMPLEX VESICO VAGINAL FISTULA [OR RECTAL] |
| 37851 | Congenital adrenal hyperplasia, mixed gonadal dysgenesis or similar condition, vaginoplasty for, with or without endoscopy [Anaes.] [Assist.] | VAGINAL PLASTY |

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| Specialty | Hospitalisation | Sub-classification: | |
|-----------|--|---------------------|--|
| H1000 | Hospitalisation in a common ward [4 beds or more] | | Hospitalisation in a common ward [4 beds or more] |
| H1001 | Hospitalisation in a common ward [4 beds or more] - no overnight | | Daytime Hospitalisation in a common ward no overnight night [4 beds or more] |
| H1010 | Hospitalisation in a private room [1 bed] | | Hospitalisation in a private room [1 bed] |
| H1011 | Hospitalisation in a private day room [1 bed] - no overnight | | Daytime Hospitalisation in a private room no overnight [1 bed] |
| H1020 | Hospitalisation in a semi-private room [2 beds] | | Hospitalisation in a semi-private room [2 beds] |
| H1021 | Hospitalisation in a semi-private day room [2 beds] - no overnight | | Daytime Hospitalisation in a semi-private room no overnight [2 beds] |
| H1030 | Hospitalisation with meal services in a common ward [4 beds or more] | | Hospitalisation with meal services in a common ward [4 beds or more] |
| H1040 | Hospitalisation with meal services in a private room [1 bed] | | Hospitalisation with meal services in a private room [1 bed] |
| H1050 | Hospitalisation with meal services in a semi-private room [2 beds] | | Hospitalisation with meal services in a semi-private room [2 beds] |
| H1060 | Hospitalisation in a high dependency unit [HDU] 24 hours | | High Dependency Unit [HDU] |
| | Hospitalisation in an intensive care [ICU] includes post-operative care 24 hours | | Intensive Care Unit [ICU] |
| | Hospitalisation in a neonatal intensive care unit 24 hours | | Neonatal Intensive Care Unit [NICU] |

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Specialty Imaging

Sub-classification: CT Scan

| | | |
|-------|--|--|
| 56010 | Computed tomography - scan of pituitary fossa with or without intravenous contrast medium and with or without brain scan when undertaken [r] [k] [Anaes.] | CT scan temporal BONE [NON CONTRAST] |
| 56013 | Computed tomography - scan of orbits with or without intravenous contrast medium and with or without brain scan when undertaken [R] [K] [Anaes.] | CT scan Orbit [NON CONTRAST] |
| 56022 | Computed tomography - scan of facial bones, para nasal sinuses or both without intravenous contrast medium [R] [K] [Anaes.] | CT scan Sinus [NON CONTRAST] |
| 56030 | Computed tomography - scan of facial bones, paranasal sinuses or both, with scan of brain, without intravenous contrast medium [R] [K] [Anaes.] | CT scan base of the skull [NON CONTRAST] |
| 56101 | Computed tomography - scan of soft tissues of neck, including larynx, pharynx, upper oesophagus and salivary glands [not associated with cervical spine] without intravenous contrast medium, not being a service to which item 56801 applies [R] [K] [Anaes.] | CT scan Neck soft tissue [NON CONTRAST] |
| 56220 | Computed tomography - scan of spine, cervical region, without intravenous contrast medium, payable once only, whether 1 or more attendances are required to complete the service [r] [k] [Anaes.] | CT scan Cervical spine [NON CONTRAST] |
| 56221 | Computed tomography - scan of spine, thoracic region, without intravenous contrast medium payable once only, whether 1 or more attendances are required to complete the service [r] [k] [Anaes.] | CT scan Thoracic spine [NON CONTRAST] |
| 56223 | Computed tomography - scan of spine, lumbosacral region, without intravenous contrast medium, payable once only, whether 1 or more attendances are required to complete the service [r] [k] [Anaes.] | CT scan LumbO-SACRAL spine [NON CONTRAST] |
| 56301 | Computed tomography - scan of chest, including lungs, mediastinum, chest wall and pleura, with or without scans of the upper abdomen, without intravenous contrast medium, not being a service to which item 56801 or 57001 applies and not including a study performed to exclude coronary artery calcification or image the coronary arteries [R] [K] [Anaes.] | CT scan Chest [NON CONTRAST] |
| 56347 | Computed tomography - scan of chest, including lungs, mediastinum, chest wall and pleura, with or without scans of the upper abdomen, with intravenous contrast medium and with any scans of the chest including lungs, mediastinum, chest wall or pleura and upper abdomen prior to intravenous contrast injection, when undertaken, not being a service to which item 56847 or 57047 applies and not including a study performed to exclude coronary artery calcification or image the coronary arteries [R] [NK] [Anaes.] | CT VIRTUAL BRONCHOSCOPY HRCT [High resolution CT chest] |
| 56401 | Computed tomography - scan of upper abdomen only [diaphragm to iliac crest] without intravenous contrast medium, not being a service to which item 56301, 56501, 56801 or 57001 applies [R] [K] [Anaes.] | CT scan Abdomen [NON CONTRAST] |
| 56409 | Computed tomography - scan of pelvis only [iliac crest to pubic symphysis] without intravenous contrast medium not being a service associated with a service to which item 56401 applies [R] [K] [Anaes.] | CT scan Pelvis [NON CONTRAST] |

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| | | |
|-------|--|--|
| 56553 | <p>Computed tomography scan of colon for exclusion or diagnosis of colorectal neoplasia in a symptomatic or high risk patient if:[a] one [or more] of the following applies: [i] the patient has had an incomplete colonoscopy in the 3 months before the scan; [ii] there is a high-grade colonic obstruction; [iii] the patient is referred by a specialist or consultant physician who performs colonoscopies [in the practice of his or her speciality]; and [b] the service is not a service to which item 56301, 56307, 56401, 56407, 56409, 56412, 56501, 56507, 56801, 56807 or 57001 applies; and[c] the service has not been performed on the patient in the 36 months before the scan [R] [K] [Anaes.]</p> | CT VIRTUAL COLONOSCOPY |
| 56619 | <p>Computed tomography - scan of extremities, 1 or more regions without intravenous contrast medium, payable once only, whether 1 or more attendances are required to complete the service [R] [K] [Anaes.]</p> | <p>CT scan Ankle [NON CONTRAST] CT scan Elbow [NON CONTRAST] CT scan Femur [NON CONTRAST] CT scan Foot [NON CONTRAST] CT scan Forearm [NON CONTRAST] CT scan Hand [NON CONTRAST] ct scan hip [NON CONTRAST] CT scan Humerus [NON CONTRAST] CT scan Knee [NON CONTRAST] CT scan Leg [TIBIA/FIBULA] [NON CONTRAST] CT scan Lower OR Upper extremities CT scan Shoulder [NON CONTRAST] CT scan thigh [NON CONTRAST] CT scan Topogram CT scan Wrist [NON CONTRAST]</p> |
| 57350 | <p>Computed tomography - spiral angiography with intravenous contrast medium, including any scans performed before intravenous contrast injection - 1 or more spiral data acquisitions, including image editing, and maximum intensity projections or 3 dimensional surface shaded display, with hardcopy recording of multiple projections, where: [a] the service is not a service to which another item in this group applies; and [b] the service is performed for the exclusion of arterial stenosis, occlusion, aneurysm or embolism; and [c] the service has not been performed on the same patient within the previous 12 months; and [d] the service is not a study performed to image the coronary arteries [r] [k] [Anaes.]</p> | CT ABDOMEN TRIPLE PHASE |

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| | | |
|-------|---|---|
| 57351 | Computed tomography - spiral angiography with intravenous contrast medium, including any scans performed before intravenous contrast injection - 1 or more spiral data acquisitions, including image editing, and maximum intensity projections or 3 dimensional surface shaded display, with hardcopy recording of multiple projections, where: [a] the service is not a service to which another item in this group applies; and [b] the service is performed for the exclusion of acute or recurrent pulmonary embolism; acute symptomatic arterial occlusion; post operative complication of arterial surgery; acute ruptured aneurysm; or acute dissection of the aorta, carotid or vertebral artery; and [c] the services to which 57350 or 57355 apply have been performed on the same patient within the previous 12 months; and [d] the service is not a study performed to image the coronary arteries [r] [k] [Anaes.] | CT chest Angiogram |
| 57355 | Computed tomography - spiral angiography with intravenous contrast medium, including any scans performed before intravenous contrast injection - 1 or more spiral data acquisitions, including image editing, and maximum intensity projections or 3 dimensional surface shaded display, with hardcopy recording of multiple projections, where: [a] the service is not a service to which another item in this group applies; and [b] the service is performed for the exclusion of arterial stenosis, occlusion, aneurysm or embolism; and [c] the service has not been performed on the same patient within the previous 12 months; and [d] the service is not a study performed to image the coronary arteries [r] [nk] [Anaes.] | CT neck angiogram |
| | | ct renal angiogram |
| | | CT SCAN PERIPHERAL ANGIOGRAM [EXTREMITY] ANGIOGRAM] |
| 57356 | Computed tomography - spiral angiography with intravenous contrast medium, including any scans performed before intravenous contrast injection - 1 or more spiral data acquisitions, including image editing, and maximum intensity projections or 3 dimensional surface shaded display, with hardcopy recording of multiple projections, where: a] the service is not a service to which another item in this group applies; and b] the service is performed for the exclusion of acute or recurrent pulmonary embolism; acute symptomatic arterial occlusion; post operative complication of arterial surgery; or acute ruptured aneurysm; acute dissection of the aorta, carotid or vertebral artery; and c] the services to which 57350 or 57355 apply have been performed on the same patient within the previous 12 months; and [d] the service is not a study performed to image the coronary arteries [r] [nk] [Anaes.] | CT brain angiogram |
| | | CT cardiac calcium score |
| 57360 | Computed tomography of the coronary arteries performed on a minimum of a 64 slice [or equivalent] scanner, where the request is made by a specialist or consultant physician, and:the patient has stable symptoms consistent with coronary ischaemia, is at low to intermediate risk of coronary artery disease and would have been considered for coronary angiography; orthe patient requires exclusion of coronary artery anomaly or fistula; orthe patient will be undergoing non-coronary cardiac surgery [r] [k] [Anaes.] | CT comprehensive cardiac [function] |
| 57361 | Computed tomography of the coronary arteries performed on a minimum of a 64 slice [or equivalent] scanner, where the request is made by a specialist or consultant physician, and:the patient has stable symptoms consistent with coronary ischaemia, is at low to intermediate risk of coronary artery disease and would have been considered for coronary | CT cardiac angiogram |

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angiography; or the patient requires exclusion of coronary artery anomaly or fistula; or the patient will be undergoing non-coronary cardiac surgery [r] [nk] [Anaes.]

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| 57362 | Dental & temporo-mandibular joint imaging for diagnosis and management of mandibular and dento-alveolar fractures, dental implant planning, orthodontics, endodontic, periodontal and temporo-mandibular joint conditions: without contrast medium. Restricted to requesting by dental specialists and medical practitioners and must be performed on equipment located in practices accredited under the Diagnostic Imaging Accreditation Scheme using dedicated [rather than hybrid] CBCT units. Claims for more than one CBCT per patient per day are excluded. Claiming with two-dimensional imaging in the same episode [items 57959-57969] and with CT in the same episode [items 56001-57361] are also excluded.[K] | CT SCAN OF THE FACE : MANDIBLE/MAXILLA [NON CONTRAST] |
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Specialty Imaging

Sub-classification: CT SCAN

| | | |
|-------|---|--|
| 56001 | computed tomography - scan of brain without intravenous contrast medium, not being a service to which item 57001 applies [r] [k] [Anaes.] | CT scan Brain [NON CONTRAST] |
| 56007 | computed tomography - scan of brain with intravenous contrast medium and with any scans of the brain prior to intravenous contrast injection, when undertaken, not being a service to which item 57007 applies [r] [k] [Anaes.] | CT scan Brain [with CONTRAST] |
| 56022 | Computed tomography - scan of facial bones, para nasal sinuses or both without intravenous contrast medium [R] [K] [Anaes.] | CT SCAN OF THE FACE : MANDIBLE/MAXILLA [Non Contrast] |
| 56030 | Computed tomography - scan of facial bones, paranasal sinuses or both, with scan of brain, without intravenous contrast medium [R] [K] [Anaes.] | CT scan Sinus [NON CONTRAST] |
| 56224 | Computed tomography - scan of spine, cervical region, with intravenous contrast medium and with any scans of the cervical region of the spine prior to intravenous contrast injection when undertaken; only 1 benefit payable whether 1 or more attendances are required to complete the service [r] [k] [Anaes.] | CT scan [with contrast] of spine, cervical region |
| 56225 | Computed tomography - scan of spine, thoracic region, with intravenous contrast medium and with any scans of the thoracic region of the spine prior to intravenous contrast injection when undertaken; only 1 benefit payable whether 1 or more attendances are required to complete the service [r] [k] [Anaes.] | CT scan [with contrast] of spine, thoracic region |
| 56226 | Computed tomography - scan of spine, lumbosacral region, with intravenous contrast medium and with any scans of the lumbosacral region of the spine prior to intravenous contrast injection when undertaken; only 1 benefit payable whether 1 or more attendances are required to complete the service [r] [k] [Anaes.] | CT scan [with contrast] of spine, lumbosacral region |
| 56307 | Computed tomography - scan of chest, including lungs, mediastinum, chest wall and pleura, with or without scans of the upper abdomen, with intravenous contrast medium and with any scans of the chest including lungs, mediastinum, chest wall or pleura and upper abdomen prior to intravenous contrast injection, when undertaken, not being a service to which item 56807 or 57007 applies and not including a study performed to exclude coronary artery calcification or image the coronary arteries [R] [K] [Anaes.] | CT scan [with contrast] of chest |
| 56407 | Computed tomography - scan of upper abdomen only [diaphragm to iliac crest] with intravenous contrast medium, and | CT scan [with contrast] of upper abdomen |

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| | | |
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| | with any scans of upper abdomen [diaphragm to iliac crest] prior to intravenous contrast injection, when undertaken, not being a service to which item 56307, 56507, 56807 or 57007 applies [R] [K] [Anaes.] | |
| 56412 | Computed tomography - scan of pelvis only [iliac crest to pubic symphysis] with intravenous contrast medium and with any CT scan [with contrast] of pelvis scans of pelvis [iliac crest to pubic symphysis] prior to intravenous contrast injection, when undertaken, not being a service to which item 56407 applies [R] [K] [Anaes.] | |
| 56547 | Computed tomography - scan of upper abdomen and pelvis with intravenous contrast medium, and with any scans of upper abdomen and pelvis prior to intravenous contrast injection, when undertaken, not for the purposes of virtual colonoscopy, not being a service to which item 56847 or 57047 applies [R] [NK] [Anaes.] | CT SCAN ABDOMEN ANGIOGRAM |
| 56619 | Computed tomography - scan of extremities, 1 or more regions without intravenous contrast medium, payable once only, whether 1 or more attendances are required to complete the service [R] [K] [Anaes.] | CT scan of [no contrast] extremities |
| 56625 | Computed tomography - scan of extremities, 1 or more regions with intravenous contrast medium and with any scans of extremities prior to intravenous contrast injection, when undertaken; only 1 benefit is payable whether 1 or more attendances are required to complete the service [R] [K] [Anaes.] | CT scan of [no contrast] extremities |
| 57350 | Computed tomography - spiral angiography with intravenous contrast medium, including any scans performed before intravenous contrast injection - 1 or more spiral data acquisitions, including image editing, and maximum intensity projections or 3 dimensional surface shaded display, with hardcopy recording of multiple projections, where: [a] the service is not a service to which another item in this group applies; and [b] the service is performed for the exclusion of arterial stenosis, occlusion, aneurysm or embolism; and [c] the service has not been performed on the same patient within the previous 12 months; and [d] the service is not a study performed to image the coronary arteries [r] [k] [Anaes.] | CT SCAN PERIPHERAL ANGIOGRAM [EXTREMITY] ANGIOGRAM |

Specialty Imaging

Sub-classification: General Radiography

| | | |
|-------|---|---|
| 57506 | Hand, wrist, forearm, elbow or humerus [NR] | X-RAY OF THE Elbow UNILATERAL [ap & lateral] X-RAY OF THE Forearm UNILATERAL [ap & lateral] X-RAY OF THE Hand UNILATERAL [ap & lateral] X-RAY OF THE Wrist UNILATERAL [ap & lateral] |
| 57509 | Hand, wrist, forearm, elbow or humerus [R] | X-RAY OF BOTH Humerus ap & lateral [ap & lateral] |
| 57518 | Foot, ankle, leg, knee or femur [NR] | X-RAY OF THE Femur UNILATERAL [ap & lateral] |

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| | | |
|-------|--|---|
| | | X-RAY OF THE Knee sky line VIEW UNILATERAL X-RAY OF THE Knee UNILATERAL [ap & lateral] X-RAY OF THE Leg UNILATERAL [ap & lateral] |
| 57524 | Foot and ankle, or ankle and leg, or leg and knee, or knee or femur [NR] | X-RAY OF THE Ankle mortise VIEW UNILATERAL X-RAY OF THE Ankle UNILATERAL [ap & lateral] X-RAY OF THE Foot unilateral [ap & lateral] X-RAY OF THE TALUS-calcaneus [ap & lateral] |
| 57530 | Hand, wrist, forearm, elbow or humerus [r] [nk] | X-RAY OF THE Humerus UNILATERAL [ap & lateral] |
| 57700 | Shoulder or scapula [NR] | X-RAY OF THE Shoulder UNILATERAL [ap & lateral] |
| 57702 | Shoulder or scapula [nr] [nk] | X-RAY OF THE scapula [ap & lateral] |
| 57706 | Clavicle [NR] | X-RAY OF THE Clavicle [ap & lateral] |
| 57712 | Hip joint [R] | X-RAY OF THE Hip UNILATERAL [ap & lateral] |
| 57715 | Pelvic girdle [R] | X-RAY OF BOTH HIPS [ap & lateral] X-RAY OF THE Pelvis ap |
| 57721 | Femur, internal fixation of neck or intertrochanteric [pertrochanteric] fracture [R] | X-RAY OF THE Femur UNILATERAL [ap & lateral] |
| 57901 | Skull, not in association with item 57902 [R] | X-RAY OF THE Skull [ap & lateral] |
| 57903 | Sinuses [R] | X-RAY OF THE Sinus [ap & LATERAL] |
| 57927 | Temporomandibular joints [R] | X-RAY OF THE Temporal Mandibular Joint [TMJ] closed mouth |

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| | | |
|-------|---|---|
| 57941 | Temporomandibular joints [r] [nk] | X-RAY OF THE Temporal Mandibular Joint [TMJ] open mouth |
| 58100 | Spine cervical [R] | X-RAY OF THE Cercical spine [flexion & extension] X-RAY OF THE Cervical spine [ap & lateral] X-RAY OF THE Cervical spine oblique[right & left] |
| 58103 | Spine thoracic [R] | X-RAY OF THE Thoracic spine [AP & Lateral] X-RAY OF THE Thoracic spine oblique [right & left] |
| 58106 | Spine lumbosacral [R] | X-RAY OF THE Lumbar spine [flexion & extension] X-RAY OF THE Lumbar spine oblique [right & left] X-RAY OF THE Lumbo-sacral spine [AP & Lateral] |
| 58120 | Spine, four regions, cervical, thoracic, lumbosacral and sacrococcygeal [r], if the service to which item 58120 or 58121 applies has not been performed on the same patient within the same calendar year | X-RAY OF THE Lumbar spine oblique [right & left] |
| 58500 | Chest [lung fields] by direct radiography [NR] | X-RAY OF THE Chest[ap & lateral] |
| 58503 | Chest [lung fields] by direct radiography [R] | X-RAY OF THE CHEST AP/PA X-RAY OF THE Chest decubitus [right & left] |
| 58505 | Chest [lung fields] by direct radiography [r] [nk] | X-RAY OF THE Chest lordotic VIEW |
| 58521 | Left ribs, right ribs or sternum [R] | X-RAY OF THE sternum [ap & lateral] |
| 58524 | Left and right ribs, left ribs and sternum, or right ribs and sternum [R] | X-RAY OF THE sternum [ap & lateral] |
| 58527 | Left ribs, right ribs and sternum [R] | X-RAY OF THE sternum [ap & lateral] |
| 58900 | Plain abdominal only, not being a service associated with a service to which item 58909, 58912 or 58915 applies [NR] | x-ray invertogram |

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| | | X-RAY Plain abdomen [AP] |
| 58902 | Plain abdominal only, not being a service associated with a service to which item 58909, 58911, 58912, 58914, 58915 or 58917 applies [nr] [nk] | X-RAY Plain adomen lateral |
| 58903 | Plain abdominal only, not being a service associated with a service to which item 58909, 58912 or 58915 applies [R] | X-RAY Plain abdomen decubitus |

Specialty Imaging

Sub-classification: **Interventional techniques**

| | | |
|-------|---|---|
| 55026 | Ultrasonic cross-sectional echography, in conjunction with a surgical procedure using interventional techniques, not being a service associated with a service to which any other item in this group applies [r] [nk] | CORE Biopsy OF THE DEEP ABDOMINAL ORGANS FINE NEEDLE ASPIRATION [DEEP LESIONS] FINE NEEDLE ASPIRATION[SUPERFICIAL LESIONS] ULTRASOUND GUIDED BIPOSIES OF DEEP ORGANS, E.G, LIVER/RENAL/PANCREATIC/PERITONEAL/R ETROPERITONEAL LESIONS ULTRASOUND GUIDED CORE BIOPSY- SUPERFICIAL LESIONS ULTRASOUND GUIDED DRAINAGES ULTRASOUND GUIDED TRANSRECTAL PROSTATE BIOPSY |
| 57341 | Computed tomography, in conjunction with a surgical procedure using interventional techniques, not being a service associated with a service to which another item in this table applies [R] [K] [Anaes.] | CT GUIDED FNA/CORE BIOPSY OF SUPERFICAIL/DEEP SEATED LESION |
| 59312 | Radiographic examination of both breasts, in conjunction with a surgical procedure on each breast, using interventional techniques - [R] | STERIOTACTIC CORE BIOPSY OF THE BREAST |

Specialty Imaging

Sub-classification: **MAGNETC RESONAINCE IMAGING [MRI]**

| | | |
|-------|---------------------------------------|---------------|
| 63058 | - head trauma [r] [Contrast] [Anaes.] | BRAIN MRV/MRA |
|-------|---------------------------------------|---------------|

Specialty Imaging

Sub-classification: **Mammography**

| | | |
|-------|--|-----------------------|
| 59300 | Mammography of both breasts, if there is a reason to suspect the presence of malignancy because of: [i] the past | Bilateral mammography |
|-------|--|-----------------------|

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occurrence of breast malignancy in the patient or members of the patient`s family; or [ii] symptoms or indications of malignancy found on an examination of the patient by a medical practitioner. Unless otherwise indicated, mammography includes both breasts [r]

| | | |
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| 59303 | Mammography of one breast, if: [a] the patient is referred with a specific request for a unilateral mammogram; and [b] there is reason to suspect the presence of malignancy because of: [i] the past occurrence of breast malignancy in the patient or members of the patient`s family; or [ii] symptoms or indications of malignancy found on an examination of the patient by a medical practitioner [r] | Unilateral mammography |
|-------|---|------------------------|

| | | |
|-------|--|--------------------------|
| 59306 | Mammary ductogram [galactography] - 1 breast [R] | UNILATERAL GALACTOGRAPHY |
|-------|--|--------------------------|

| | | |
|-------|---|-------------------------|
| 59309 | Mammary ductogram [galactography] - 2 breasts [R] | BILATERAL GALACTOGRAPHY |
|-------|---|-------------------------|

Specialty Imaging

Sub-classification: MRI

| | | |
|-------|---|------------------------------------|
| 63001 | Magnetic resonance imaging [including Magnetic Resonance Angiography if performed], performed under the professional supervision of an eligible provider at an eligible location where the patient is referred by a specialist or by a consultant physician - scan of head for: - tumour of the brain or meninges [r] [Contrast] [Anaes.] | MRI OF THE FACE [MANDIBLE/MAXILLA] |
|-------|---|------------------------------------|

| | | |
|-------|--|------------------|
| 63007 | - skull base or orbital tumour [r] [Contrast] [Anaes.] | MRI of the Orbit |
|-------|--|------------------|

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|-------|---|------------------|
| 63013 | Magnetic resonance imaging [including magnetic resonance angiography if performed], performed under the professional supervision of an eligible provider at an eligible location where the patient is referred by a specialist or by a consultant physician - scan of head for:- tumour of the brain or meninges [r] [nk] [contrast] [Anaes.] | MRI Spectroscopy |
|-------|---|------------------|

| | | |
|-------|---|-------------------------|
| 63016 | - skull base or orbital tumour [r] [nk] [contrast] [Anaes.] | MRI OF THE TONGUE/MOUTH |
|-------|---|-------------------------|

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| 63043 | - pituitary tumour [r] [Contrast] [Anaes.] | BRAIN MRV/MRA MRI ADDITIONAL DIAGNOSTIC SEQUENCES [MRS, PERFUSION, TENSOR IMAGING, WHOLE BODY DWI, MRA/MRV]/PER SEQUENCE MRI Carotid angioGRAM MRI of the Jugular veins angioGRAM MRI pituitary |
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Rwanda Medical Procedure Code Database

RMP Code Detailed Nomenclature

Mapped to local nomenclature

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| 63136 | - syrinx [congenital or acquired] [r] [nk] [contrast] [Anaes.] | MRI of the Cervical spine |
| 63151 | Magnetic resonance imaging performed under the professional supervision of an eligible provider at an eligible location where the patient is referred by a specialist or by a consultant physician - scan of one region or two contiguous regions of the spine for: - infection [r] [Contrast] [Anaes.] | MRI of the Neck soft tissue |
| 63167 | myelopathy [r] [Contrast] [Anaes.] | MRI of the Thoracic spine |
| 63176 | - sciatica [r] [Contrast] [Anaes.] | MRI of the Lumbo-sacral spine |
| 63186 | Note: benefits are payable for each service included by subgroup 7 on three occasions only in any 12 month period magnetic resonance imaging performed under the professional supervision of an eligible provider at an eligible location where the patient is referred by a specialist or by a consultant physician - scan of one region or two contiguous regions of the spine for:- demyelinating [r] [nk] [contrast] [Anaes.] | MRI of the Cervical spine |
| 63201 | Magnetic resonance imaging performed under the professional supervision of an eligible provider at an eligible location where the patient is referred by a specialist or by a consultant physician - scan of three contiguous regions or two non contiguous regions of the spine for:- infection [r] [Contrast] [Anaes.] | MRI of the Lumbo-sacral spine |
| 63231 | - cervical radiculopathy [r] [Contrast] [Anaes.] | MRI of the Thoracic spine |
| 63271 | Magnetic resonance imaging performed under the professional supervision of an eligible provider at an eligible location where the patient is referred by a specialist or by a consultant physician - scan of cervical spine and brachial plexus for: - tumour [r] [Contrast] [Anaes.] | MRI of the Brachial plexus MRI of the Cervical spine |
| 63282 | magnetic resonance imaging performed under the professional supervision of an eligible provider at an eligible location where the patient is referred by a specialist or by a consultant physician - scan of cervical spine and brachial plexus for:- tumour [r] [nk] [contrast] [Anaes.] | MRI of the Brachial plexus |
| 63304 | - infection arising in bone or musculoskeletal system, this excludes infection arising in breast, prostate or rectum [r] [Contrast] [Anaes.] | MRI of the Forearm MRI of the Humerus MRI of the Leg MRI of the Thigh |
| 63322 | Magnetic resonance imaging performed under the professional supervision of an eligible provider at an eligible location where the patient is referred by a specialist or by a consultant physician - scan of musculoskeletal system for: - derangement of hip or its supporting structures [r] [Contrast] [Anaes.] | MRI of the Hip |

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| 63325 | - derangement of shoulder or its supporting structures [r] [Contrast] [Anaes.] | MRI of the Shoulder |
| 63328 | - derangement of knee or its supporting structures [r] [Contrast] [Anaes.] | MRI OF THE KNEE |
| 63331 | - derangement of ankle and/or foot or its supporting structures [r] [Contrast] [Anaes.] | MRI of the Ankle MRI of the FOOT&TOES |
| 63334 | - derangement of one or both temporomandibular joints or their supporting structures [r] [Contrast] [Anaes.] | MRI of the TEMPORAL BONE |
| 63337 | - derangement of wrist and/or hand or its supporting structures [r] [Contrast] [Anaes.] | MRI of the Hand & FINGERS MRI of the Wrist |
| 63340 | - derangement of elbow or its supporting structures [r] [Contrast] [Anaes.] | MRI of the Elbow |
| 63341 | magnetic resonance imaging performed under the professional supervision of an eligible provider at an eligible location where the patient is referred by a specialist or by a consultant physician - scan of musculoskeletal system for:- derangement of hip or its supporting structures [r] [nk] [contrast] [Anaes.] | MRI of the Hip |
| 63385 | Magnetic resonance imaging [including Magnetic Resonance Angiography if performed], performed under the professional supervision of an eligible provider at an eligible location where the patient is referred by a specialist or by a consultant physician - scan of cardiovascular system for: - congenital disease of the heart or a great vessel [r] [Contrast] [Anaes.] | MRI cardiac |
| 63404 | - obstruction of the superior vena cava, inferior vena cava or a major pelvic vein [r] [Contrast] [Anaes.] | MRI of Renal arteries angiogram |
| 63416 | Magnetic resonance angiography performed under the professional supervision of an eligible provider at an eligible location where the patient is referred by a specialist or by a consultant physician - scan of person under the age of 16 for: - the vasculature of limbs prior to limb or digit transfer surgery in congenital limb deficiency syndrome [r] [Contrast] [Anaes.] | MRI Peripheral angiogram |
| 63440 | Magnetic resonance imaging performed under the professional supervision of an eligible provider at an eligible location where the patient is referred by a specialist or by a consultant physician - scan of person under the age of 16 for: - pelvic or abdominal mass [r] [Contrast] [Anaes.] | Magnetic resonance cholangiopancreatography [MRCP] MRI of the Pelvis MRI OF THE PROSTATE |
| 63447 | Magnetic resonance imaging performed under the professional supervision of an eligible provider at an eligible location where the patient is referred by a specialist or by a consultant physician - scan of person under the age of 16 for:- pelvic or abdominal mass [r] [nk] [contrast] [Anaes.] | MRI of the Pelvis |

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| 63457 | <p>Magnetic resonance imaging performed under the professional supervision of an eligible provider at an eligible location where the patient is referred by a specialist or by a consultant physician and where: [a] a dedicated breast coil is used; and [b] the request for scan identifies that the person is asymptomatic and is less than 50 years of age; and [c] the request for scan identifies either: [i] that the patient is at high risk of developing breast cancer, due to 1 of the following: [a] 3 or more first or second degree relatives on the same side of the family diagnosed with breast or ovarian cancer; [b] 2 or more first or second degree relatives on the same side of the family diagnosed with breast or ovarian cancer, if any of the following applies to at least 1 of the relatives: - has been diagnosed with bilateral breast cancer; - had onset of breast cancer before the age of 40 years; - had onset of ovarian cancer before the age of 50 years; - has been diagnosed with breast and ovarian cancer, at the same time or at different times; - has ashkenazi jewish ancestry; - is a male relative who has been diagnosed with breast cancer; [c] 1 first or second degree relative diagnosed with breast cancer at age 45 years or younger, plus another first or second degree relative on the same side of the family with bone or soft tissue sarcoma at age 45 years or younger; or [ii] that genetic testing has identified the presence of a high risk breast cancer gene mutation. scan of both breasts for:- detection of cancer [r] note: benefits are payable on one occasion only in any 12 month period[nk] [Anaes.]</p> | MRI of the breast. |
| 63458 | <p>Magnetic resonance imaging performed under the professional supervision of an eligible provider at an eligible location where the patient is referred by a specialist or by a consultant physician and where:[a] a dedicated breast coil is used; and [b] the person has had an abnormality detected as a result of a service described in item 63464 or 63457 performed in the previous 12 monthsscan of both breasts for: - detection of cancer [r] note 1: benefits are payable on one occasion only in any 12 month periodnote 2: this item is intended for follow-up imaging of abnormalities diagnosed on a scan described by item 63464 or 63457[nk] [Anaes.]</p> | MRI of the breast |
| 63470 | <p>Magnetic resonance imaging performed under the professional supervision of an eligible provider at an eligible location where: [a] the patient is referred by a specialist or by a consultant physician and [b] the request for scan identifies that [i] a histological diagnosis of carcinoma of the cervix has been made and [ii] the patient has been diagnosed with cervical cancer at figo stage 1b or greater Scan of: - Pelvis for the staging of histologically diagnosed cervical cancer at figo stages 1b or greater [r] [Contrast] [Anaes.]</p> | MRI of the Pelvis |
| 63473 | <p>- Pelvis and upper abdomen, in a single examination, for the staging of histologically diagnosed cervical cancer at figo stages 1b or greater [r] [Contrast] [Anaes.]</p> | MRI of the Pelvis |
| 63507 | <p>Referral by a medical practitioner [excluding a specialist or consultant physician] for a scan of head for a patient under 16 years for any of the following: unexplained seizure[s] [r] [contrast] [anaes.]; or unexplained headache where significant pathology is suspected [r] [contrast] [anaes.]; or paranasal sinus pathology which has not responded to conservative therapy [r] [contrast] [anaes.]</p> | <p>MRI OF THE FACE [MANDIBLE/MAXILLA] MRI OF THE TONGUE/MOUTH</p> |
| 63513 | <p>referral by a medical practitioner [excluding a specialist or consultant physician] for a scan of knee for a patient under 16 years following radiographic examination for internal joint derangement [R] [Contrast] [Anaes.]</p> | MRI of the Leg |

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| 63514 | referral by a medical practitioner [excluding a specialist or consultant physician] for a scan of knee for a patient under 16 years following radiographic examination for internal joint derangement [R] [NK] [Contrast] [Anaes.] | MRI of the Knee |
| 63519 | referral by a medical practitioner [excluding a specialist or consultant physician] for a scan of elbow for a patient under 16 years following radiographic examination where a significant fracture or avulsion injury is suspected that will change management [R] [Contrast] [Anaes.] | MRI of the Elbow |
| 63520 | referral by a medical practitioner [excluding a specialist or consultant physician] for a scan of elbow for a patient under 16 years following radiographic examination where a significant fracture or avulsion injury is suspected that will change management [R] [NK] [Contrast] [Anaes.] | MRI of the Elbow |
| 63522 | referral by a medical practitioner [excluding a specialist or consultant physician] for a scan of wrist for a patient under 16 years following radiographic examination where scaphoid fracture is suspected [R] [Contrast] [Anaes.] | MRI of the Wrist |
| 63523 | referral by a medical practitioner [excluding a specialist or consultant physician] for a scan of wrist for a patient under 16 years following radiographic examination where scaphoid fracture is suspected [R] [NK] [Contrast] [Anaes.] | MRI of the Wrist |
| 63740 | MRI to evaluate small bowel Crohn s disease. medicare benefits are only payable for this item if the service is provided to patients:[a] evaluation of disease extent at time of initial diagnosis of Crohn s disease [b] evaluation of exacerbation/suspected complications of known Crohn s disease [c] evaluation of known or suspected Crohn s d isease in pregnancy [d] assessment of change to therapy in patients with small bowel Crohn s disease assessment of change to therapy can only be claimed once in a 12 month period. [R] [K] [Contrast] | MRI Fetal MRI of the Abdomen MRI urogram |

Specialty Imaging

Sub-classification: **Special investigation**

| | | |
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| 58706 | Intravenous pyelography, with or without preliminary plain films and with or without tomography - [r] | Intravenous urography / INTRAVENOUS PYELOGRAM [IVU/IVP] |
| 58715 | antegrade or retrograde pyelography, with or without preliminary plain films and with preparation and contrast injection - 1 side - [r] | Intravenous urography / INTRAVENOUS PYELOGRAM [IVU/IVP] |
| 58718 | Retrograde cystography or retrograde urethrography with or without preliminary plain films and with preparation and contrast injection - [R] [Anaes.] | Cysto uretro graphy [CUG/vcug] |
| 58909 | Barium or other opaque meal of 1 or more of pharynx, oesophagus, stomach or duodenum, with or without preliminary plain films of pharynx, chest or duodenum, not being a service associated with a service to which item 57939 or 57942 or 57945 applies - [R] | Barium meal |
| 58911 | Barium or other opaque meal of 1 or more of pharynx, oesophagus, stomach or duodenum, with or without preliminary plain films of pharynx, chest or duodenum, not being a service associated with a service to which item 57939, 57942, | Barium meal |

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| | 57945, 57950, 57953 or 57956 applies - [r] [nk] | | Barium swallow Water soluble contrast meal Water soluble contrast swallow |
| 58912 | Barium or other opaque meal of oesophagus, stomach, duodenum and follow through to colon, with or without screening of chest and with or without preliminary plain film [R] | Barium follow through | Water soluble contrast follow through |
| 58915 | Barium or other opaque meal, small bowel series only, with or without preliminary plain film [R] | SMALL BOWEL MEAL | |
| 58920 | Small bowel enema, barium or other opaque study of the small bowel, including duodenal intubation, with or without preliminary plain films, not being a service associated with a service to which item 30488 applies - [r] [nk] [Anaes.] | Barium enema | |
| 58921 | Opaque enema, with or without air contrast study and with or without preliminary plain films - [R] | Barium enema Opaque Enema Water soluble contrast enema | |
| 59712 | Hysterosalpingography, with without preliminary plain films and with preparation and contrast injection - [R] [Anaes.] | Hysterosalpingography [HSG] | |
| 59733 | Sialography, 1 side, with preparation and contrast injection, not being a service associated with a service to which item 57918 applies - [R] | Sialography | |
| 59739 | Sinogram or fistulogram, 1 or more regions, with or without preliminary plain films and with preparation and contrast injection - [R] | Fistulography sinography | |
| 59754 | Lymphangiography, one or both sides, with preliminary plain films and follow-up radiography and with preparation and contrast injection - [R] | Bilateral Venography | |
| 59755 | Lymphangiography, one or both sides, with preliminary plain films and follow-up radiography and with preparation and contrast injection - [r] [nk] | Unilateral venography | |

Specialty Imaging

Sub-classification: **Ultrasound**

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| 55005 | Head, ultrasound scan of, where:[a] the patient is referred by a medical practitioner for ultrasonic examination not being a service associated with a service to which an item in subgroups 2 or 3 of this group applies; and [b] the referring medical | Portable Transfontanelar ultrasound |
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| | practitioner is not a member of a group of practitioners of which the providing practitioner is a member [r] [nk] | Transfontanelar ultrasound |
| 55014 | abdomen, ultrasound scan of [including scan of urinary tract when performed], if:[a] the patient is referred by a medical practitioner or participating nurse practitioner; and[b] if the patient is referred by a medical practitioner the medical practitioner is not a member of a group of practitioners of which the providing practitioner is a member; and[c] if the patient is referred by a participating nurse practitioner the nurse practitioner does not have a business or financial arrangement with the providing practitioner; and[d] the service is not associated with a service to which an item in subgroup 2 or 3 applies; and[e] the service is not solely a transrectal ultrasonic examination of the prostate gland, bladder base and urethra, or any of those organs; and[f] within 24 hours of the service, a service mentioned in item 55017, 55038, 55067 or 55065 is not performed on the same patient by the providing practitioner [r] [nk] | ULTRASOUND EXAMINATION OF THE ABDOMEN |
| 55019 | Urinary tract, ultrasound scan of, but not being a service associated with the service to which an item in subgroup 4, applies, where the patient is not referred by a medical practitioner, not being a service associated with a service to which an item in subgroups 2 or 3 of this group applies [nr] [nk] | Scrotal ultrasound |
| 55033 | Neck, 1 or more structures of, ultrasound scan of, if the patient is not referred by a medical practitioner, not being a service associated with a service to which an item in Subgroup 2 or 3 applies [NR] | Neck ultrasound |
| 55059 | Breast, one, ultrasound scan of, where:[a] the patient is referred by a medical practitioner; and[b] the service is not associated with a service to which an item in subgroup 2 or 3 of this group applies; and[c] the referring medical practitioner is not a member of a group of practitioners of which the providing practitioner is a member [r] [nk] | BREAST UNILATERAL ULTRASOUND |
| 55061 | Breasts, both, ultrasound scan of, where:[a] the patient is referred by a medical practitioner; and[b] the service is not associated with a service to which an item in subgroup 2 or 3 of this group applies; and[c] the referring medical practitioner is not a member of a group of practitioners of which the providing practitioner is a member [r] [nk] | BREAST BILATERAL ULTRASOUND THYROID ULTRASOUND |
| 55063 | Urinary bladder, ultrasound scan of, by any or all approaches, if:[a] the patient is referred by a medical practitioner for ultrasonic examination; and[b] the medical practitioner is not a member of a group of practitioners of which the providing practitioner is a member; and[c] the service is not associated with a service to which an item in subgroup 2 or 3 applies; and[d] within 24 hours of the service, a service mentioned in item 11917, 55014, 55017, 55036, 55038, 55600, 55601, 55603, 55604, 55067 or 55065 is not performed on the same patient by the providing practitioner [r] [nk] | Pulse volume recorder [PVR] ultrasound |
| 55065 | Pelvis, ultrasound scan of, by any or all approaches, where: [a] the patient is referred by a medical practitioner; and [b] the ultrasound OF THE PELVIS service is not associated with a service to which an item in subgroup 2, or 3, applies; and [c] the referring practitioner is not a member of a group of practitioners of which the providing practitioner is a member; and [d] the service is not solely a transrectal ultrasonic examination of the prostate gland, bladder base and urethra, or any of those organs; and[e] the service is not performed with item 55014, 55017, 55036 or 55038 on the same patient within 24 hours [r][k] | |

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medical practitioner is not a member of a group of practitioners of which the providing practitioner is a member; and [e] if the patient is referred by a participating midwife - the referring midwife does not have a business or financial arrangement with the providing practitioner; and [f] the service is not performed in the same pregnancy as item 55709 [r]

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| 55800 | Hand or wrist, 1 or both sides, ultrasound scan of, where: [a] the service is not associated with a service to which an item in subgroup 2 or 3 applies; and [b] the patient is referred by a medical practitioner; and [c] the referring practitioner is not a member of a group of practitioners of which the providing practitioner is a member [r] | musculoskeletal ULTRASOUND [MUSCLES/JOINTS] |
| 55812 | Chest or abdominal wall, 1 or more areas, ultrasound scan of, where: [a] the service is not associated with a service to which an item in subgroups 2 or 3 of this group applies; and [b] the referring practitioner is not a member of a group of practitioners of which the providing practitioner is a member [r] | Chest ultrasound |
| 55844 | Assessment of a mass associated with the skin or subcutaneous structures, not being a part of the musculoskeletal system, 1 or more areas, ultrasound scan of, where: [a] the service is not associated with a service to which an item in Subgroups 2 or 3 of this Group applies; and [b] the referring practitioner is not a member of a group of practitioners of which the providing practitioner is a member [r] | HIGH DEFINITION ULTRASOUND SCAN [SMALL PARTS and soft tissues] |

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| Specialty | Internal Medicine | Sub-classification: | |
|-----------|---|---------------------|--------------------------------|
| 30084 | Diagnostic biopsy of bone marrow by trephine using percutaneous approach where the biopsy is sent for pathological examination [Anaes.] | | BONE MARROW BIOPSY AND TREFINE |
| 34527 | Central vein catheterisation by open technique, using subcutaneous tunnel with pump or access port as with central venous line catheter or other chemotherapy delivery device, including any associated percutaneous central vein catheterization, on a person 10 years of age or over [Anaes.] | | CENTRAL LINE INSERTION |
| 34528 | Central vein catheterisation by percutaneous technique, using subcutaneous tunnel with pump or access port as with central venous line catheter or other chemotherapy delivery device, on a person 10 years of age or over [Anaes.] | | CENTRAL LINE INSERTION |
| 34529 | Central vein catheterisation by open technique, using subcutaneous tunnel with pump or access port as with central venous line catheter or other chemotherapy delivery device, including any associated percutaneous central vein catheterization, on a person under 10 years of age [Anaes.] | | CENTRAL LINE INSERTION |
| 34530 | Central venous line, or other chemotherapy device, removal of, by open surgical procedure in the operating theatre of a hospital on a person 10 years of age or over [Anaes.] | | CENTRAL LINE INSERTION |
| 34534 | Central vein catheterisation by percutaneous technique, using subcutaneous tunnel with pump or access port as with central venous line catheter or other chemotherapy delivery device, on a person under 10 years of age [Anaes.] | | CENTRAL LINE INSERTION |
| 34538 | Central vein catheterisation by percutaneous technique, using subcutaneous tunnelled cuffed catheter or similar device, for the administration of haemodialysis parenteral or nutrition [Anaes.] | | CENTRAL LINE INSERTION |
| 35317 | Peripheral arterial or venous catheterisation with administration of thrombolytic or chemotherapeutic agents, by continuous infusion, using percutaneous approach, excluding associated radiological services or preparation, and excluding aftercare [not being a service associated with a service to which another item in Subgroup 11 of Group T1 or items 35319 or 35320 applies and not being a service associated with photodynamic therapy with verteporfin] [Anaes.] [Assist.] | | ARTERIAL LINE INSERTION |
| 35320 | Peripheral arterial or venous catheterisation with administration of thrombolytic or chemotherapeutic agents, by open exposure, excluding associated radiological services or preparation, and excluding aftercare [not being a service associated with a service to which another item in Subgroup 11 of Group T1 or items 35317 or 35319 applies and not being a service associated with photodynamic therapy with verteporfin] [Anaes.] [Assist.] | | ARTERIAL LINE INSERTION |
| 38359 | Pericardium, paracentesis of [excluding aftercare] [Anaes.] | | ECHO GUIDED PERICARDIOCENTESIS |
| 65084 | Bone marrow trephine biopsy - histopathological examination of sections of bone marrow and examination of aspirated material [including clot sections where necessary], including [if performed]: any test described in item 65060, 65066 or 65070 | | BONE MARROW BIOPSY AND TREFINE |

Specialty **Internal Medicine**

Sub-classification: **Cardiology**

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| 11600 | Blood pressure monitoring [central venous, pulmonary arterial, systemic arterial or cardiac intracavity], by indwelling catheter - once only for each type of pressure on any calendar day up to a maximum of 4 pressures [not being a service to which item 13876 applies and where not performed in association with the administration of general anaesthesia] | Blood pressure monitoring, internal catheter |
| 11602 | Investigation of venous reflux or obstruction in one or more limbs at rest by cw doppler or pulsed doppler involving examination at multiple sites along each limb using intermittent limb compression or valsava manoeuvres, to detect prograde and retrograde flow, other than a service associated with a service to which item 32500 or 32501 applies - hard copy trace and written report, the report component of which must be performed by a medical practitioner, maximum of two examinations in a 12 month period, not to be used in conjunction with sclerotherapy. | Doppler investigation of venus reflux or obstruction |
| 11604 | Investigation of chronic venous disease in the upper and lower extremities, one or more limbs, by plethysmography [excluding photoplethysmography] - examination, hard copy trace and written report, not being a service associated with a service to which item 32500 or 32501 applies. | Plethysmography investigation of venus reflux or obstruction |
| 11605 | Investigation of complex chronic lower limb reflux or obstruction, in one or more limbs, by infrared photoplethysmography, during and following exercise to determine surgical intervention or the conservative management of deep venous thrombotic disease, hard copy trace, calculation of 90% recovery time and written report, not being a service associated with a service to which item 32500 or 32501 applies. | Infrared photoplethysmography investigation of venus reflux or obstruction |
| 11610 | Measurement of ankle — brachial indices and arterial waveform analysis, measurement of posterior tibial and dorsalis pedis [or toe] and brachial arterial pressures bilaterally using doppler or plethysmographic techniques, the calculation of ankle [or toe] brachialsystolic pressure indices and assessment of arterial waveforms for the evaluation of lower extremity arterialdisease — examination, hard copy trace and report | Ankle brachal indices and arterial waveform analysis |
| 11611 | Measurement of wrist — brachial indices and arterial waveform analysis, measurement of radial and ulnar [or finger] and brachial arterial pressures bilaterally using doppler or plethysmographic techniques, the calculation of the wrist [or finger] brachial systolic pressure indices and assessment of arterial waveforms for the evaluation of upper extremity arterial disease — examination, hardcopy trace and report | Wrist brachal indices and arterial waveform analysis |
| 11612 | Exercise study for the evaluation of lower extremity arterial disease, measurement of posterior tibial and dorsalis pedis [or toe] and brachial arterial pressures bilaterally using doppler or plethysmographic techniques, the calculation of ankle [or toe] brachial systolic pressure indices for the evaluation of lower extremity arterial disease at rest and following exercise using a treadmill or bicycle ergometer or other such equipment where the exercise workload is quantifiably documented — examination and report | Exercise study |
| 11614 | Transcranial doppler, examination of the intracranial arterial circulation using CW Doppler or pulsed doppler with hard copy recording of waveforms, examination and report, not being a service associated with a service to which item 55280 of the Diagnostic Imaging Services Table applies | Transcranial Doppler |
| 11615 | Measurement of digital temperature, 1 or more digits, [unilateral or bilateral] and report, with hard copy recording of temperature before and for 10 minutes or more after cold stress testing | Measurement of digital temperature |

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| 11627 | Pulmonary artery pressure monitoring during open heart surgery, in a person under 12 years of age | Pulmonary artery pressure monitoring |
| 11700 | Twelve-lead electrocardiography, tracing and report | Electocardiography |
| 11701 | Twelve-lead electrocardiography, report only where the tracing has been forwarded to another medical practitioner, not in association with a consultation on the same occasion | Electocardiography |
| 11702 | Twelve-lead electrocardiography, tracing only | Electocardiography |
| 11708 | Continuous ECG recording of ambulatory patient for 12 or more hours [including resting EECG and the recording of parameters], not in association with ambulatory blood pressure monitoring, involving microprocessor based analysis equipment, interpretation and report of recordings by a specialist physician or consultant physician. Not being a service to which item 11709 applies. The changing of a tape or batteries does not constitute a separate service. where a recording is analysed and reported on and a decision is made to undertake a further period of monitoring, the second episode is regarded as a separate service. | Electocardiography |
| 11710 | Ambulatory ECG monitoring, patient activated, single or multiple event recording, utilising a looping memory recording device which is connected continuously to the patient for 12 hours or more and is capable of recording for at least 20 seconds prior to each activation and for 15 seconds after each activation, including transmission, analysis, interpretation and report — payable once in any 4 week period | Electocardiography |
| 11712 | Multi channel ECG monitoring and recording during exercise [motorised treadmill or cycle ergometer capable of quantifying external workload in watts] or pharmacological stress, involving the continuous attendance of a medical practitioner for not less than 20 minutes, with resting ECG, and with or without continuous blood pressure monitoring and the recording of other parameters, on premises equipped with mechanical respirator and defibrillator | Electocardiography |
| 11713 | Signal averaged ECG recording involving not more than 300 beats, using at least 3 leads with data acquisition at not less than 1000Hz of at least 100 QRS complexes, including analysis, interpretation and report of recording by a specialist physician or consultant physician | Electocardiography |
| 11715 | Blood dye — dilution indicator test | BLOOD DYE DILUTION INDICATOR TEST |
| 11718 | Implanted pacemaker testing involving electrocardiography, measurement of rate, width and amplitude of stimulus, including reprogramming when required, not being a service associated with a service to which item 11700, 11719, 11720, 11721, 11725 or 11726 applies | Implanted Pacemaker Testing |
| 11719 | Implanted pacemaker [including cardiac resynchronisation pacemaker] remote monitoring involving reviews [without patient attendance] or arrhythmias, lead and device parameters, if at least one remote review is provided in a 12 month period. Payable only once in any 12 month period | Implanted Pacemaker Monitoring |
| 11720 | Implanted pacemaker testing, with patient attendance, following detection of abnormality by remote monitoring involving electrocardiography, measurement of rate, width and amplitude of stimulus including reprogramming when required, not | Implanted Pacemaker Testing |

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being a service associated with a service to which item 11718 or 11721 applies.

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| 11721 | Implanted pacemaker testing of atrioventricular [AV] sequential, rate responsive, or antitachycardia pacemakers, including Implanted Pacemaker Testing reprogramming when required, not being a service associated with a service to which item 11700, 11718 11719, 11720, 11725 or 11726 applies | |
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| 11722 | Implanted ECG loop recording for the investigation of recurrent unexplained syncope if: [a] a diagnosis has not been achieved through all other available cardiac investigations; and [b] a neurogenic cause is not suspected; and [c] the patient to whom the service is provided does not have a structural heart defect associated with a high risk of sudden cardiac death; including reprogramming when required, retrieval of stored data, analysis, interpretation and report, not being a service to which item 38285 applies | Implanted ECT Loop Recording |
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| 11724 | Up-right tilt table testing for the investigation of syncope of suspected cardiothoracic origin, including blood pressure monitoring, continuous ECG monitoring and the recording of the parameters, and involving an established intravenous line and the continuous attendance of a specialist or consultant physician — on premises equipped with a mechanical respirator and defibrillator | Tilt table testing |
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| 11725 | Implanted defibrillator [including Cardiac Resynchronisation Defibrillator] remote monitoring involving reviews [without patient attendance] of arrhythmias, lead and device parameters, if at least 2 remote reviews are provided in a 12 month period. Payable only once in any 12 month period | Implanted defibrillator Monitoring |
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| 11726 | Implanted defibrillator testing with patient attendance following detection of abnormality by remote monitoring involving electrocardiography, measurement of rate, width and amplitude of stimulus, not being a service associated with a service to which item 11727 applies. | Implanted defibrillator Testing |
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| 11727 | Implanted defibrillator testing involving electrocardiography, assessment of pacing and sensing thresholds for pacing and defibrillation electrodes, download and interpretation of stored events and electrograms, including programming when required, not being a service associated with a service to which item 11700, 11718, 11719, 11720, 11721, 11725 or 11726 applies | Implanted defibrillator Testing |
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Specialty **Internal Medicine**

Sub-classification: **Cardiovascular**

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| 13309 | BLOOD TRANSFUSION with venesection and complete replacement of blood, using blood already collected | RED CELL EXCHANGE |
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| 13703 | Transfusion of blood, including collection from donor | INTRA-ARTERIAL BLOOD TRANSFUSION UNSPECIFIED EXCHANGE BLOOD TRANSFUSION UNSPECIFIED OTHER BLOOD TRANSFUSION |
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| 13706 | Transfusion of blood or bone marrow already collected TRANSFUSION OF BLOOD or bone marrow already collected | INTRAVENOUS BLOOD TRANSFUSION OF PACKED CELLS TRANSFUSION OF SERUM NEC |
| 13709 | Collection of blood for autologous transfusion or when homologous blood is required for immediate transfusion in emergency situation | INTRAVENOUS BLOOD TRANSFUSION OF PLATELETS |
| 13750 | Therapeutic haemapheresis for the removal of plasma or cellular [or both] elements of blood, utilising continuous or intermittent flow techniques; including morphological tests for cell counts and viability studies, if performed; continuous monitoring of vital signs, fluid balance, blood volume and other parameters with continuous registered nurse attendance under the supervision of a consultant physician, not being a service associated with a service to which item 13755 applies - each day | OTHER SPECIFIED BLOOD TRANSFUSION |
| 13755 | Donor haemapheresis for the collection of blood products for transfusion, utilising continuous or intermittent flow techniques; including morphological tests for cell counts and viability studies; continuous monitoring of vital signs, fluid balance, blood volume and other parameters; with continuous registered nurse attendance under the supervision of a consultant physician; not being a service associated with a service to which item 13750 applies - each day | TRANSFUSION OF PLASMA NEC |

Specialty **Internal Medicine**

Sub-classification: **Digestive GI**

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| 13100 | Supervision in hospital by a medical specialist of - haemodialysis, haemofiltration, haemoperfusion or peritoneal dialysis, including all professional attendances, where the total attendance time on the patient by the supervising medical specialist exceeds 45 minutes in 1 day | PERITONEAL DIALYSIS IN HOSPITAL |
| 13103 | Supervision in hospital by a medical specialist of - haemodialysis, haemofiltration, haemoperfusion or peritoneal dialysis, including all professional attendances, where the total attendance time on the patient by the supervising medical specialist does not exceed 45 minutes in 1 day | PERITONEAL DIALYSIS IN HOSPITAL |
| 13112 | Peritoneal dialysis, establishment of, by abdominal puncture and insertion of temporary catheter [including associated consultation] [Anaes.] | PERITONEAL DIALYSIS IN HOSPITAL |
| 30406 | Paracentesis abdominis [Anaes.] | ASCITIC TAP [PARACENTESIS] |
| 30409 | Liver biopsy, percutaneous [Anaes.] | LIVER BIOPSY ECHOGUIDED |
| 30411 | Liver biopsy by wedge excision when performed in association with another intraabdominal procedure [Anaes.] | LIVER BIOPSY by wedge incision |
| 30412 | Liver biopsy by core needle, when performed in conjunction with another intra-abdominal procedure [Anaes.] | LIVER BIOPSY by core needle |
| 30488 | Small bowel intubation as an independent procedure [Anaes.] | OTHER SPECIFIED THERAPEUTIC ENDOSCOPIC OPERATION ON DUODENUM |

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| | | UNSPECIFIED DIAGNOSTIC ENDOSCOPIC EXAMINATION OF JEJUNUM |
| 30569 | Endoscopic examination of small bowel with flexible endoscope passed at laparotomy, with or without biopsies [Anaes.] [Assist.] | OTHER SPECIFIED THERAPEUTIC ENDOSCOPIC OPERATION ON DUODENUM |
| 30680 | Balloon enteroscopy, examination of the small bowel [oral approach], with or without biopsy, without intraprocedural therapy, for diagnosis of patients with obscure gastrointestinal bleeding, not in association with another item in this subgroup [with the exception of item 30682 or 30686] the patient to whom the service is provided must: [i] have recurrent or persistent bleeding; and [ii] be anaemic or have active bleeding; and [iii] have had an upper gastrointestinal endoscopy and a colonoscopy performed which did not identify the cause of the bleeding. [Anaes.] | ENDOSCOPIC DILATION OF DUODENUM |
| 30684 | Balloon enteroscopy, examination of the small bowel [oral approach], with or without biopsy, with 1 or more of the following procedures [snare polypectomy, removal of foreign body, diathermy, heater probe, laser coagulation or argon plasma coagulation], for diagnosis and management of patients with obscure gastrointestinal bleeding, not in association with another item in this subgroup [with the exception of item 30682 or 30686]. The patient to whom the service is provided must: [i] have recurrent or persistent bleeding; and [ii] be anaemic or have active bleeding; and [iii] have had an upper gastrointestinal endoscopy and a colonoscopy performed which did not identify the cause of the bleeding. [Anaes.] | OTHER SPECIFIED DIAGNOSTIC ENDOSCOPIC EXAMINATION OF LOWER BOWEL USING FIBREOPTIC SIGMOIDOSCOPE |
| 30686 | Balloon enteroscopy, examination of the small bowel [anal approach], with or without biopsy, WITH 1 or more of the following procedures [snare polypectomy, removal of foreign body, diathermy, heater probe, laser coagulation or argon plasma coagulation], for diagnosis and management of patients with obscure gastrointestinal bleeding, not in association with another item in this subgroup [with the exception of item 30680 or 30684] | OTHER SPECIFIED THERAPEUTIC ENDOSCOPIC OPERATION ON LOWER BOWEL USING FIBROPTIC SIGMOIDOSCOPE |
| 32072 | Sigmoidoscopic examination [with rigid sigmoidoscope], with or without biopsy | DIAGNOSTIC ENDOSCOPIC EXAMINATION OF ILEUM AND BIOPSY OF LESION OF ILEUM |
| 32075 | Sigmoidoscopic examination [with rigid sigmoidoscope], under general anaesthesia, with or without biopsy, not being a service associated with a service to which another item in this Group applies [Anaes.] | DIAGNOSTIC FIBEROPTIC ENDOSCOPIC EXAMINATION OF COLON AND BIOPSY OF LESION OF COLON |
| 32084 | Flexible fibreoptic sigmoidoscopy or fibreoptic colonoscopy up to the hepatic flexure, with or without biopsy, other than a service associated with a service to which item 32090 or 32093 applies. [Anaes.] | DIAGNOSTIC ENDOSCOPIC EXAMINATION OF COLON AND BIOPSY OF LESION OF COLON FIBEROPTIC ENDOSCOPIC CAUTERIZATION OF BLOOD VESELS OF COLON |
| 32087 | Endoscopic examination of the colon up to the hepatic flexure by flexible fibreoptic sigmoidoscopy or fibreoptic colonoscopy for the removal of 1 or more polyps or the treatment of radiation proctitis, angiodysplasia or post-polypectomy bleeding by argon plasma coagulation, one or more of, other than a service associated with a service to which item 32090 | FIBEROPTIC ENDOSCOPIC DILATION OF COLON |

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| or 32093 applies [Anaes.] | | |
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| 32088 | Fibreoptic colonoscopy examination of the colon beyond the hepatic flexure with or without biopsy, following a positive faecal occult blood test for a participant registered on the national bowel cancer screening program. [Anaes.] | FIBEROPTIC ENDOSCOPIC SNARE RESECTION OF LESION OF COLON |
| 32089 | Endoscopic examination of the colon beyond the hepatic flexure by fibreoptic colonoscopy for the removal of 1 or more polyps, following a positive faecal occult blood test for a participant registered on the National Bowel Cancer Screening Program. [Anaes.] | ILEOSCOPY WITH TUMOURS REMOVAL AND HEMOSTASIS |
| 32090 | Fibreoptic colonoscopy examination of colon beyond the hepatic flexure with or without biopsy [Anaes.] | DIAGNOSTIC FIBEROPTIC ENDOSCOPIC EXAMINATION OF COLON AND BIOPSY OF LESION OF COLON |
| 32093 | endoscopic examination of the colon beyond the hepatic flexure by fibreoptic colonoscopy for the removal of 1 or more polyps, or the treatment of radiation proctitis, angiodysplasia or post-polypectomy bleeding by argon plasma coagulation, 1 or more of [Anaes.] | DIAGNOSTIC FIBEROPTIC ENDOSCOPIC EXAMINATION OF COLON AND BIOPSY OF LESION OF COLON |
| 32094 | Endoscopic dilatation of colorectal strictures including colonoscopy [Anaes.] | FIBEROPTIC ENDOSCOPIC DILATION OF COLON |
| 32095 | Endoscopic examination of small bowel with flexible endoscope passed by stoma, with or without biopsies [Anaes.] | OTHER SPECIFIED THERAPEUTIC ENDOSCOPIC OPERATION ON DUODENUM |
| 32099 | Rectal tumour of 5cm or less in diameter, per anal submucosal excision of [Anaes.] [Assist.] | Excision of rectal tumor |
| 32102 | Rectal tumour of greater than 5cm in diameter, indicated by pathological examination, per anal submucosal excision of [Anaes.] [Assist.] | Excision of rectal tumor |
| 32103 | rectal tumour, of less than 4 cm in diameter, per anal excision of, using rectoscopy incorporating either 3 dimensional or 2 dimensional optic viewing systems, if removal is unable to be performed during colonoscopy or by local excision, other than a service associated with a service to which item 32024, 32025, 32104 or 32106 applies [Anaes.] [Assist.] | RECTOSCOPY |
| 32104 | rectal tumour, of 4 cm or greater in diameter, per anal excision of, using rectoscopy incorporating either 3 dimensional or 2 dimensional optic viewing systems, if removal is unable to be performed during colonoscopy or by local excision, other than a service associated with a service to which item 32024, 32025, 32103 or 32106 applies [Anaes.] [Assist.] | Excision of rectal tumor |
| Specialty Internal Medicine | | Sub-classification: GI surgery |
| 30403 | Ventral, incisional, or recurrent hernia or burst abdomen, repair of with or without mesh [Anaes.] [Assist.] | INCISIONAL HERNIA MESH REPAIR [< 10CM] |
| 30405 | Ventral or incisional hernia, [excluding recurrent inguinal or femoral hernia], repair of, requiring muscle transposition, mesh hernioplasty or resection of strangulated bowel [Anaes.] [Assist.] | EPIGASTRIC HERNIA REPAIR |

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| 30406 | Paracentesis abdominis [Anaes.] | DRAINAGE OF ASCITES NEC |
| 30439 | Operative cholangiography or operative pancreatography or intra operative ultrasound of the biliary tract [including 1 or more examinations performed during the 1 operation] [Anaes.] [Assist.] | INTRAOPERATIVE CHOLENGIOGRAPHY |
| 30443 | Cholecystectomy [Anaes.] [Assist.] | OPEN CHOLECYSTECTOMY |
| 30445 | Laparoscopic cholecystectomy [Anaes.] [Assist.] | LAPAROSCOPIC CHOLECYSTECTOMY |
| 30446 | Laparoscopic cholecystectomy when procedure is completed by laparotomy [Anaes.] [Assist.] | CHOLEDOCO-ENTEROSTOMY |
| 30448 | Laparoscopic cholecystectomy, involving removal of common duct calculi via the cystic duct [Anaes.] [Assist.] | CHOLECYSTECTOMY |
| 30454 | Choledochotomy [with or without cholecystectomy], with or without removal of calculi [Anaes.] [Assist.] | CHOLEDOCHOTOMY |
| 30455 | Choledochotomy [with or without cholecystectomy], with removal of calculi including biliary intestinal anastomosis [Anaes.] [Assist.] | CHOLEDOCHOTOMY |
| 30472 | HEPATIC OR COMMON BILE DUCT, repair of, as the primary procedure subsequent to partial or total transection of bile duct or ducts | COMMON BILE DUCT EXPLORATION |
| 30473 | Oesophagoscopy [not being a service to which item 41816 or 41822 applies], gastroscopy, duodenoscopy or panendoscopy [1 or more such procedures], with or without biopsy, not being a service associated with a service to which item 30478 or 30479 applies. [Anaes.] | URGENT HEMOSTASIS OF GASTRIC BLEEDING |
| 30475 | Endoscopic dilatation of stricture of upper gastrointestinal tract [including the use of imaging intensification where clinically indicated] [Anaes.] | OESOPHAGEAL RECONSTRUCTION |
| 30478 | Oesophagoscopy [other than a service to which item 41816, 41822 or 41825 applies], gastroscopy, duodenoscopy, panendoscopy or push enteroscopy, one or more such procedures, if: [a] the procedures are performed using one or more of the following endoscopic procedures: [i] polypectomy; [ii] sclerosing or adrenalin injections; [iii] banding; [iv] endoscopic clips; [v] haemostatic powders; [vi] diathermy; [vii] argon plasma coagulation; and [b] the procedures are for the treatment of one or more of the following: [i] upper gastrointestinal tract bleeding; [ii] polyps; [iii] removal of foreign body; [iv] oesophageal or gastric varices; [v] peptic ulcers; [vi] neoplasia; [vii] benign vascular lesions; [viii] strictures of the gastrointestinal tract; [ix] tumorous overgrowth through or over oesophageal stents; other than a service associated with a service to which item 30473 or 30479 applies [Anaes.] | OESOPHAGOSCOPY |
| 30496 | Vagotomy, truncal or selective, with or without pyloroplasty or gastroenterostomy [Anaes.] [Assist.] | GASTROENTEROSTOMY |
| 30506 | Bleeding peptic ulcer, control of, involving suture of bleeding point or wedge excision, and vagotomy and pyloroplasty or gastroenterostomy [Anaes.] [Assist.] | Bleeding peptic ulcer control |

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| 30515 | Gastroenterostomy [including gastroduodenostomy] or enterocolostomy or enteroenterostomy not being a service to which any of items 31569 to 31581 apply [Anaes.] [Assist.] | GASTROENTEROSTOMY |
| 30517 | Gastroenterostomy, pyloroplasty or gastroduodenostomy, reconstruction of [Anaes.] [Assist.] | GASTROENTEROSTOMY reconsturction |
| 30571 | Appendicectomy, not being a service to which item 30574 applies on a person 10 years of age or over [Anaes.] [Assist.] | APPENDECTOMY |
| 30572 | Laparoscopic appendicectomy, on a person 10 years of age or over [Anaes.] [Assist.] | APPENDECTOMY |
| 30574 | Appendicectomy, when performed in conjunction with any other intraabdominal procedure through the same incision [Anaes.] | APPENDECTOMY |
| 30600 | Diaphragmatic hernia, traumatic, repair of [Anaes.] [Assist.] | DIAPHRAGMATIC HERNIA MESH REPAIR |
| 30601 | Diaphragmatic hernia, congenital repair of, by thoracic or abdominal approach, not being a service to which any of items 31569 to 31581 apply, on a person 10 years of age or over [Anaes.] [Assist.] | EPIGASTRIC HERNIA REPAIR |
| 30609 | Femoral or inguinal hernia, laparoscopic repair of, not being a service associated with a service to which item 30614 applies [Anaes.] [Assist.] | INGUINAL HERNIORRAPHY |
| 30614 | Femoral or inguinal hernia or infantile hydrocele, repair of, not being a service to which item 30403 or 30615 applies, on a person 10 years of age or over [Anaes.] [Assist.] | INGUINAL HERNIOPLASTY |
| 30621 | Repair of symptomatic umbilical, epigastric or linea alba hernia requiring mesh or other fromal repair of, in a person 10 years of age or over, other than a service to which item 30403 or 30405 applies [Anaes.] [Assist.] | EPIGASTRIC HERNIA REPAIR |
| 30686 | Balloon enteroscopy, examination of the small bowel [anal approach], with or without biopsy, WITH 1 or more of the following procedures [snare polypectomy, removal of foreign body, diathermy, heater probe, laser coagulation or argon plasma coagulation], for diagnosis and management of patients with obscure gastrointestinal bleeding, not in association with another item in this subgroup [with the exception of item 30680 or 30684] | RECTAL FOREIGN BODY REMOVAL |
| 31456 | Gastroscopy and insertion of nasogastric or nasoenteral feeding tube, where blind insertion of the feeding tube has failed or is inappropriate due to the patient's medical condition [Anaes.] | PERCUTANEOUS FEEDING GASTROSTOMY TUBE INSERTION |
| 31460 | Percutaneous gastrostomy tube, jejunal extension to, including any associated imaging services [Anaes.] [Assist.] | PERCUTANEOUS GASTROSTOMY TUB |
| 31462 | Operative feeding jejunostomy performed in conjunction with major upper gastro-intestinal resection [Anaes.] [Assist.] | OPERATIVE FEEDING JEJUNOSTOMY |
| 32132 | Haemorrhoids or rectal prolapse sclerotherapy for [Anaes.] | HEMMORRHOIDS EXCISION TREATMENT |
| 32135 | Haemorrhoids or rectal prolapse rubber band ligation of, with or without sclerotherapy, cryotherapy or infra red therapy for [Anaes.] | HEMMORRHOIDS EXCISION TREATMENT |

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| 32138 | Haemorrhoidectomy including excision of anal skin tags when performed [Anaes.] | HEMMORRHOIDS EXCISION TREATMENT |
| 32139 | Haemorrhoidectomy involving third or fourth degree haemorrhoids, including excision of anal skin tags when performed [Anaes.] [Assist.] | HEMMORRHOIDS EXCISION TREATMENT |
| 32153 | Anus, dilatation of, under general anaesthesia, with or without disimpaction of faeces, not being a service associated with a service to which another item in this Group applies [Anaes.] | MANUAL EVACUATION OF FEACES |
| 32159 | Anal fistula, treatment of, by excision or by insertion of a seton, or by a combination of both procedures, involving the lower half of the anal sphincter mechanism [Anaes.] [Assist.] | ANAL FISTULECTOMY |
| 32162 | Anal fistula, treatment of, by excision or by insertion of a seton, or by a combination of both procedures, involving the upper half of the anal sphincter mechanism [Anaes.] [Assist.] | ANAL FISTULECTOMY |
| 32165 | Anal fistula, repair of by mucosal flap advancement [Anaes.] [Assist.] | ANAL FISTULECTOMY |
| 32166 | Anal fistula - readjustment of Seton [Anaes.] | ANAL FISTULECTOMY |
| 32174 | Intra-anal, perianal or ischio-rectal abscess, drainage of [excluding aftercare] [Anaes.] | PERIANAL ABCESS DRAINAGE |
| 32175 | Intra-anal, perianal or ischio-rectal abscess, draining of, undertaken in the operating theatre of a hospital [excluding aftercare] [Anaes.] | INTRA-ANAL, PERIANAL or ISCHIO-RECTAL ABCESS, drainage |
| 41828 | Oesophageal stricture, dilatation of, without oesophagoscopy [Anaes.] | OESOPHAGEAL DILATATION |
| 43805 | Umbilical, epigastric or linea alba hernia, repair of, on a person under 10 years of age [Anaes.] | UMBILICAL HERNIA REPAIR |
| 43837 | Congenital diaphragmatic hernia, repair by thoracic or abdominal approach, with diagnosis confirmed in the first 24 hours of life [Anaes.] [Assist.] | EPIGASTRIC HERNIA REPAIR |
| 43840 | Congenital diaphragmatic hernia, repair by thoracic or abdominal approach, diagnosed after the first day of life and before 20 days of age [Anaes.] [Assist.] | EPIGASTRIC HERNIA REPAIR |
| 43841 | Femoral or inguinal hernia or infantile hydrocele, repair of, not being a service to which item 30403 or 43835 applies, on a person under 10 years of age [Anaes.] [Assist.] | EPIGASTRIC HERNIA REPAIR |
| 44108 | Inguinal hernia repair at age less than 12 months [Anaes.] [Assist.] | EPIGASTRIC HERNIA REPAIR |
| 44111 | Obstructed or strangulated inguinal hernia, repair, at age, less than 12 months including orchidopexy when performed [Anaes.] [Assist.] | EPIGASTRIC HERNIA REPAIR |
| 44114 | Inguinal hernia repair at age less than 12 months when orchidopexy also required [Anaes.] [Assist.] | EPIGASTRIC HERNIA REPAIR |

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Specialty **Internal Medicine**

Sub-classification: **Respiratory**

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| 13306 | Blood transfusion with venesection and complete replacement of blood, including collection from donor | OTHER SPECIFIED EXCHANGE BLOOD TRANSFUSION |
| 13309 | Blood transfusion with venesection and complete replacement of blood, using blood already collected | OTHER SPECIFIED EXCHANGE BLOOD TRANSFUSION |
| 13703 | Transfusion of blood, including collection from donor | OTHER SPECIFIED EXCHANGE BLOOD TRANSFUSION |
| 30090 | diagnostic biopsy of pleura, percutaneous 1 or more biopsies on any 1 occasion, where the biopsy is sent for pathological examination [Anaes.] | OPEN LUNG BIOPSY |
| 30094 | Diagnostic percutaneous aspiration biopsy of deep organ using interventional imaging techniques - but not including imaging, where the biopsy is sent for pathological examination [Anaes.] | PLEURAL BIOPSY ECHO GUIDED |
| 38415 | Empyema, radical operation for, involving resection of rib [Anaes.] [Assist.] | DRAINAGE OF PYOTHORAX WITH FISTULA |
| 38421 | Thoracotomy, with pulmonary decortication [Anaes.] [Assist.] | LUNG DECORTICATION |
| 38424 | Thoracotomy, with pleurectomy or pleurodesis, or enucleation of hydatid cysts [Anaes.] [Assist.] | DRAINING PYOTHORAX WITHOUT FISTULA |
| 38438 | Pneumonectomy or lobectomy or segmentectomy not being a service associated with a service to which Item 38418 applies [Anaes.] [Assist.] | LUNG LOBECTOMY |
| 38440 | Lung, wedge resection of [Anaes.] [Assist.] | OPEN LUNG BIOPSY |
| 38441 | Radical lobectomy or pneumonectomy including resection of chest wall, diaphragm, pericardium, or formal mediastinal node dissection [Anaes.] [Assist.] | OPEN LUNG BIOPSY |
| 38800 | Thoracic cavity, aspiration of, for diagnostic purposes, not being a service associated with a service to which item 38803 applies | ASPIRATION OF PLEURAL CAVITY |
| 38803 | Thoracic cavity, aspiration of, with therapeutic drainage [paracentesis], with or without diagnostic sample | DRAINAGE OF PLEURAL CAVITY NEC PNEUMOTHORAX DRAINAGE WITH NEEDLE |
| 38806 | Intercostal drain, insertion of, not involving resection of rib [excluding aftercare] [Anaes.] | INSERTION OF TUBE DRAIN INTO PLEURAL CAVITY |
| 38809 | Intercostal drain, insertion of, with pleurodesis and not involving resection of rib [excluding aftercare] [Anaes.] | OTHER SPECIFIED PUNCTURE OF PLEURA |

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| | | PLEURODESIS PNEUMOTHORAX DRAINAGE TUBE INSERTION |
| 38812 | Percutaneous needle biopsy of lung [Anaes.] | OPEN LUNG BIOPSY |
| 41773 | Pharyngeal pouch, endoscopic resection of [Dohlman`s operation] [Anaes.] [Assist.] | ENDOSCOPIC SNARE RESECTION OF LESION OF LOWER RESPIRATORY TRACT USING RIGID BRONCHOSCOPE |
| 41889 | Bronchoscopy, as an independent procedure [Anaes.] | DIAGNOSTIC FIBROPTIC ENDOSCOPIC EXAMINATION OF LOWER RESPIRATORY TRACT AND BRUSH CYTOLOGY OF LESION OF LOWER RESPIRATORY TRACT |
| 41892 | Bronchoscopy with 1 or more endobronchial biopsies or other diagnostic or therapeutic procedures [Anaes.] | DIAGNOSTIC ENDOSCOPIC EXAMINATION OF LOWER RESPIRATORY TRACT AND BIOPSY OF LESION OF LOWER RESPIRATORY TRACT USING RIGID BRONCHOSCOPE DIAGNOSTIC FIBROPTIC ENDOSCOPIC EXAMINATION OF LOWER RESPIRATORY TRACT AND BIOPSY OF LESION OF LOWER RESPIRATORY TRACT FIBROPTIC ENDOSCOPIC ASPIRATION OF LOWER RESPIRATORY TRACT FIBROPTIC ENDOSCOPIC DESTRUCTION OF LESION OF LOWER RESPIRATORY TRACT NEC FIBROPTIC ENDOSCOPIC IRRIGATION OF LOWER RESPIRATORY TRACT FIBROPTIC ENDOSCOPIC PHOTODYNAMIC THERAPY OF LESION OF LOWER RESPIRATORY TRACT OTHER SPECIFIED THERAPEUTIC ENDOSCOPIC OPERATIONS ON LOWER RESPIRATORY TRACT USING RIGID BRONCHOSCOPE |

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| | | OTHER SPECIFIED THERAPEUTIC FIBROPTIC ENDOSCOPIC OPERATIONS ON LOWER RESPIRATORY TRACT UNSPECIFIED DIAGNOSTIC ENDOSCOPIC EXAMINATION OF LOWER RESPIRATORY TRACT USING RIGID BRONCHOSCOPE UNSPECIFIED DIAGNOSTIC FIBROPTIC ENDOSCOPIC EXAMINATION OF LOWER RESPIRATORY TRACT UNSPECIFIED THERAPEUTIC ENDOSCOPIC OPERATIONS ON LOWER RESPIRATORY TRACT USING RIGID BRONCHOSCOPE UNSPECIFIED THERAPEUTIC FIBROPTIC ENDOSCOPIC OPERATIONS ON LOWER RESPIRATORY TRACT |
| 41895 | Bronchus, removal of foreign body in [Anaes.] [Assist.] | FIBROPTIC ENDOSCOPIC REMOVAL OF FOREIGN BODY FROM LOWER RESPIRATORY TRACT |
| 41898 | Fibroptic bronchoscopy with 1 or more transbronchial lung biopsies, with or without bronchial or bronchoalveolar lavage, with or without the use of interventional imaging [Anaes.] [Assist.] | DIAGNOSTIC FIBROPTIC ENDOSCOPIC EXAMINATION OF LOWER RESPIRATORY TRACT AND LAVAGE OF LESION OF LOWER RESPIRATORY TRACT DIAGNOSTIC FIBROPTIC ENDOSCOPIC EXAMINATION OF LOWER RESPIRATORY TRACT WITH BIOPSY, LAVAGE AND BRUSH CYTOLOGY OF LESION OF LOWER RESPIRATORY TRACT |
| 41901 | Endoscopic laser resection of endobronchial tumours for relief of obstruction including any associated endoscopic procedures [Anaes.] [Assist.] | OTHER SPECIFIED DIAGNOSTIC ENDOSCOPIC EXAMINATION OF LOWER RESPIRATORY TRACT USING RIGID BRONCHOSCOPE |
| 41904 | Bronchoscopy with dilatation of tracheal stricture [Anaes.] | OTHER SPECIFIED DIAGNOSTIC FIBROPTIC ENDOSCOPIC EXAMINATION OF LOWER RESPIRATORY TRACT |

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| Specialty Lab | Sub-classification: | |
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| L1007-4 Direct antiglobulin test.poly specific reagent [Presence] on Red Blood Cells | | Direct Coombs antiglobulin test |
| L10886- Prostate Specific Ag Free [Mass/volume] in Serum or Plasma | | PSA [Prostate Specific Antigen] Free |
| L11067- Bleeding time | | Bleeding time |
| L14357- Microscopic observation [Identifier] in Cerebral spinal fluid by Gram stain | | Punction fluid stained [lumbar/CSF] - MCS |
| L14358- Microscopic observation [Identifier] in Aspirate by Gram stain | | Punction fluid stained [aspirate] - MCS |
| L14359- Microscopic observation [Identifier] in Peritoneal fluid by Gram stain | | Punction fluid stained [ascites peritoneal] - MCS |
| L15210- Thyroglobulin Ab [Presence] in Serum | | Anti-Thyroglobulin |
| L1747-5 Albumin [Mass/volume] in Body fluid | | Albumin Albuminuria |
| L1751-7 Albumin [Mass/volume] in Serum or Plasma | | Albuminemia |
| L17532- Rheumatoid arthritis nuclear Ab [Presence] in Serum | | Arthritest |
| L1795-4 Amylase [Enzymatic activity/volume] in Body fluid | | Amylase in urine |
| L1798-8 Amylase [Enzymatic activity/volume] in Serum or Plasma | | Amylase in serum or plasma |
| L1834-1 Alpha-1-Fetoprotein [Mass/volume] in Serum or Plasma | | Alpha foeto protein [AFP] |
| L1920-8 Aspartate aminotransferase [Enzymatic activity/volume] in Serum or Plasma | | Aspertate aminotransferase [AST] |
| L1968-7 Bilirubin.direct [Mass/volume] in Serum or Plasma | | Direct bilirubin |
| L2039-6 Carcinoembryonic Ag [Mass/volume] in Serum or Plasma | | ECA [Embryonic Carcino Antigen] |
| L20420- Prostatic acid phosphatase [Mass/volume] in Serum | | Acid phosphatase |

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| L2093-3 Cholesterol [Mass/volume] in Serum or Plasma | Cholesterol |
| L2111-3 Choriogonadotropin.beta subunit [Moles/volume] in Serum or Plasma | Dosage of beta-HCG |
| L2160-0 Creatinine [Mass/volume] in Serum or Plasma | Creatinine in serum |
| L2161-8 Creatinine [Mass/volume] in Urine | Creatinine in urine |
| L22310- Helicobacter pylori Ab [Presence] in Serum | Helicobacteria Pyroli |
| L2324-2 Gamma glutamyl transferase [Enzymatic activity/volume] in Serum or Plasma | Gamma GT |
| L2857-1 Prostate specific Ag [Mass/volume] in Serum or Plasma | PSA [Prostate Specific Antigen] Total |
| L3107-0 Urobilinogen [Mass/volume] in Urine | Urobilinogen |
| L3184-9 Activated clotting time [ACT] of Blood by Coagulation assay | Clotting time [ACT] |
| L32673- Creatine kinase.MB [Enzymatic activity/volume] in Serum or Plasma | Creatine kinase-muscle/brain [CK-MB] test in serum or plasma |
| L35558- Cholinesterase panel [Enzymatic activity/volume] - Blood | Cholinesterase |
| L38230- Calcium.ionized [Mass/volume] in Blood | Ca+[Total or calcium ionised] |
| L38483- Creatinine [Mass/volume] in Blood | Creatinine clearance Creatinine in blood |
| L43799- Choriogonadotropin.beta subunit [Presence] in Unspecified specimen | Beta-HCG Dosage |
| L45194- Choriogonadotropin.intact+Beta subunit [Units/volume] in Serum or Plasma | Beta-HCG qualitatif |
| L48802- Alpha-1-Fetoprotein panel - Serum or Plasma | AFP [Alpha- feto protein] |
| L49551- Creatine kinase.MB [Mass/volume] in Blood | Creatine kinase-muscle/brain [CK-MB] test in blood |
| L51623- Spermatozoa [./volume] in Semen --post vasectomy | Sperm analysis |

Rwanda Medical Procedure Code Database

RMP Code Detailed Nomenclature

Mapped to local nomenclature

| | |
|---|--|
| L6462-6 Bacteria identified in Wound by Culture | Bacteria identified in pus by culture |
| L666-8 Microscopic observation [Identifier] in Unspecified specimen by India ink prep | Chinese Ink stain |
| L6768-6 Alkaline phosphatase [Enzymatic activity/volume] in Serum or Plasma | Alkaline phosphatase [ALP] |
| L882-1 ABO and Rh group [Type] in Blood | ABO/ Rh grouping |
| L890-4 Blood group antibody screen [Presence] in Serum or Plasma | Blood group +Rhesus |
| Specialty Lab | Sub-classification: Acide urique |
| L32343- Urate [Moles/volume] in Unspecified specimen | Uric acid |
| Specialty Lab | Sub-classification: Antibiogramme |
| L29576- Bacterial susceptibility panel | Antibiogram [bacterial susceptibility panel] |
| Specialty Lab | Sub-classification: B.A.B. |
| L12328- Beta blockers [Identifier] in Urine | Beta blocker urine test [BAB] |
| Specialty Lab | Sub-classification: Bacteriology |
| L10526- Microscopic observation [Identifier] in Sputum by Cyto stain | Sputum for stain for mycobacteria |
| L14361- Microscopic observation [Identifier] in Vaginal fluid by Gram stain | Vaginal swab |
| L1751-7 Albumin [Mass/volume] in Serum or Plasma | ALBUMINURIA |
| L29533- Cryptococcus sp Ag [Presence] in Unspecified specimen | Cryptococcus [blood or other liquids] |
| L31788- Cryptococcus sp Ag [Presence] in Cerebral spinal fluid | CSF Ag crypto CSF Ag soluble / latex Ag |

Rwanda Medical Procedure Code Database

RMP Code Detailed Nomenclature

Mapped to local nomenclature

| | |
|---|--|
| L31939- Pneumocystis jiroveci Ag [Presence] in Sputum | Sputum Pneumocystis |
| L34564- Cell count and Differential panel - Cerebral spinal fluid | CSF [CEREBRAL SPINAL FLUID] /DIRECT CSF numeration LUMBAR PUNCTURE FLUID/DIRECT [CSF] |
| L43409- Bacteria identified in Isolate by Culture | BK Culture [Pleural fluid, Ascitic fluid, sputum, Bronchoalveolar fluid, other fluids] |
| L53293- Urinalysis microscopic panel [./area] - Urine sediment by Automated count | URINE/SEDIMENT |
| L53912- Microscopic observation [Identifier] in Body fluid by Rhodamine-auramine fluorochrome stain | Microscopic observation of body fluid with Rhodamine-Auramine stain |
| L5767-9 Appearance of Urine | Appearance of urine |
| L600-7 Bacteria identified in Blood by Culture | Blood Culture & Antibigram |
| L630-4 Bacteria identified in Urine by Culture | urinoculture UROCULTURE |
| L638-7 Microscopic observation [Identifier] in Cerebral spinal fluid by India ink prep | CSF India ink [crypto] |
| L6521-9 Pneumocystis jiroveci DNA [Presence] in Unspecified specimen by NAA with probe detection | Pneumocystis |
| L69742- CBC W Differential panel, method unspecified - Blood | Differential Leucocyte Count [Pleural fluid, Ascitic fluid, Pericardial fluid, Peritoneal fluid, Synovial fluid, other fluids] |

Specialty **Lab**

Sub-classification: **Bacteriology-sample**

| | |
|--|---------------|
| L44023- Bacteria [Presence] in Vaginal fluid by Wet preparation | Vaginal Swab |
| L70161- Chlamydia trachomatis and Neisseria gonorrhoeae rRNA panel - Urine by NAA with probe detection | Urethral Swab |

Specialty **Lab**

Sub-classification: **Bicarbonate:HC03-**

Rwanda Medical Procedure Code Database

RMP Code Detailed Nomenclature

Mapped to local nomenclature

| | |
|---|---|
| L22735- Bicarbonate [Moles/volume] in Unspecified specimen | Bicarbonate:HC03- |
| Specialty Lab | Sub-classification: Bilirubine indirecte |
| L29210- Bilirubin.indirect [Mass/volume] in Body fluid | Indirect bilirubin in body fluid |
| Specialty Lab | Sub-classification: Biochemistry |
| L14682- Creatinine [Moles/volume] in Serum or Plasma | CREATININE |
| L14803- Lactate dehydrogenase [Enzymatic activity/volume] in Body fluid by Lactate to pyruvate reaction | LDH pleural fluid |
| L15212- Lipase [Enzymatic activity/volume] in Body fluid | Lipase in body fluid |
| L1558-6 Fasting glucose [Mass/volume] in Serum or Plasma | Fasting Blood sugar |
| L16859- Fibrinogen [Presence] in Platelet poor plasma | FIBRINOGEN |
| L1742-6 Alanine aminotransferase [Enzymatic activity/volume] in Serum or Plasma | Alanine Aminotransferase [ALT] SGPT- ALAT |
| L17856- Hemoglobin A1c/Hemoglobin.total in Blood by HPLC | HB Glycae Total [A1C] HB Glycae Total [A1C] |
| L17862- Calcium [Mass/volume] in Urine | Calcium urinary |
| L19123- Magnesium [Mass/volume] in Serum or Plasma | Magnesium in serum or plasma |
| L19124- Magnesium [Mass/volume] in Urine | Magnesium in urine Urinary magnesium |
| L1974-5 Bilirubin.total [Mass/volume] in Body fluid | Total bilirubin in body fluid |
| L1975-2 Bilirubin.total [Mass/volume] in Serum or Plasma | Total Bilirubin in serum or plasma |

Rwanda Medical Procedure Code Database

RMP Code Detailed Nomenclature

Mapped to local nomenclature

| | |
|--|--|
| L1992-7 Calcitonin [Mass/volume] in Serum or Plasma | Calcitonin |
| L20420- Prostatic acid phosphatase [Mass/volume] in Serum | Acid Phosphatase total PAP [Prostatic Acid Phosphatase] Total |
| L2069-3 Chloride [Moles/volume] in Blood | Chloride [CL-]- blood |
| L2075-0 Chloride [Moles/volume] in Serum or Plasma | Chloride [CL-] serum |
| L2078-4 Chloride [Moles/volume] in Urine | Chloride [CL-] urine |
| L2085-9 Cholesterol in HDL [Mass/volume] in Serum or Plasma | HDL-cholesterol |
| L2089-1 Cholesterol in LDL [Mass/volume] in Serum or Plasma | LDL-cholesterol |
| L2093-3 Cholesterol [Mass/volume] in Serum or Plasma | Total Cholesterol |
| L2106-3 Choriogonadotropin [pregnancy test] [Presence] in Urine | Pregnancy test [urine] Pregnancy test in urine |
| L2132-9 Cobalamin [Vitamin B12] [Mass/volume] in Serum or Plasma | Vit B12 |
| L22738- Urea [Moles/volume] in Unspecified specimen | Urea |
| L2339-0 Glucose [Mass/volume] in Blood | Blood sugar Glucose [blood sugar] |
| L2344-0 Glucose [Mass/volume] in Body fluid | Glucose in puncture fluid |
| L2349-9 Glucose [Presence] in Urine | Glucose in urine Glucosuria |
| L24338- Gas panel - Blood | Blood gas Base excess Blood gas HCO3 |

Rwanda Medical Procedure Code Database

RMP Code Detailed Nomenclature

Mapped to local nomenclature

| | |
|---|---|
| | Blood gas pCO2 Blood gas pH Blood gas pO2 Blood gas Saturation O2 CO2 total |
| L24351- Protein electrophoresis panel - Serum or Plasma | Protein electrophoresis |
| L24353- Glucose tolerance 2 hours gestational panel - Urine and Serum or Plasma | Glucose - Tolerance test |
| L24356- Urinalysis complete panel - Urine | Full urine chemistry Urinalysis Urine test [ECBU, direct examp, gram, culture, antibiogram] |
| L2498-4 Iron [Mass/volume] in Serum or Plasma | Iron Iron |
| L2500-7 Iron binding capacity [Mass/volume] in Serum or Plasma | Total iron binding capacity [TIBC] test |
| L27088- Folate [Presence] in Blood | Folic acid |
| L27344- Aspartate aminotransferase [Presence] in Serum or Plasma | serum glutamic-oxaloacetic transaminase [SGOT - ASAT] |
| L2774-8 Phosphate [Mass/volume] in Blood | Phosphorus |
| L2777-1 Phosphate [Mass/volume] in Serum or Plasma | Phosphate in serum or plasma |
| L2778-9 Phosphate [Mass/volume] in Urine | Phosphate in urine Urinary phosphorus |
| L2828-2 Potassium [Moles/volume] in Urine | Potassium urinary |

Rwanda Medical Procedure Code Database

RMP Code Detailed Nomenclature

Mapped to local nomenclature

| | |
|---|--|
| | Potassium [K+] in urine |
| L2842-3 Prolactin [Mass/volume] in Serum or Plasma | Prolactin |
| L2881-1 Protein [Mass/volume] in Body fluid | Total Proteins [other body fluids] |
| L2885-2 Protein [Mass/volume] in Serum or Plasma | Protein in serum or plasma [Proteinemia] Total protein in serum or plasma |
| L2887-8 Protein [Presence] in Urine | Protein total urinary |
| L2951-2 Sodium [Moles/volume] in Serum or Plasma | NA+ sodium Sodium [Na+] in serum |
| L2955-3 Sodium [Moles/volume] in Urine | Sodium [Na+] in urine |
| L2965-2 Specific gravity of Urine | Specific gravity/Urinary Density |
| L3024-7 Thyroxine [T4] free [Mass/volume] in Serum or Plasma | Free T4 |
| L3034-6 Transferrin [Mass/volume] in Serum or Plasma | Transferrin/Siderophilin |
| L3040-3 Lipase [Enzymatic activity/volume] in Serum or Plasma | Lipase in serum or plasma |
| L3043-7 Triglyceride [Mass/volume] in Blood | Triglycides |
| L3051-0 Triiodothyronine [T3] Free [Mass/volume] in Serum or Plasma | Free T3 |
| L3084-1 Urate [Mass/volume] in Serum or Plasma | URIC ACID |
| L3086-6 Urate [Mass/volume] in Urine | Clearance Urea |
| L32331- Myoglobin [Presence] in Serum or Plasma | Myoglobine |
| L3243-3 Thrombin time | Thrombin time [TT] |

Rwanda Medical Procedure Code Database

RMP Code Detailed Nomenclature

Mapped to local nomenclature

| | |
|---|---|
| L32693- Lactate [Moles/volume] in Blood | Lactic acid |
| L38230- Calcium.ionized [Mass/volume] in Blood | CA+ CA++ |
| L42178- Lipoprotein.X [Presence] in Serum or Plasma | Lipoprotein |
| L42929- Lactate dehydrogenase panel - Serum or Plasma | Lactate dehydrogenase [LDH] |
| L43718- Prostatic acid phosphatase [Presence] in Serum | Phosphatase acide prostatic |
| L44375- Homocysteine [Presence] in Blood | Homocysteine |
| L49765- Calcium [Mass/volume] in Blood | CALCIUM TOTAL Total Calcium |
| L5292-8 Reagin Ab [Presence] in Serum by VDRL | Free Treponemal Antibody [FT-Ab] or VDRL test |
| L5797-6 Ketones [Mass/volume] in Urine by Test strip | Ketones in urine by test strip |
| L5902-2 Prothrombin time [PT] | Prothrombin time [PT] |
| L59032- Lactate [Mass/volume] in Blood | Lactate |
| L6298-4 Potassium [Moles/volume] in Blood | Potassium [K+] in blood |
| L6875-9 Cancer Ag 15-3 [Units/volume] in Serum or Plasma | CA15-3 |
| L72171- Glucose tolerance 2 hours panel - Serum or Plasma | Provoked Hyperglycemia |

Specialty Lab

Sub-classification: **Bio-chemistry**

| | |
|--|------------------------|
| L12242- Phosphate [Mass/volume] in Body fluid | Phosphorus [Phosphate] |
| L22735- Bicarbonate [Moles/volume] in Unspecified specimen | Bicarbonates |

Rwanda Medical Procedure Code Database

RMP Code Detailed Nomenclature

Mapped to local nomenclature

| | |
|---------------------------|-----------|
| L24338- Gas panel - Blood | Blood gas |
|---------------------------|-----------|

Specialty Lab

Sub-classification: **Clinical chemistry**

| | |
|--|-----------|
| L12217- Globulin [Mass/volume] in Body fluid | Globulins |
|--|-----------|

| | |
|---|------------------------|
| L2083-4 Cholesterol esterase [Enzymatic activity/volume] in Serum | Esterified cholesterol |
|---|------------------------|

| | |
|--|-----------|
| L32343- Urate [Moles/volume] in Unspecified specimen | Uric acid |
|--|-----------|

Specialty Lab

Sub-classification: **Culture[Sabouraud]**

| | |
|--|--|
| L6463-4 Bacteria identified in Unspecified specimen by Culture | Sabouraud culture - unspecified specimen |
|--|--|

Specialty Lab

Sub-classification: **Endocrinology**

| | |
|--|---|
| L10501- Lutropin [Units/volume] in Serum or Plasma | LH - Lutropin [Units/volume] in Serum or Plasma |
|--|---|

| | |
|---|------------|
| L10839- Troponin I.cardiac [Mass/volume] in Serum or Plasma | Troponin I |
|---|------------|

| | |
|---|------------------------------------|
| L15067- Follitropin [Units/volume] in Serum or Plasma | Follicle Stimulating Hormone [FSH] |
|---|------------------------------------|

| | |
|---|-----------------|
| L20448- Insulin [Units/volume] in Serum or Plasma | Insulin hormone |
|---|-----------------|

| | |
|--|---|
| L2115-4 Choriogonadotropin.beta subunit free [Moles/volume] in Serum or Plasma | β -HCG free [Chiriogonadotripin.beta] |
|--|---|

| | |
|---|----------|
| L2143-6 Cortisol [Mass/volume] in Serum or Plasma | Cortisol |
|---|----------|

| | |
|---|-------------------------|
| L2243-4 Estradiol [E2] [Mass/volume] in Serum or Plasma | Oestradiol or Estradiol |
|---|-------------------------|

| | |
|---|----------------|
| L2254-1 Estrogen [Mass/volume] in Serum or Plasma | Total Estrogen |
|---|----------------|

| | |
|---|--------------|
| L2839-9 Progesterone [Mass/volume] in Serum or Plasma | Progesterone |
|---|--------------|

| | |
|---------------------------------------|--------------------------------------|
| L29574- Thyrotropin [Presence] in DBS | Thyrotropin releasing hormones [TRH] |
|---------------------------------------|--------------------------------------|

Rwanda Medical Procedure Code Database

RMP Code Detailed Nomenclature

Mapped to local nomenclature

| | |
|--|--|
| L2963-7 Somatotropin [Mass/volume] in Serum or Plasma | Growth Hormone |
| L2986-8 Testosterone [Mass/volume] in Serum or Plasma | Testosterone |
| L30166- Thyroid stimulating immunoglobulins actual/normal in Serum | TSH |
| L3024-7 Thyroxine [T4] free [Mass/volume] in Serum or Plasma | T4 free |
| L3051-0 Triiodothyronine [T3] Free [Mass/volume] in Serum or Plasma | T3 free |
| L3053-6 Triiodothyronine [T3] [Mass/volume] in Serum or Plasma | T3 T3 total Total T3 |
| L31144- Thyroxine [T4] [Mass/volume] in DBS | T4 T4 total Total T4 |
| L43799- Choriogonadotropin.beta subunit [Presence] in Unspecified specimen | β-HCG –Total [Chiriogonadotripin.beta] |
| L45194- Choriogonadotropin.intact+Beta subunit [Units/volume] in Serum or Plasma | β-HCG bound [Chiriogonadotripin.beta] |
| L6598-7 Troponin T.cardiac [Mass/volume] in Serum or Plasma | Troponin T |

Specialty Lab

Sub-classification: **Examen de pus uretral avec coloration**

| | |
|--|---------------------|
| L643-7 Microscopic observation [Identifier] in Pus by Gram stain | Urethral swab [MCS] |
|--|---------------------|

Specialty Lab

Sub-classification: **Examen du liquide de ponction**

| | |
|---|---------------------------------------|
| L14360- Microscopic observation [Identifier] in Pleural fluid by Gram stain | Punction fluid stained [Pleura] - MCS |
|---|---------------------------------------|

Specialty Lab

Sub-classification: **Frottis vaginal a gram**

Rwanda Medical Procedure Code Database

RMP Code Detailed Nomenclature

Mapped to local nomenclature

L14361- Microscopic observation [Identifier] in Vaginal fluid by Gram stain

Vaginal swab[MCS] Gram stain

Specialty Lab

Sub-classification: **Frottis vaginal coloration Gram**

Vaginal swab[MCS] Gram stain

Specialty Lab

Sub-classification: **Genetic**

L35129- Karyotype [Identifier] in Unspecified specimen Nominal

Karyotype

L76586- ENT microorganism gene identification panel by NAA with probe detection

Gene Sequencing

L77313- DNA analysis discrete sequence variation basic associated observations panel - Blood or Tissue by Molecular genetics method

DNA Bank

Specialty Lab

Sub-classification: **Hematology**

L1003-3 Indirect antiglobulin test.complement specific reagent [Presence] in Serum or Plasma

Coombs indirect

L1007-4 Direct antiglobulin test.poly specific reagent [Presence] on Red Blood Cells

Coombs direct

L13590- Activated protein C resistance [Time Ratio] in Platelet poor plasma by Coagulation assay

Active Protein C resistance

L15210- Thyroglobulin Ab [Presence] in Serum

Thyroglobulin

L17856- Hemoglobin A1c/Hemoglobin.total in Blood by HPLC

Glycated Hemoglobin [HbA1c]

L20570- Hematocrit [Volume Fraction] of Blood

Hematocrit

L2243-4 Estradiol [E2] [Mass/volume] in Serum or Plasma

Estradiol

L2276-4 Ferritin [Mass/volume] in Serum or Plasma

Ferritin

L2339-0 Glucose [Mass/volume] in Blood

Random Blood sugar

L2356-4 Glucose-6-Phosphate dehydrogenase [Presence] in Red Blood Cells

Glucose 6 Phosphate dehydrogenase [G6PD]

Rwanda Medical Procedure Code Database

RMP Code Detailed Nomenclature

Mapped to local nomenclature

| | |
|---|--|
| L24351- Protein electrophoresis panel - Serum or Plasma | Hb Electrophoresis Hemoglobin electrophoresis |
| L26515- Platelets [./volume] in Blood | Platelets |
| L27820- Protein C Ag actual/normal in Platelet poor plasma by Immunoassay | Protein C |
| L27823- Protein S Ag actual/normal in Platelet poor plasma by Immunoassay | Protein S |
| L30341- Erythrocyte sedimentation rate | Erythrocyte Sedimentation rate[ESR] SEDIMENTATION RATE |
| L3173-2 aPTT in Blood by Coagulation assay | Activated partial thromboplastine time [APTT] |
| L3189-8 Coagulation factor IX Ag [Units/volume] in Platelet poor plasma by Immunoassay | Factor IX |
| L3218-5 Coagulation factor X activity actual/normal in Platelet poor plasma by Coagulation assay | Von willebrand Ag factor X |
| L3250-8 Fibrin monomer [Units/volume] in Platelet poor plasma by Latex agglutination | Fibrin monomer |
| L32635- Coagulation factor II inhibitor [Units/volume] in Platelet poor plasma by Coagulation assay | Coagulation factors [Factor II] immunoassay |
| L40656- Parasite identified in Blood by Thick film | Blood parasites |
| L4621-9 Hemoglobin S [Presence] in Blood | EMMEL test - Hemoglobin S presence in blood |
| L48805- Platelet aggregation panel - Platelet rich plasma | Platelet aggregation |
| L52767- Activated partial thromboplastin time [aPTT] in Platelet poor plasma by Coagulation assay -- after addition of protein C activator/Activated partial thromboplastin time [aPTT] | TCK/PARTIAL TROMBOPLASTIN TIME |
| L55398- Short Fibrin D-dimer FEU and DDU panel - Platelet poor plasma | D-dimer |
| L58410- Complete blood count [hemogram] panel - Blood by Automated count | Full blood count FULL BLOOD COUNT Full blood haemogram |

Rwanda Medical Procedure Code Database

RMP Code Detailed Nomenclature

Mapped to local nomenclature

| | |
|--|--|
| | White blood cells |
| L58493- Coagulation factor VIII Ab [Presence] in Platelet poor plasma by Immunoassay | Factor VIII |
| L69742- CBC W Differential panel, method unspecified - Blood | Differential count |
| L718-7 Hemoglobin [Mass/volume] in Blood | Hemoglobin |
| L75515- Lupus anticoagulant aPTT and dRVVT screening panel W Reflex | Lupus anticoagulant |
| L804-5 Leukocytes [./volume] in Blood by Manual count | Leukocyte count [Formulaire Leucocytaire manuel] |

Specialty Lab

Sub-classification: Hepatite B

| | |
|---|--------------------------|
| L31204- Hepatitis B virus core IgM Ab [Presence] in Serum | Hepatitis B IgM presence |
| L32685- Hepatitis B virus core IgG Ab [Presence] in Serum | Hepatitis B IgG |

Specialty Lab

Sub-classification: Hepatite C

| | |
|--|------------------------------|
| L16129- Hepatitis C virus IgG Ab [Presence] in Serum | Hepatitis C IgG presence |
| L53376- Hepatitis C virus IgM Ab [Units/volume] in Serum | Hepatitis C IgM Units/volume |

Specialty Lab

Sub-classification: Histology

| | |
|---|---|
| 30084 Diagnostic biopsy of bone marrow by trephine using percutaneous approach where the biopsy is sent for pathological examination [Anaes.] | Bone marrow biopsy |
| 31360 Non-malignant skin lesion [other than viral verrucae [common warts] and seborrheic keratoses], including a cyst, ulcer or scar [other than a scar removed during the surgical approach at an operation], surgical excision [other than by shave excision] and repair of, if: [a] the lesion is excised from nose, eyelid, eyebrow, lip, ear, digit or genitalia, or from a contiguous area; and [b] the necessary excision diameter is 6 mm or more; and [c] the excised specimen is sent for histological examination [Anaes.] | Excisional Biopsy [large biopsy, surgical ward] |
| 55026 Ultrasonic cross-sectional echography, in conjunction with a surgical procedure using interventional techniques, not being FNA [Fine Needle Aspiration] a service associated with a service to which any other item in this group applies [r] [nk] | |

Rwanda Medical Procedure Code Database

RMP Code Detailed Nomenclature

Mapped to local nomenclature

| | |
|---|-----------|
| L42481- Human papilloma virus 6+11+42+43+44 DNA [Presence] in Cervix by Probe with signal amplification | Pap Smear |
|---|-----------|

Specialty Lab

Sub-classification: **HORMONOLOGY**

| | |
|--|----------------------------------|
| L11046- Epinephrine [Mass/volume] in Urine | Adrenalin [Epinephrine] in Urine |
|--|----------------------------------|

| | |
|---|-----------------------------------|
| L2230-1 Epinephrine [Mass/volume] in Plasma | Adrenalin [Epinephrine] in Plasma |
|---|-----------------------------------|

| | |
|--|---|
| L2666-6 Norepinephrine [Mass/volume] in Plasma | Noradrenalin - Norepinephrine in Plasma |
|--|---|

| | |
|--|---------------------------------|
| L3126-0 Vasopressin [Mass/volume] in Serum or Plasma | Antidiuretic hormone [ADH] test |
|--|---------------------------------|

| | |
|--|------------------------------|
| L8099-4 Thyroperoxidase Ab [Units/volume] in Serum or Plasma | Anti-Thyroid Peroxydase[TPO] |
|--|------------------------------|

Specialty Lab

Sub-classification: **Immunohistochemistry**

| | |
|--|------|
| L10432- CD30 Ag [Presence] in Tissue by Immune stain | CD30 |
|--|------|

| | |
|--|------|
| L10438- CD20 Ag [Presence] in Tissue by Immune stain | CD20 |
|--|------|

| | |
|---|-----|
| L10439- CD3 Ag [Presence] in Tissue by Immune stain | CD3 |
|---|-----|

| | |
|--|------|
| L10441- CD34 Ag [Presence] in Tissue by Immune stain | CD34 |
|--|------|

| | |
|--|---------------------------------|
| L10469- Carcinoembryonic Ag [Presence] in Tissue by Immune stain | Carcino Embronic Antigene [CEA] |
|--|---------------------------------|

| | |
|--|----------------|
| L10471- Chromogranin A Ag [Presence] in Tissue by Immune stain | Chromogranin A |
|--|----------------|

| | |
|--|-----------------------------------|
| L10479- EPITHELIAL MEMBRANE AG, IHC/INTERPRETATION | Epithelium membrane Antigen [EMA] |
|--|-----------------------------------|

| | |
|--|------------------|
| L10487- HMB-45 Ag [Presence] in Tissue by Immune stain | Melanoma [HMB45] |
|--|------------------|

| | |
|---|---------------|
| L10514- Synaptophysin Ag [Presence] in Tissue by Immune stain | Synaptophysin |
|---|---------------|

| | |
|--|----------|
| L10519- Vimentin Ag [Presence] in Tissue by Immune stain | Vimentin |
|--|----------|

| | |
|---|-----------------|
| L11050- Kappa light chains [Mass/volume] in Serum or Plasma | Kappa Low Chain |
|---|-----------------|

Rwanda Medical Procedure Code Database

RMP Code Detailed Nomenclature

Mapped to local nomenclature

| | |
|--|--|
| L14229- P53 protein Ag [Presence] in Tissue by Immune stain | P53 |
| L20507- Reagin Ab [Presence] in Serum by RPR | VDRL / RPR |
| L2118-8 Choriogonadotropin [pregnancy test] [Presence] in Serum or Plasma | human chorionic gonadotropin [hCG] pregnancy test |
| L30339- Epstein Barr virus capsid IgG Ab [Presence] in Serum | Epstein Bar Virus |
| L40551- CD10 Ag [Presence] in Tissue by Immune stain | CD10 |
| L40554- CD45 Ag [Presence] in Tissue by Immune stain | CD 45 |
| L40556- Estrogen receptor Ag [Presence] in Tissue by Immune stain | ER [Estrogen] |
| L40558- Cytokeratin 20 Ag [Presence] in Tissue by Immune stain | CK20 |
| L40559- Cytokeratin 7 Ag [Presence] in Tissue by Immune stain | CK7 |
| L40564- Thyroid transcription factor 1 Ag [Presence] in Tissue by Immune stain | TTF-1 |
| L47011- Calretinin Ag [Presence] in Tissue by Immune stain | Calretinin |
| L47015- CD31 Ag [Presence] in Tissue by Immune stain | CD31 |
| L47021- CDX2 Ag [Presence] in Tissue by Immune stain | CDX2 |
| L47033- Myogenin Ag [Presence] in Tissue by Immune stain | Myogenin |
| L49472- Mammaglobin Ag [Presence] in Tissue by Immune stain | Mammaglobin |
| L50331- WT-1 Ag [Presence] in Tissue by Immune stain | WILMS` Tumor 1 |
| L51185- CD117 Ag [Presence] in Unspecified specimen by Immune stain | CD117 |
| L51188- CD15 Ag [Presence] in Unspecified specimen by Immune stain | CD15 |
| L5292-8 Reagin Ab [Presence] in Serum by VDRL | VDRL / TPHA |

Rwanda Medical Procedure Code Database

RMP Code Detailed Nomenclature

Mapped to local nomenclature

| | |
|---|---------------------------|
| L54011- Vimentin Ab [Presence] in Serum by Immunofluorescence | Vimentin |
| L57371- Enolase.neuron specific [Mass/volume] in Serum or Plasma by Immunoassay | Neuron specific Enolase |
| L63210- Actin smooth muscle Ab [Presence] in Serum by Immunoassay | SMA [Smooth Muscle Actin] |
| L6791-8 Lambda light chains [Presence] in Serum by Immunoassay | Lambda high Chain |
| L72457- Desmin Ab [Presence] in Serum or Plasma by Immunoblot | Desmin |
| L74489- Melan-A and Ki67 Ag [Identifier] in Tissue by Immune stain | Ki67 |
| L74885- HER2 panel - Tissue by FISH | HER-2 |
| L83109- Progesterone [Mass/volume] in Serum or Plasma by Immunoassay | PGR [Progesterone] |
| L9668-5 HIV 1 p55 Ab [Presence] in Serum by Immunoblot | P55 |

Specialty Lab

Sub-classification: **Nitrite**

| | |
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| L18370- Nitrite [Mass/volume] in Blood | Nitrite |
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Specialty Lab

Sub-classification: **Parasitology**

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|---|---|
| L10701- Ova and parasites identified in Stool by Concentration | Enriched stool sample examination STOOL/ENRICHED EXAM Stool parasites and concentration |
| L10704- Ova and parasites identified in Stool by Light microscopy | STOOL/DIRECT EXAM Stool parasites / EDS- Ex. direct des selles/ Direct wet Mount |
| L17784- Parasites in Blood by Light microscopy | Blood parasites Blood smear borrelia |

Rwanda Medical Procedure Code Database

RMP Code Detailed Nomenclature

Mapped to local nomenclature

| | |
|---|--|
| | Blood smear microfilaria |
| L29636- Appearance of Stool | STOOL APPEARANCE |
| L31208- Specimen source identified | Microsporidia |
| L33271- Microscopic observation [Identifier] in Blood by Malaria thin smear | Thin blood smear |
| L625-4 Bacteria identified in Stool by Culture | stool culture |
| L637-9 Microscopic observation [Identifier] in Blood by Malaria thick smear | Blood smear Blood smear malaria Fresh blood smear Malaria parasite count - thick blood smear Microscopic examination for parasites or mycoses with or without stain Peripheral blood film Analysis Peripheral blood smear Thick blood smear |
| L675-9 Enterobius vermicularis [Presence] in Unspecified specimen by Pinworm exam | Anal swab direct exam / microscopy Anal swab microscopy for pinworms [enriched] |

Specialty **Lab**

Sub-classification: **PH**

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|--------------------------|----------------------|
| L2748-2 pH of Body fluid | Hydrogen Bridge [PH] |
|--------------------------|----------------------|

Specialty **Lab**

Sub-classification: **Recherche d^autres parasites sanguicoles**

| | |
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| L40656- Parasite identified in Blood by Thick film | Blood parasites Blood parasites |
|--|------------------------------------|

Rwanda Medical Procedure Code Database

RMP Code Detailed Nomenclature

Mapped to local nomenclature

| Specialty Lab | Sub-classification: Serology | |
|--|-------------------------------------|---|
| L1003-3 Indirect antiglobulin test.complement specific reagent [Presence] in Serum or Plasma | | Indirect Coombs test |
| L10334- Cancer Ag 125 [Units/volume] in Serum or Plasma | | CA125 cancer antigen 125[for ovarian cancer] |
| L10510- S-100 Ag Ag [Presence] in Tissue by Immune stain | | S-100 protein |
| L11039- C reactive protein [Presence] in Serum or Plasma | | C-reactive protein [CRP] |
| L13953- Hepatitis B virus e Ab [Presence] in Serum or Plasma by Immunoassay | | Hepatitis B virus e Ab [Hbe Ab] |
| L16128- Hepatitis C virus Ab [Presence] in Serum | | HCV Ab |
| L16933- Hepatitis B virus core Ab [Presence] in Serum | | AB anti HBc Hepatitis B virus core Ab [HBc Ab] |
| L17562- Salmonella sp Ab [Presence] in Serum | | WIDAL |
| L2006-5 Cancer Ag 125 [Presence] in Serum or Plasma | | CA 125 CA- 125/ cancer antigen 125 CA 125 |
| L20507- Reagin Ab [Presence] in Serum by RPR | | Rapid Plasma Reagin [RPR] RPR [Blood, CSF, Other fluids] |
| L2118-8 Choriogonadotropin [pregnancy test] [Presence] in Serum or Plasma | | Pregnancy test [blood] Pregnancy test in serum or plasma |
| L22285- Entamoeba histolytica Ab [Presence] in Serum | | Amibiasis |
| L22310- Helicobacter pylori Ab [Presence] in Serum | | Helicobacter ab in serum |
| L22314- Hepatitis A virus IgM Ab [Presence] in Serum | | HAV IgM Ab |

Rwanda Medical Procedure Code Database

RMP Code Detailed Nomenclature

Mapped to local nomenclature

| | |
|--|---|
| | Ig M anti HAV |
| L22322- Hepatitis B virus surface Ab [Presence] in Serum | EIA AC HBS [Hep B] Hepatitis B virus surface Ab [HBs Ab] |
| L23424- Salmonella enteritidis IgG Ab [Presence] in Serum by Immunoassay | Salmonella Ig G |
| L24108- Cancer Ag 19-9 [Units/volume] in Serum or Plasma | CA 19,9[for gastro-intestinal tract cancer] |
| L24312- Treponema pallidum Ab [Presence] in Serum by Agglutination | TPHA/Blood |
| L24315- Cytomegalovirus IgG and IgM panel - Serum or Plasma | CMV IGG CMV IGM |
| L2857-1 Prostate specific Ag [Mass/volume] in Serum or Plasma | TPSA - PSA |
| L29893- HIV 1 Ab [Presence] in Serum or Plasma by Immunoassay | HIV ELISA Test HIV RAPID TEST HIV Test |
| L31768- Chlamydia trachomatis Ag [Presence] in Blood | CHLAMYDIA TRACHOMATIS |
| L31788- Cryptococcus sp Ag [Presence] in Cerebral spinal fluid | AG CRYPTO/CSF [CEREBRAL SPINAL FLUID] |
| L31843- Helicobacter pylori Ag [Presence] in Stool | HELICOBACTER PYLORI/ STOOL |
| L31844- Hepatitis B virus e Ag [Presence] in Serum | AG HBE Hepatitis B virus e Ag [HBe Ag] |
| L33317- Schistosoma sp IgG Ab [Presence] in Serum | Bilharziose |
| L33910- Rheumatoid factor [Presence] in Serum | Rheumatoid factor [Waalser- Rose] |
| L34550- Immunoglobulin panel [Mass/volume] - Serum | Immunoglobulin [IgG, IgM, IgA, IgE] |

Rwanda Medical Procedure Code Database

RMP Code Detailed Nomenclature

Mapped to local nomenclature

| | |
|---|---|
| L41763- Rubella virus IgG Ab [Titer] in Serum | Rubella IgG |
| L42191- Hepatitis A and B and C 7a panel - Serum | EIA AC HCV [Hep C] |
| L45167- IgE [Mass/volume] in Unspecified specimen | Ig E |
| L4679-7 Reticulocytes/100 erythrocytes in Blood | Reticulocyte Count |
| L48575- Hepatitis C virus genotype [Identifier] in Unspecified specimen by NAA with probe detection | PCR Hepatitis C |
| L49178- Epstein Barr virus Ab [Presence] in Serum | MNI RAPID TEST [Mononucleosis Rapid Test] |
| L49580- HIV 1+2 Ab [Presence] in Unspecified specimen by Rapid immunoassay | HIV 1& 2 Rapid Test |
| L50023- Hepatitis C virus RNA panel [viral load] in Serum or Plasma by NAA with probe detection | Hepatitis C viral load |
| L50196- Occult blood panel - Stool | FOBIN STOOL/Occult blood |
| L50624- HIV 1 RNA panel [viral load] in Cerebral spinal fluid by NAA with probe detection | PCR HIV |
| L50689- Treponema pallidum Ab [Presence] in Cerebral spinal fluid by Hemagglutination | TPHA/CSF |
| L5126-8 Cytomegalovirus IgM Ab [Units/volume] in Serum or Plasma by Immunoassay | Cytomegalovirus IgM |
| L51623- Spermatozoa [,/volume] in Semen --post vasectomy | SPERMOGRAM |
| L5195-3 Hepatitis B virus surface Ag [Presence] in Serum | Hepatitis B virus surface Ag [HBs Ag] |
| L5370-2 Streptolysin O Ab [Units/volume] in Serum or Plasma | Anti streptolysin O [ASLO] |
| L57770- Toxoplasma gondii IgG and IgM panel - Serum | Toxoplasmosis ab IgG and IgM panel |
| L65758- CD4 T-cell absolute panel - Blood | CD4 COUNT |
| L6875-9 Cancer Ag 15-3 [Units/volume] in Serum or Plasma | CA 15-3 [For breast cancer] |
| L76772- Plasmodium falciparum Ag [Presence] in Blood by Rapid immunoassay | Ag Malaria - rapid test |

Rwanda Medical Procedure Code Database

RMP Code Detailed Nomenclature

Mapped to local nomenclature

| | |
|---|---------------------|
| L7852-7 Cytomegalovirus IgG Ab [Units/volume] in Serum or Plasma | Cytomegalovirus IgG |
| L7918-6 HIV 1+2 Ab [Presence] in Serum | HIV 1& 2 ELISA |
| L8015-0 Rubella virus IgM Ab [Units/volume] in Serum | Rubella IgM |
| L80376- Rotavirus and Adenovirus Ag panel - Stool by Rapid immunoassay | Rotavirus |
| L8039-0 Toxoplasma gondii IgG Ab [Units/volume] in Serum | Toxoplasmosis IgG |
| L8040-8 Toxoplasma gondii IgM Ab [Units/volume] in Serum | Toxoplasmosis IgM |
| L83113- Prostate Specific Ag Free [Mass/volume] in Serum or Plasma by Immunoassay | FP5A |
| L9674-3 Salmonella sp IgM Ab [Units/volume] in Serum | Salmonella Ig M |

Specialty Lab

Sub-classification: SEROLOGY

| | |
|---|---|
| L11085- Bilharziose | Bilharziose |
| L32018- HAV IgG Ab | HAV IgG Ab |
| L57717- Dried Blood Spots [DBS] for PCR and further testing | Dried Blood Spots [DBS] for PCR and further testing |

Specialty Lab

Sub-classification: Stains

| | |
|--|---|
| L10746- Calcium.microscopic observation [Identifier] in Tissue by Von Kossa stain | von Kossa Stain |
| L10748- Collagen fibers+Elastic fibers.microscopic observation [Identifier] in Tissue by Verhoeff-Van Gieson stain | Elastic Stain [Modified Verhoff's] |
| L10782- Microscopic observation [Identifier] in Tissue by Congo red stain | Congo red |
| L10799- Microscopic observation [Identifier] in Tissue by Pentachrome stain.Movat | Movat Pentachrome Stain |
| L10801- Microscopic observation [Identifier] in Tissue by Phosphotungstic acid Hematoxylin [PTAH] Stain | PTAH Stain for Microwave [Phosphotungstic Acid Hematoxylin] |

Rwanda Medical Procedure Code Database

RMP Code Detailed Nomenclature

Mapped to local nomenclature

| | |
|---|---|
| L10804- Microscopic observation [Identifier] in Tissue by Reticulin stain | Reticulin |
| L10810- Microscopic observation [Identifier] in Tissue by Silver stain.Fontana-Masson | Fontana masson |
| L10811- Microscopic observation [Identifier] in Tissue by Silver stain.Grimelius | Grimelius |
| L10818- Microscopic observation [Identifier] in Tissue by Trichrome stain.Masson modified | Masson Trichrome |
| L10823- Mucopolysaccharides.microscopic observation [Identifier] in Tissue by Colloidal ferric oxide stain.Hale | Colloidal Iron Stain |
| L10827- Reticulum.microscopic observation [Identifier] in Tissue by Gomori stain | Reticulum Stain [Modified Gomori's] |
| L13930- Rheumatoid factor [Titer] in Synovial fluid by Agglutination | Waler rose |
| L38519- Microscopic observation [Identifier] in Blood or Marrow by Prussian blue stain | Prussian blue |
| L647-8 Microscopic observation [Identifier] in Sputum by Acid fast stain.Ziehl-Neelsen | Ziehl-Neelsen [ZN] |
| L664-3 Microscopic observation [Identifier] in Unspecified specimen by Gram stain | Gram stain Gram stain [CSF, Ascitic fluid, Pleural fluid, Pericardial fluid, Peritoneal fluid, Amniotic fluid, Ovarian fluid, synovial fluid, other] |
| L6671-2 Microscopic observation [Identifier] in Tissue by Methenamine silver nitrate stain | Grocott |
| L6675-3 Microscopic observation [Identifier] in Tissue by Periodic acid-Schiff stain | Periodic Acid-Schiff stain [PAS] |
| L676-7 Microscopic observation [Identifier] in Unspecified specimen by Rhodamine-auramine fluorochrome stain | Auramine Rhodamine |

Specialty Lab

Sub-classification: **TCK**

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| L3173-2 aPTT in Blood by Coagulation assay | PTT |
|--|-----|

Specialty Lab

Sub-classification: **Test de Howel**

| | |
|---|-------------|
| L7793-3 Howell-Jolly bodies [Presence] in Blood by Light microscopy | Howell test |
|---|-------------|

Rwanda Medical Procedure Code Database

RMP Code Detailed Nomenclature

Mapped to local nomenclature

| Specialty Lab | Sub-classification: Toxicology | |
|---|---------------------------------------|---|
| L17086- Lithium [Mass/volume] in Body fluid | | Lithium toxicology test |
| L19261- Amphetamines [Presence] in Urine by Screen method | | Amphetamines toxicology test |
| L34177- Opiates [Presence] in Unspecified specimen | | Opiates toxicology test |
| L3967-7 Phenytoin [Presence] in Serum or Plasma | | Phenytoin toxicology test |
| L60291- Carbamazepine [Presence] in Unspecified specimen | | Carbamazepine toxicology test |
| L61066- Ethanol [Presence] in Unspecified specimen by Screen method | | Ethanol toxicology test |
| L70140- Benzodiazepines [Mass/volume] in Urine by Screen method | | Benzodiazepines toxicology test |
| L74157- Cannabinoids [Presence] in Serum, Plasma or Blood by Screen method | | Cannabinoids toxicology test |
| L74260- HEDIS 2014 Value Set - Valproic Acid Level | | Valproic acid toxicology test |
| L78436- Primidone and phenobarbital trough panel - Serum or Plasma | | Phenobarbital toxicology test |
| L8197-6 Cocaine [Presence] in Unknown substance by Screen method | | Cocaine toxicology test |
| L82373- Buprenorphine [Presence] in Unspecified specimen by Screen method | | Buprenorphin beta 3-d Glucuronide [BUP] toxicology test |
| Specialty Lab | Sub-classification: Von willebrand Ag | |
| L3226-8 Coagulation factor XI activity actual/normal in Platelet poor plasma by Coagulation assay | | Von willebrand Ag factor XI |

Rwanda Medical Procedure Code Database

RMP Code Detailed Nomenclature

Mapped to local nomenclature

Specialty **LAB**

Sub-classification: **SEROLOGY**

L70569- Malarial IgG / IgM / Test rapid

Malarial IgG / IgM / Test rapid

Rwanda Medical Procedure Code Database

RMP Code Detailed Nomenclature

Mapped to local nomenclature

| Specialty | Medical acts | Sub-classification: | |
|-----------|---|--|---|
| 30559 | Oesophagus, local excision for tumour of [Anaes.] [Assist.] | Ablation d^ une tumeur benigne de l^esophage | Removal of benign tumor of esophogus |
| C3-2 | Consultation with a nurse - individual | Séance d^entretien Infirmier[e] individuelle | Consultation with a nurse - individual |
| | Consultation with a GP working hours [one day per patient] | Visite médical generaliste [une par jour par | Consultation with a GP working days [one day per patient] |

Rwanda Medical Procedure Code Database

RMP Code Detailed Nomenclature

Mapped to local nomenclature

| Specialty Morgue | Sub-classification: | |
|-------------------------|---|---|
| M1000 | Mortuary compartment for 6 after 1st 24 hours, per day | Mortuary compartment for 6 after 1st 24 hours, per day |
| M1001 | Mortuary compartment for 4 after 1st 24 hours, per day | Mortuary compartment for 4 after 1st 24 hours, per day |
| M1002 | Mortuary compartment for 3 after 1st 24 hours, per day | Mortuary compartment for 3 after 1st 24 hours, per day |
| M1003 | Mortuary single compartment after 1st 24 hours, per day | Mortuary single compartment after 1st 24 hours, per day |
| M1004 | Mortuary multiple compartment after 1st 24 hours, per day | Mortuary multiple compartment after 1st 24 hours, per day |
| M1005 | Embalming of body [for deaths occurring at hospital] | Embalming of body [for deaths occurring at hospital] |

Rwanda Medical Procedure Code Database

RMP Code Detailed Nomenclature

Mapped to local nomenclature

Specialty **Neoropsychiatry**

Sub-classification:

| | | |
|-------|---|---|
| 10958 | <p>OCCUPATIONAL THERAPY Occupational therapy health service provided to a person by an eligible occupational therapist if: [a]the service is provided to a person who has: a chronic condition; and complex care needs being managed by a medical practitioner [including a general practitioner, but not a specialist or consultant physician] under a shared care plan or under both a GP Management Plan and Team Care Arrangements or, if the person is a resident of an aged care facility, the person`s medical practitioner has contributed to a multidisciplinary care plan; and [b]the service is recommended in the person`s Team Care Arrangements, multidisciplinary care plan or shared care plan as part of the management of the person`s chronic condition and complex care needs; and [c]the person is referred to the eligible occupational therapist by the medical practitioner using a referral form that has been issued by the Department or a referral form that contains all the components of the form issued by the Department; and [d]the person is not an admitted patient of a hospital; and [e]the service is provided to the person individually and in person; and [f]the service is of at least 20 minutes duration; and [g]after the service, the eligible occupational therapist gives a written report to the referring medical practitioner mentioned in paragraph [c]: [i] if the service is the only service under the referral - in relation to that service; or [ii] if the service is the first or the last service under the referral - in relation to that service; or [iii] if neither subparagraph [i] nor [ii] applies but the service involves matters that the referring medical practitioner would reasonably expect to be informed of - in relation to those matters; and [h]for a service for which a private health insurance benefit is payable - the person who incurred the medical expenses for the service has elected to claim the Medicare benefit for the service, and not the private health insurance benefit; - to a maximum offive services [including any services to which items 10950 to 10970 apply] in a calendar year</p> | Occupational therapy, Individual Session |
| | | Occupational Therapy Session Art, Music, Sports, Video, etc. Therapy which will provided upon prescription and to be provided by a registered Occupational Therapist |
| 173 | <p>Professional attendance at which acupuncture is performed by a medical practitioner by application of stimuli on or through the surface of the skin by any means, including any consultation on the same occasion and another attendance on the same day related to the condition for which the acupuncture was performed</p> | Acupuncture - Auricolotherapy, procedure applied at the ears of a patients with addiction, insomnia, PTSD, etc. To be provided by a trained mental health professionals |
| 193 | <p>Professional attendance by a general practitioner who is a qualified medical acupuncturist, at a place other than a hospital, lasting less than 20 minutes and including any of the following that are clinically relevant: [a] taking a patient history; [b] performing a clinical examination; [c] arranging any necessary investigation; [d] implementing a management plan; [e] providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation, at which acupuncture is performed by the qualified medical acupuncturist by the application of stimuli on or through the skin by any means, including any consultation on the same occasion and another attendance on the same day related to the condition for which the acupuncture is performed</p> | Acupuncture - Auricolotherapy, procedure applied at the ears of a patients with addiction, insomnia, PTSD, etc. To be provided by a trained mental health professionals |

Rwanda Medical Procedure Code Database

RMP Code Detailed Nomenclature

Mapped to local nomenclature

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| 195 | Professional attendance by a general practitioner who is a qualified medical acupuncturist, on one or more patients at a hospital, lasting less than 20 minutes and including any of the following that are clinically relevant: [a] taking a patient history; [b] performing a clinical examination; [c] arranging any necessary investigation; [d] implementing a management plan; [e] providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation, at which acupuncture is performed by the qualified medical acupuncturist by the application of stimuli on or through the skin by any means, including any consultation on the same occasion and another attendance on the same day related to the condition for which the acupuncture is performed | Acupuncture - Auriculotherapy, procedure applied at the ears of a patients with addiction, insomnia, PTSD, etc. To be provided by a trained mental health professionals |
| 197 | Professional attendance by a general practitioner who is a qualified medical acupuncturist, at a place other than a hospital, lasting at least 20 minutes and including any of the following that are clinically relevant: [a] taking a detailed patient history; [b] performing a clinical examination; [c] arranging any necessary investigation; [d] implementing a management plan; [e] providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation, at which acupuncture is performed by the qualified medical acupuncturist by the application of stimuli on or through the skin by any means, including any consultation on the same occasion and another attendance on the same day related to the condition for which the acupuncture is performed | Acupuncture - Auriculotherapy, procedure applied at the ears of a patients with addiction, insomnia, PTSD, etc. To be provided by a trained mental health professionals |
| 199 | Professional attendance by a general practitioner who is a qualified medical acupuncturist, at a place other than a hospital, lasting at least 40 minutes and including any of the following that are clinically relevant: [a] taking an extensive patient history; [b] performing a clinical examination; [c] arranging any necessary investigation; [d] implementing a management plan; [e] providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation, at which acupuncture is performed by the qualified medical acupuncturist by the application of stimuli on or through the skin by any means, including any consultation on the same occasion and another attendance on the same day related to the condition for which the acupuncture is performed | Acupuncture - Auriculotherapy, procedure applied at the ears of a patients with addiction, insomnia, PTSD, etc. To be provided by a trained mental health professionals |
| 338 | Professional attendance by a consultant physician in the practice of his or her specialty of psychiatry following referral of the patient to him or her by a referring practitioner--an attendance of more than 75 minutes in duration if that attendance is at a place other than consulting rooms or hospital | Psychotherapy Session Individual |
| 342 | Group psychotherapy [including any associated consultations with a patient taking place on the same occasion and relating to the condition for which group therapy is conducted] of not less than 1 hour in duration given under the continuous direct supervision of a consultant physician in the practice of his or her specialty of psychiatry, involving a group of 2 to 9 unrelated patients or a family group of more than 3 patients, each of whom is referred to the consultant physician by a referring practitioner--each patient | Psychotherapy Session Couple Psychotherapy Session Family Psychotherapy Session Group provided to different category of conditions: addiction, PTSD, Bipolar disorders,grief, etc. |
| 344 | Group psychotherapy [including any associated consultations with a patient taking place on the same occasion and relating to the condition for which group therapy is conducted] of not less than 1 hour in duration given under the | Psychotherapy Session Group provided to different category of conditions: addiction, |

Rwanda Medical Procedure Code Database

RMP Code Detailed Nomenclature

Mapped to local nomenclature

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| | continuous direct supervision of a consultant physician in the practice of his or her specialty of psychiatry, involving a family group of 3 patients, each of whom is referred to the consultant physician by a referring practitioner--each patient | PTSD, Bipolar disorders,grief, etc. |
| 346 | Group psychotherapy [including any associated consultations with a patient taking place on the same occasion and relating to the condition for which group therapy is conducted] of not less than 1 hour in duration given under the continuous direct supervision of a consultant physician in the practice of his or her specialty of psychiatry, involving a family group of 2 patients, each of whom is referred to the consultant physician by a referring practitioner--each patient | Psychotherapy Session Group provided to different category of conditions: addiction, PTSD, Bipolar disorders,grief, etc. |
| 348 | Professional attendance by a consultant physician in the practice of his or her recognised specialty of psychiatry, where the patient is referred to him or her by a referring practitioner involving an interview of a person other than the patient of not less than 20 minutes duration but less than 45 minutes duration, in the course of initial diagnostic evaluation of a patient, where that interview is at consulting rooms, hospital or residential aged care facility | Psychotherapy Session Individual |
| C8-3 | Mental health consultation working hours <20 minutes | Therapeutic Interview by Mental Health Nurse |

Specialty **Neopsychiatry**

Sub-classification: **Consultation**

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|------|--|---|
| 2713 | Professional attendance by a medical practitioner [not including a specialist or consultant physician] in relation to a mental disorder and of at least 20 minutes in duration, involving taking relevant history and identifying the presenting problem [to the extent not previously recorded], providing treatment and advice and, if appropriate, referral for other services or treatments, and documenting the outcomes of the consultation | Mental Health Consultation long >= 20 minutes, includes health assessments for work or annual health checkups |
| 5000 | Professional attendance at consulting rooms [other than a service to which another item applies] by a general practitioner for an obvious problem characterised by the straightforward nature of the task that requires a short patient history and, if required, limited examination and management--each attendance | Clinical Psychologist After hours/weekend Consultation standard < 20 minutes Consultation by Allied Health Professionals [Occupational Therapists, Physiotherapist, Social Worker] After hours/weekend standard < 20 minutes Mental Health Consultation after hours/weekend standard < 20 minutes Neurology Consultation After hours/weekend long >=20 minutes Psychotherapist Consultation After hours/weekend long >=20 minutes |
| 5040 | Professional attendance by a general practitioner at consulting rooms [other than a service to which another item in the table applies], lasting at least 20 minutes and including any of the following that are clinically relevant: [a] taking a detailed patient history; [b] performing a clinical examination; [c] arranging any necessary investigation; [d] implementing a management plan; [e] providing appropriate preventive health care; for one or more health-related issues, with appropriate | Clinical Psychologist Consultation After hours/weekend long >=20 minutes |

Rwanda Medical Procedure Code Database

RMP Code Detailed Nomenclature

Mapped to local nomenclature

| documentation--each attendance | |
|---|--|
| 6018 Professional attendance by an addiction medicine specialist in the practice of his or her specialty following referral of the patient to him or her by a referring practitioner, if the attendance: [a] includes a comprehensive assessment; and [b] is the first or only time in a single course of treatment that a comprehensive assessment is provided | <p>Consultation by Allied Health Professionals [Occupational Therapists, Physiotherapist, Social Worker] Consultation After hours/weekend long ≥ 20 minutes</p> <p>Mental Health Consultation after hours/weekend standard ≥ 20 minutes</p> <p>Neurology Consultation After hours/weekend standard < 20 minutes</p> <p>Psychiatrist Consultation After hours/weekend standard < 20 minutes</p> <p>Psychotherapist Consultation After hours/weekend standard < 20 minutes</p> |
| 6019 Professional attendance by an addiction medicine specialist in the practice of his or her specialty following referral of the patient to him or her by a referring practitioner, if the attendance is a patient assessment: [a] before or after a comprehensive assessment under item 6018 in a single course of treatment; or [b] that follows an initial assessment under item 6023 in a single course of treatment; or [c] that follows a review under item 6024 in a single course of treatment | <p>Comprehensive Addiction Assessment - Physical, Social, Mental psychology aspects</p> <p>Detoxicare - individual</p> |
| 6023 Professional attendance by an addiction medicine specialist in the practice of his or her specialty of at least 45 minutes for an initial assessment of a patient with at least 2 morbidities, following referral of the patient to him or her by a referring practitioner, if: [a] an assessment is undertaken that covers: [i] a comprehensive history, including psychosocial history and medication review; and [ii] a comprehensive multi or detailed single organ system assessment; and [iii] the formulation of differential diagnoses; and [b] an addiction medicine specialist treatment and management plan of significant complexity that includes the following is prepared and provided to the referring practitioner: [i] an opinion on diagnosis and risk assessment; [ii] treatment options and decisions; [iii] medication recommendations; and [c] an attendance on the patient to which item 104, 105, 110, 116, 119, 132, 133, 6018 or 6019 applies did not take place on the same day by the same addiction medicine specialist; and [d] neither this item nor item 132 has applied to an attendance on the patient in the preceding 12 months by the same addiction medicine specialist | <p>Detoxicare - individual</p> |
| 6024 Professional attendance by an addiction medicine specialist in the practice of his or her specialty of at least 20 minutes, after the first attendance in a single course of treatment, for a review of a patient with at least 2 morbidities if: [a] a review is undertaken that covers: [i] review of initial presenting problems and results of diagnostic investigations; and [ii] review of responses to treatment and medication plans initiated at time of initial consultation; and [iii] comprehensive multi or | <p>Detoxicare - individual</p> |

Rwanda Medical Procedure Code Database

RMP Code Detailed Nomenclature

Mapped to local nomenclature

detailed single organ system assessment; and [iv] review of original and differential diagnoses; and [b] the modified addiction medicine specialist treatment and management plan is provided to the referring practitioner, which involves, if appropriate: [i] a revised opinion on diagnosis and risk assessment; and [ii] treatment options and decisions; and [iii] revised medication recommendations; and [c] an attendance on the patient to which item 104, 105, 110, 116, 119, 132, 133, 6018 or 6019 applies did not take place on the same day by the same addiction medicine specialist; and [d] item 6023 applied to an attendance claimed in the preceding 12 months; and [e] the attendance under this item is claimed by the same addiction medicine specialist who claimed item 6023 or by a locum tenens; and [f] this item has not applied more than twice in any 12 month period

| | | |
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| 6025 | Initial professional attendance of 10 minutes or less, on a patient by an addiction medicine specialist in the practice of his or her specialty, if: [a] the attendance is by video conference; and [b] the patient is not an admitted patient; and [c] the patient: [i] is located both: [a] within a telehealth eligible area; and [b] at the time of the attendance--at least 15 km by road from the addiction medicine specialist; or [ii] is a care recipient in a residential care service; or [iii] is a patient of: [a] an aboriginal medical service; or [b] an aboriginal community controlled health service; for which a direction made under subsection 19[2] of the act applies; and [d] no other initial consultation has taken place for a single course of treatment | Detoxicare - individual |
| 6026 | Professional attendance on a patient by an addiction medicine specialist in the practice of his or her specialty, if: [a] the attendance is by video conference; and [b] the attendance is for a service: [i] provided with item 6018 or 6019 and lasting more than 10 minutes; or [ii] provided with item 6023 or 6024; and [c] the patient is not an admitted patient; and [d] the patient: [i] is located both: [a] within a telehealth eligible area; and [b] at the time of the attendance--at least 15 km by road from the addiction medicine specialist; or [ii] is a care recipient in a residential care service; or [iii] is a patient of: [a] an aboriginal medical service; or [b] an aboriginal community controlled health service; for which a direction made under subsection 19 [2] of the act applies | Detoxicare - individual |
| 6028 | Group therapy [including any associated consultation with a patient taking place on the same occasion and relating to the condition for which group therapy is conducted] of not less than 1 hour, given under the continuous direct supervision of an addiction medicine specialist in the practice of his or her specialty for a group of 2 to 9 unrelated patients, or a family group of more than 2 patients, each of whom is referred to the addiction medicine specialist by a referring practitioner--for each patient | Detoxicare - group |
| 80000 | Professional attendance for the purpose of providing psychological assessment and therapy for a mental disorder by a clinical psychologist registered with Medicare Australia as meeting the credentialing requirements for provision of this service, lasting more than 30 minutes but less than 50 minutes, where the patient is referred by a medical practitioner, as part of a GP Mental Health Treatment Plan or as part of a shared care plan; or referred by a medical practitioner [including a general practitioner, but not a specialist or consultant physician] who is managing the patient under a referred psychiatrist assessment and management plan; or referred by a specialist or consultant physician in the practice of his or her field of psychiatry or paediatrics. These therapies are time limited, being deliverable in up to ten planned sessions in a calendar year, up to seven of which may be provided via video conference, [including services to which items 2721 to 2727; 80000 to 80015; 80100 to 80115; 80125 to 80140; 80150 to 80165 apply]. [Professional attendance at consulting rooms] | Clinical Psychologist Consultation long 20 to 45 minutes, includes health assessments for work or annual health checkups |

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| | | Clinical Psychologist Consultation standard <20 minutes |
| 80120 | Professional attendance for the purpose of providing focussed psychological strategies services for an assessed mental disorder by a psychologist registered with Medicare Australia as meeting the credentialing requirements for provision of this service, lasting for at least 60 minutes duration where the patients are referred by a medical practitioner, as part of a GP Mental Health Treatment Plan or as part of a shared care plan; or referred by a medical practitioner [including a general practitioner, but not a specialist or consultant physician] who is managing the patient under a referred psychiatrist assessment and management plan; or referred by a specialist or consultant physician in the practice of his or her field of psychiatry or paediatrics. These therapies are time limited, being deliverable in up to ten planned sessions in a calendar year, up to seven of which may be provided via video conference, [including services to which items 80020, 80021, 80120, 80121, 80145, 80146, 80170 and 80171 apply]. GROUP THERAPY with a group of 6 to 10 patients, EACH PATIENT | Psychologist Consultation standard <20 minutes |
| C3-1 | Consultation standard working hours <20 minutes | Psychologist Consultation standard <20 minutes |
| C4-1 | Consultation long 20 to 45 minutes, includes health assessments for work or annual health checkups | Psychologist Consultation long 20 to 45 minutes, includes health assessments for work or annual health checkups |
| C8-1 | After hours/weekend Consultation long >=20 minutes | Psychologist Consultation After hours/weekend standard < 20 minutes |
| C9-1 | After hours/weekend Consultation standard < 20 minutes | Psychiatrist Consultation After hours/weekend long 20 to 45 minutes Psychologist Consultation After hours/weekend long 20 to 45 minutes |

Specialty **Neoropsychiatry**

Sub-classification: **NEUROLOGY [Tests]**

| | | |
|-------|---|--|
| 11000 | Electroencephalography, not being a service:[a] associated with a service to which item 11003,11006 or 11009 applies; or [b] involving quantitative topographic mapping using neurometrics or similar devices [Anaes.] | Electro-Encephalo-Graphy - Standard EEG, PSG, Sleep Deprived EEG, Ambulatory EEG and Video EEG Evoked Potential- Auditive, Visual and Sensitive |
| 11003 | Electroencephalography, prolonged recording of at least3 hours duration, not being a service: [a] associated with a service to which item 11000,11004, 11005, 11006 or 11009 applies; or [b] involving quantitative topographic mapping using neurometrics or similar devices | Evoked Potential- Auditive, Visual and Sensitive |
| 11004 | Electroencephalography, ambulatory or video, prolonged recording of at least 3 hours duration up to 24 hours duration, recording on the first day, not being a service: [a] associated with a service to which item 11000,11003, 11005, 11006 or | Evoked Potential- Auditive, Visual and Sensitive |

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11009 applies; or [b] involving quantitative topographic mapping using neurometrics or similar devices

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| 11005 | Electroencephalography, ambulatory or video, prolonged recording of at least 3 hours duration up to 24 hours duration, recording on each day subsequent to the first day, not being a service: [a] associated with a service to which item 11000, 11003, 11004, 11006 or 11009 applies; or [b] involving quantitative topographic mapping using neurometrics or similar devices | Evoked Potential- Auditive, Visual and Sensitive |
| 11006 | Electroencephalography, temporosphenoidal, not being a service involving quantitative topographic mapping using neurometrics or similar devices | Evoked Potential- Auditive, Visual and Sensitive |
| 11009 | Electrocorticography | Evoked Potential- Auditive, Visual and Sensitive |
| 11012 | Neuromuscular electrodiagnosis — conduction studies on 1 nerve or electromyography of 1 or more muscles using concentric needle electrodes or both these examinations [not being a service associated with a service to which item 11015 or 11018 applies] | Electro-Myography with or without concentric needles/electrodes |

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| Specialty | Neurology | Sub-classification: | |
|-----------|---|---------------------|--|
| 11000 | Electroencephalography, not being a service:[a] associated with a service to which item 11003,11006 or 11009 applies; or Electroencephalography [EEG] [b] involving quantitative topographic mapping using neurometrics or similar devices [Anaes.] | | |
| 11003 | Electroencephalography, prolonged recording of at least3 hours duration, not being a service: [a] associated with a service to which item 11000,11004, 11005, 11006 or 11009 applies; or [b] involving quantitative topographic mapping using neurometrics or similar devices | | Electroencephalography [EEG] |
| 11004 | Electroencephalography, ambulatory or video, prolonged recording of at least 3 hours duration up to 24 hours duration, recording on the first day, not being a service: [a] associated with a service to which item 11000,11003, 11005, 11006 or 11009 applies; or [b] involving quantitative topographic mapping using neurometrics or similar devices | | Electroencephalography [EEG] |
| 11006 | Electroencephalography, temporosphenoidal, not being a service involving quantitative topographic mapping using neurometrics or similar devices | | Electroencephalography [EEG] |
| 11009 | Electrocorticography | | Electrocorticography [ECoG] |
| 11012 | Neuromuscular electrodiagnosis — conduction studies on 1 nerve or electromyography of 1 or more muscles using concentric needle electrodes or both these examinations [not being a service associated with a service to which item 11015 or 11018 applies] | | Neuromuscular Electrodiagnosis |
| 11015 | Neuromuscular electrodiagnosis — conduction studies on 2 or 3 nerves with or without electromyography [not being a service associated with a service to which item 11012 or 11018 applies] | | Neuromuscular Electrodiagnosis |
| 11018 | Neuromuscular electrodiagnosis — conduction studies on 4 or more nerves with or without electromyography or recordings from single fibres of nerves and muscles or both of these examinations [not being a service associated with a service to which item 11012 or 11015applies] | | Neuromuscular Electrodiagnosis |
| 11021 | Neuromuscular electrodiagnosis — repetitive stimulation for study of neuromuscular conduction or electromyography with quantitative computerised analysis or both of these examinations | | Neuromuscular Electrodiagnosis |
| 11024 | Central nervous system evoked responses, investigation of, by computerised averaging techniques, not being a service involving quantitative topographic mapping of event-related potentials or involving multifocal multichannel objective perimetry — 1 or 2 studies | | CENTRAL NERVOUS SYSTEM EVOKED RESPONSES, INVESTIGATION |
| 11027 | Central nervous system evoked responses, investigation of, by computerised averaging techniques, not being a service involving quantitative topographic mapping of event-related potentials or involving multifocal multichannel objective perimetry — 3 or more studies | | CENTRAL NERVOUS SYSTEM EVOKED RESPONSES, INVESTIGATION |

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Specialty **Neurosurgery**

Sub-classification: **Cranial Surgery**

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|-------|---|---|
| 39015 | Ventricular reservoir, external ventricular drain or intracranial pressure monitoring device, insertion of - including burr-hole [excluding after-care] [Anaes.] [Assist.] | External Ventricular drain insertion |
| 39112 | Cranial nerve, intracranial decompression of, using microsurgical techniques [Anaes.] [Assist.] | Microvascular decompression optic nerve sheath decompression |
| 39600 | Intracranial haemorrhage, burr-hole craniotomy for - including burr-holes [Anaes.] [Assist.] | Bilateral chronic subdural hematoma evacuation [burr holes] Chronic subdural hematoma evacuation [burr holes] |
| 39603 | Intracranial haemorrhage, osteoplastic craniotomy or extensive craniectomy and removal of haematoma [Anaes.] [Assist.] | Acute Subdural hematoma evacuation [Trauma] Decompressive craniectomy Epidural hematoma evacuation [trauma] Intracerebral hematoma evacuation [Trauma] |
| 39606 | Fractured skull, depressed or comminuted, operation for [Anaes.] [Assist.] | Depressed skull fracture debridement |
| 39609 | Fractured skull, compound, without dural penetration, operation for [Anaes.] [Assist.] | Depressed skull fracture debridement |
| 39612 | Fractured skull, compound, depressed or complicated, with dural penetration and brain laceration, operation for [Anaes.] [Assist.] | Depressed skull fracture debridement |
| 39615 | Fractured skull with rhinorrhoea or otorrhoea, repair of by cranioplasty or endoscopic approach [Anaes.] [Assist.] | CSF leak repair |
| 39640 | Tumour involving anterior cranial fossa, removal of, involving craniotomy, radical excision of the skull base, and dural repair [Anaes.] [Assist.] | Subfrontal approach |
| 39642 | Tumour involving anterior cranial fossa, removal of, involving frontal craniotomy with lateral rhinotomy for clearance of paranasal sinus extension, [intracranial procedure] [Anaes.] [Assist.] | Subfrontal approach |
| 39650 | Tumour involving middle cranial fossa and infra-temporal fossa, removal of, craniotomy and radical or sub-total radical excision, with division and reconstruction of zygomatic arch, [intracranial procedure] [Anaes.] [Assist.] | craniectomy, bone flap craniotomy, transtemporal [mastoid] for excision of cerebellopontine angle tumour [translabyrinthine approach] |

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| | | Extradural anterior clinoidectomy Orbitozygomatic approach Trans-sylvian approach |
| 39653 | Petro-clival and clival tumour, removal of, by supra and infratentorial approaches for radical or sub-total radical excision [intracranial procedure], not being a service to which item 39654 or 39656 applies [Anaes.] [Assist.] | Anterior petrosectomy |
| 39654 | Petro-clival and clival tumour, removal of, by supra and infratentorial approaches for radical or sub-total radical excision, [intracranial procedure], conjoint surgery, principal surgeon [Anaes.] [Assist.] | translabyrinthine approach |
| 39662 | Tumour or vascular lesion of foramen magnum, radical excision of, via transcondylar or far lateral suboccipital approach [Anaes.] [Assist.] | Craniectomy for excision of brain tumor, infratentorial or posterior fossa; midline tumor at base of skull glomus jugular tumor excision Retrosigmoid approach Transcondylar approach |
| 39700 | Skull tumour, benign or malignant, excision of, excluding cranioplasty [Anaes.] [Assist.] | Excision of skull tumour |
| 39709 | Craniotomy for removal of glioma, metastatic carcinoma or any other tumour in cerebrum, cerebellum or brain stem - not being a service to which another item in this Sub-group applies [Anaes.] [Assist.] | Anterior transcallosal approach Craniectomy, trephination, bone flap craniotomy; for excision of brain tumor, supratentorial, except meningioma Craniectomy for excision of brain tumor, infratentorial or posterior fossa; except meningioma, cerebellopontine angle tumor, or midline tumor at base of skull craniotomy for infratentorial brain cyst removal Posterior transcallosal approach Telo-Velar approach Transcortical approach Transvermian approach |

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| <p>39712 Craniotomy for removal of meningioma, pinealoma, craniopharyngioma, intraventricular tumour or any other intracranial tumour, not being a service to which another item in this Sub-group applies [Anaes.] [Assist.]</p> | <p>Craniectomy for excision of brain tumour, infratentorial or posterior fossa: cerebellopontine angle tumour [[retrosigmoid approach]] craniotomy for infratentorial meningioma removal craniotomy for supratentorial meningioma removal Craniotomy with elevation of bone flap; for excision of craniopharyngioma Pineal region tumor Supracerebellar Infratentorial approach</p> |
| <p>39715 Pituitary tumour, removal of, by transcranial or transphenoidal approach [Anaes.] [Assist.]</p> | <p>Craniotomy for hypophysectomy or excision of pituitary tumour, intracranial approach Endonasal Transphenoidal approach Hypophysectomy or excision of pituitary tumor, transversal or transept approach, nonstereotactic Neuroendoscopy, intracranial; with excision of pituitary tumor, transnasal or transphenoidal approach</p> |
| <p>39718 Arachnoidal cyst, craniotomy for [Anaes.] [Assist.]</p> | <p>craniotomy for supratentorial brain cyst removal</p> |
| <p>39800 Aneurysm, clipping or reinforcement of sac [Anaes.] [Assist.]</p> | <p>surgery of simple intracranial aneurysm, intracranial approach, carotid circulation</p> |
| <p>39803 Intracranial arteriovenous malformation, excision of [Anaes.] [Assist.]</p> | <p>Arterio-venous malformation excision, simple cerebral cavernoma resection</p> |
| <p>39806 Aneurysm, or arteriovenous malformation, intracranial proximal artery clipping of [Anaes.] [Assist.]</p> | <p>Arterio-venous malformation excision, complex surgery of complex intracranial aneurysm, intracranial approach, carotid circulation surgery of intracranial aneurysm, intracranial approach, vertebrobasilar circulation</p> |

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| 39812 | Intracranial aneurysm or arteriovenous fistula, ligation of cervical vessel or vessels [Anaes.] [Assist.] | Surgery of intracranial arteriovenous malformation; dural |
| 39900 | Intracranial infection, drainage of, via burr-hole - including burr-hole [Anaes.] [Assist.] | Burr holes for drainage of brain abscess |
| 39903 | Intracranial abscess, excision of [Anaes.] [Assist.] | Craniotomy for drainage of brain abscess drainage of epidural empyema drainage of subdural empyema |
| 39906 | Osteomyelitis of skull or removal of infected bone flap, craniectomy for [Anaes.] [Assist.] | Craniectomy; for osteomyelitis |
| 40000 | Ventriculo-cisternostomy [Torkildsen`s operation] [Anaes.] [Assist.] | Burr hole +ventriculostomy |
| 40003 | Cranial or cisternal shunt diversion, insertion of [Anaes.] [Assist.] | Ventriculoperitoneal shunt insertion |
| 40009 | Cranial, cisternal or lumbar shunt, revision or removal of [Anaes.] [Assist.] | VP shunt revision |
| 40012 | Third ventriculostomy [open or endoscopic] with or without endoscopic septum pellucidotomy [Anaes.] [Assist.] | Endoscopic third ventriculostomy |
| 40106 | Arnold-Chiari malformation, decompression of [Anaes.] [Assist.] | Suboccipital craniectomy + repair |
| 40109 | Encephalocele, excision and closure of [Anaes.] [Assist.] | Convexity encephalocele repair Syncipital encephalocele repair |
| 40115 | Craniosynostosis, operation for - single suture [Anaes.] [Assist.] | Craniectomy for craniosynostosis; single cranial sutures |
| 40118 | Craniosynostosis, operation for - more than 1 suture [Anaes.] [Assist.] | Craniectomy for craniosynostosis; multiple cranial sutures |
| 40600 | Cranioplasty, reconstructive [Anaes.] [Assist.] | Complex cranioplasty Parietal cranioplasty |
| 40700 | Corpus callosum, anterior section of, for epilepsy [Anaes.] [Assist.] | Corpus callosotomy |
| 40703 | Corticectomy, topectomy or partial lobectomy for epilepsy [Anaes.] [Assist.] | Anteromesial temporal lobectomy |

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| | | Multiple subpial transection |
| 40706 | Hemispherectomy for intractable epilepsy [Anaes.] [Assist.] | Hemispherectomy |
| 40800 | Stereotactic anatomical localisation, as an independent procedure [Anaes.] [Assist.] | Neuronavigation guidance |
| 40803 | Intracranial stereotactic procedure by any method, not being a service to which item 40800 or 40801 applies [Anaes.] [Assist.] | Stereotactic tumour biopsy |
| 40903 | Neuroendoscopy, for inspection of an intraventricular lesion, with or without biopsy including burr hole [Anaes.] [Assist.] | Endoscopic transventricular tumor biopsy |

Specialty **Neurosurgery**

Sub-classification: **Spinal surgery**

| | | |
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| 39000 | Lumbar puncture [Anaes.] | Lumbar CSF measurement |
| 40006 | Lumbar shunt diversion, insertion of [Anaes.] [Assist.] | Lumbar peritoneal shunt insertion |
| 40018 | Lumbar cerebrospinal fluid drain, insertion of [Anaes.] | Lumbar drain insertion |
| 40100 | Meningocele, excision and closure of [Anaes.] [Assist.] | Meningocele repair Spina bifida occulta repair |
| 40103 | Myelomeningocele, excision and closure of, including skin flaps or Z plasty where performed [Anaes.] [Assist.] | Myelomeningocele repair |
| 40112 | Tethered cord, release of, including lipomeningocele or diastematomyelia [Anaes.] [Assist.] | Diastematomyelia repair Laminectomy, with release of tethered spinal cord, lumbar |
| 40300 | Intervertebral disc or discs, partial or total laminectomy for removal of [Anaes.] [Assist.] | Lumbosacral Microscopic hemilaminotomy |
| 40301 | Intervertebral disc or discs, microsurgical discectomy of [Anaes.] [Assist.] | Lumbosacral microdiscectomy |
| 40306 | Spinal stenosis, partial or total laminectomy for, involving more than 1 vertebral interspace [disc level] [Anaes.] [Assist.] | Lumbar/ Lumbosacral foraminotomy 1 level Lumbar/ Lumbosacral transforaminal Interbody fusion Lumbar posterior decompression |

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| <p>40309 Extradural tumour or abscess, partial or total laminectomy for [Anaes.] [Assist.]</p> | <p>Laminectomy for biopsy/excision of intraspinal neoplasm; extradural, cervical Laminectomy for biopsy/excision of intraspinal neoplasm; extradural, lumbar Laminectomy for biopsy/excision of intraspinal neoplasm; extradural, thoracic Laminectomy for drainage of spinal epidural abscess Laminectomy for excision or evacuation of intraspinal lesion other than neoplasm, extradural; cervical Laminectomy for excision or evacuation of intraspinal lesion other than neoplasm, extradural; lumbar Laminectomy for excision or evacuation of intraspinal lesion other than neoplasm, extradural; thoracic Surgical site debridement and washout</p> |
| <p>40312 Intradural lesion, partial or total laminectomy for, not being a service to which another item in this Group applies [Anaes.] [Assist.]</p> | <p>Laminectomy for biopsy/excision of intraspinal neoplasm; intradural, extramedullary, cervical Laminectomy for biopsy/excision of intraspinal neoplasm; intradural, extramedullary, lumbar Laminectomy for biopsy/excision of intraspinal neoplasm; intradural, extramedullary, thoracic Laminectomy for drainage of spinal subdural abscess Laminectomy for excision of intraspinal lesion other than neoplasm, intradural; cervical Laminectomy for excision of intraspinal lesion other than neoplasm, intradural; lumbar Laminectomy for excision of intraspinal lesion other than neoplasm, intradural; thoracic</p> |
| <p>40315 Craniocervical junction lesion, transoral approach for [Anaes.] [Assist.]</p> | <p>occipito-cervical decompression</p> |
| <p>40316 Odontoid screw fixation [Anaes.] [Assist.]</p> | <p>odontoid screw insertion</p> |

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| <p>40318 Intramedullary tumour or arteriovenous malformation, partial or total laminectomy and radical excision of [Anaes.] [Assist.]</p> | <p>Laminectomy for biopsy/excision of intraspinal neoplasm; intradural, intramedullary, cervical Laminectomy for biopsy/excision of intraspinal neoplasm; intradural, intramedullary, thoracic Laminectomy for biopsy/excision of intraspinal neoplasm; intradural, intramedullary, thoracolumbar Spinal Dermal sinus traction excision</p> |
| <p>40321 Posterior spinal fusion, not being a service to which items 40324 and 40327 apply [Anaes.] [Assist.]</p> | <p>Atlanto-axial fixation Fixation and fusion cervical/ posterior Fixation and fusion lumbosacral Fixation and fusion thoracic Fixation and fusion thoracolumbar Lumbar posterior fusion Minimally invasive spine instrumentation 1 level Occipito-cervical fixation Spine deformity correction</p> |
| <p>40324 Partial or total laminectomy followed by posterior fusion, performed by neurosurgeon and orthopaedic surgeon operating together laminectomy, including aftercare [Anaes.] [Assist.]</p> | <p>Posterior lumbar sacral decompression Posterior thoracic decompression Posterior thoraco-lumbar decompression</p> |
| <p>40331 Cervical decompression of spinal cord with or without involvement of nerve roots, without fusion, 1 level, by any approach, Halo's reduction not being a service to which item 40330 applies [Anaes.] [Assist.]</p> | <p>Halo's traction [Trauma-cervical] Posterior cervical decompression Skull/ Skull femoral traction Tongs traction [Trauma-cervical]</p> |

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| 40332 | Cervical decompression of spinal cord with or without involvement of nerve roots, including anterior fusion, 1 level, not being a service to which item 40330 applies [Anaes.] [Assist.] | Closed reduction [Trauma-cervical] Fixation and fusion cervical/ anterior |
| 40333 | Cervical partial or total discectomy [anterior], without fusion [Anaes.] [Assist.] | Anterior cervical decompression |
| 40334 | Cervical decompression of spinal cord with or without involvement of nerve roots, without fusion, more than 1 level, by any approach, not being a service to which item 40330 applies [Anaes.] [Assist.] | Cervical foraminotomy Cervical laminoplasty Posterior cervical decompression |
| 40335 | Cervical decompression of spinal cord with or without involvement of nerve roots, including anterior fusion, more than 1 level, by any approach, not being a service to which item 40330 applies [Anaes.] [Assist.] | Fixation and fusion cervical/ anterior |
| 40348 | Thoracic decompression of spinal cord via thoracotomy with vertebrectomy, not including stabilisation procedure [Anaes.] [Assist.] | Anterior thoracic decompression Trans- thoracic anterior exposure |
| 40351 | Thoraco-lumbar or high lumbar anterior decompression of spinal cord, not including stabilisation procedure [Anaes.] [Assist.] | Anterior thoraco-lumbar decompression Trans- abdominal anterior exposure |
| 40800 | Stereotactic anatomical localisation, as an independent procedure [Anaes.] [Assist.] | Neuronavigation-guided spine instrumentation |

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| Specialty Nursing | | Sub-classification: Ablation des fils de suture |
|--------------------------|--|--|
| N1085 | Stitches removal | Stitches removal |
| Specialty Nursing | | Sub-classification: Hospitalization |
| N1051 | HEMODIALYSIS [lining, connection, disconnection, dressing & cannula of IVF catheter, cleaning, priming] | HEMODIALYSIS [connection, monitoring and disconnection] maximum 4 hrs |
| N1126 | Plaster of paris or synthetic cast removal | Plaster of paris or synthetic cast removal |
| Specialty Nursing | | Sub-classification: Medication |
| N1045 | Enema | Enema |
| N1069 | Nebulization, Aerosol therapy | Nebulization, Aerosol therapy |
| N1079 | Dialysis: Peritoneal [connection and monitoring and disconnection] maximum 4hrs | Dialysis: Peritoneal [connection and monitoring and disconnection] maximum 4hrs |
| N1103 | VACCINATION | VACCINATION |
| N1109 | Continous medication: Inotropic support, Fluid therapy, Infusions [medication] | Continous medication: Inotropic support, Fluid therapy, Infusions [medication] |
| N1120 | Post-hemodialysis procedure :, Cleaning of Machine + Hot Densinfection | Post-hemodialysis procedure :, Cleaning of Machine + Hot Densinfection |
| Specialty Nursing | | Sub-classification: Patient monitoring |
| N1093 | Physiological Measurement: Vital signs, Height, Weight, blood pressure , pulse rate , respiration rate, heart rate, Blood glucose monitoring, body mass index | Physiological Measurement: Vital signs, Height, Weight, blood pressure , pulse rate , respiration rate, heart rate, Blood glucose monitoring, body mass index |
| N1121 | Monitoring of a patient: Prevention of pressure sores , Care of catheters and invasive lines, Vital signs, Monitoring of mechanically ventilated patient, Monitoring of an unconscious patient | Monitoring of a patient: Prevention of pressure sores , Care of catheters and invasive lines, Vital signs, Monitoring of mechanically ventilated patient, Monitoring of an unconscious |

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| | | patient |
| N1122 | Monitoring of mechanically ventilated patient, Monitoring of an unconscious patient | Monitoring of mechanically ventilated patient, Monitoring of an unconscious patient |
| Specialty Nursing | Sub-classification: Postnatal care | |
| N1027 | CARE OF THE NEWBORN | CARE OF THE NEWBORN |
| Specialty Nursing | Sub-classification: Testing | |
| L14361- | Vaginal swab | Vaginal swab Vaginal swab |
| L643-7 | Ureteral swab | Ureteral swab |
| N1036 | Collection of specimens: Venous blood, Arterial blood [Gaz sampling], Urine, Stool, Sputum , Swabs,Tracheo aspirate | Collection of specimens: Venous blood, Arterial blood [Gaz sampling], Urine, Stool, Sputum , Swabs,Tracheo aspirate |
| N1043 | Electro Cardio Gram [ECG] | Electro Cardio Gram [ECG] |
| N1108 | Audiometry: Air conduction audimetry, Bone conduction audiometry, Tympanometry | Audiometry: Air conduction audimetry, Bone conduction audiometry, Tympanometry |
| N1123 | Visual acuity testing | Visual acuity testing |
| Specialty Nursing | Sub-classification: Wound care | |
| 30055 | Wounds, dressing of, under general anaesthesia, with or without removal of sutures, not being a service associated with a Sutures removal service to which another item in this Group applies [Anaes.] | Sutures removal Wound dressing [simple] Wound dressing [simple] Wound dressing [simple] |

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| | Wound dressing [simple] |
| | Wound dressing [wet] |

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Specialty **OBGYN**

Sub-classification: **null**

| | | |
|-------|---|---------------------------|
| 16564 | Evacuation of retained products of conception [placenta, membranes or mole] as a complication of confinement, with or without curettage of the uterus, as an independent procedure [Anaes.] | uterine review |
| 35618 | CERVIX, cone biopsy, amputation or repair of, other than a service to which item35577 or 35578 applies [Anaes.] | Uterine cervix amputation |
| 35646 | Cervix, colposcopy with radical diathermy of, with or without cervical biopsy, for previously confirmed intraepithelial neoplastic changes of the cervix [Anaes.] | Colposcopy |

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| Specialty Obstetrics | Sub-classification: | |
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| 82100 Initial antenatal professional attendance by a participating midwife, lasting at least 40 minutes, including all of the following:[a] taking a detailed patient history;[b] performing a comprehensive examination;[c] performing a risk assessment;[d] based on the risk assessment - arranging referral or transfer of the patient s care to an obstetrician;[e] requesting pathology and diagnostic imaging services, when necessary; [f] discussing with the patient the collaborative arrangements for her maternity care and recording the arrangements in the midwife s written records in accordance with section 2e of the health insurance regulations 1975. payable once only for any pregnancy. | | Initial Antenatal care consultation |
| 82105 Short antenatal professional attendance by a participating midwife, lasting up to 40 minutes. | | Follow-up Antenatal care visit <=40 minutes |
| 82110 Long antenatal professional attendance by a participating midwife, lasting at least 40 minutes. | | Follow-up Antenatal care visit >40 minutes |
| 82115 Professional attendance by a participating midwife, lasting at least 90 minutes, for assessment and preparation of a maternity care plan for a patient whose pregnancy has progressed beyond 20 weeks, if:[a] the patient is not an admitted patient of a hospital; and[b] the participating midwife undertakes a comprehensive assessment of the patient; and[c] the participating midwife develops a written maternity care plan that contains: outcomes of the assessment; and details of agreed expectations for care during pregnancy, labour and delivery; and details of any health problems or care needs; and details of collaborative arrangements that apply for the patient; and details of any medication taken by the patient during the pregnancy, and any additional medication that may be required by the patient; and details of any referrals or requests for pathology services or diagnostic imaging services for the patient during the pregnancy, and any additional referrals or requests that may be required for the patient; and[d] the maternity care plan is explained and agreed with the patient; and [e] the fee does not include any amount for the management of the labour and delivery. [includes any antenatal attendance provided on the same occasion].payable once only for any pregnancy. | | Long follow-up Antenatal care visit <90 minutes to prepare care plan for pregnancy >20 months |
| 82120 management of confinement for up to 12 hours, including delivery [if undertaken], if: [a] the patient is an admitted patient of a hospital; and [b] the attendance is by a participating midwife who: [i] provided the patient` s antenatal care; or [ii] is a member of a practice that provided the patient` s antenatal care.[includes all attendances related to the confinement by the participating midwife]payable once only for any pregnancy | | Normal delivery, including confinement for up to 12 hours |
| 82125 Management of confinement for in excess of 12 hours, including delivery where performed.management of confinement, including delivery [if undertaken] when care is transferred from 1 participating midwife to another participating midwife [the hours second participating midwife], if: [a] the patient is an admitted patient of a hospital; and [b] the patient s confinement is for longer than 12 hours; [c] the second participating midwife:[i] has provided the patient s antenatal care; or[ii] is a member of a practice that has provided the patient s antenatal care.[includes all attendances related to the confinement by the second participating midwife]payable one only for any pregnancy. | | Normal delivery, including confinement for > 12 |
| 82130 Short postnatal attendance short postnatal professional attendance by a participating midwife, lasting up to 40 minutes, within 6 weeks after delivery. | | Short postnatal consultation <40 minutes |

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RMP Code Detailed Nomenclature

Mapped to local nomenclature

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| 82135 | Long postnatal attendance long postnatal professional attendance by a participating midwife, lasting at least 40 minutes, within 6 weeks after delivery. | Long postnatal consultation >90 minutes |
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| 82140 | Six week postnatal attendance postnatal professional attendance by a participating midwife on a patient not less than 6 weeks but not more than 7 weeks after delivery of a baby, including: [a] a comprehensive examination of patient and baby to ensure normal postnatal recovery; and [b] referral of the patient to a general practitioner for the ongoing care of the patient and baby payable once only for any pregnancy. | Six week postnatal attendance |
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| Specialty | Ophthalmology | Sub-classification: |
|-----------|---|---|
| 106 | Professional attendance by a specialist in the practice of his or her specialty of ophthalmology and following referral of the patient to him or her—an attendance [other than a second or subsequent attendance in a single course of treatment] at which the only service provided is refraction testing for the issue of a prescription for spectacles or contact lenses, if that attendance is at consulting rooms or hospital [other than a service to which any of items 104, 109 and 10801 to 10816 applies] | REFRACTION |
| 10805 | Attendance for the investigation and evaluation of a patient for the fitting of contact lenses, with keratometry and testing with trial lenses and the issue of a prescription--one service in any period of 36 months--patient with anisometropia of 3.0 dioptres or greater [difference between spherical equivalents] | KERATOMETRY THERAPEUTIC RIGID CONTACT LENS FITTING |
| 109 | Professional attendance by a specialist in the practice of his or her specialty of ophthalmology following referral of the patient to him or her—an attendance [other than a second or subsequent attendance in a single course of treatment] at which a comprehensive eye examination, including pupil dilation, is performed on: [a] a patient aged 9 years or younger; or [b] a patient aged 14 years or younger with developmental delay;[other than a service to which any of items 104, 106 and 10801 to 10816 applies] | COLOUR VISION |
| 10943 | Additional testing to confirm diagnosis of, or establish a treatment regime for, a significant binocular or accommodative dysfunction, in a patient aged 3 to 14 years, including assessment of 1 or more of the following: [a] accommodation; [b] ocular motility; [c] vergences; [d] fusional reserves; [e] cycloplegic refraction; not being a service to which item 10916, 10921, 10922, 10923, 10924, 10925, 10926, 10927, 10928, 10929 or 10930 applies [Item is subject to rules 73 and 76] | STRABISMUS EVALUATION |
| 11200 | Provocative test or tests for glaucoma, including water drinking | PROVOCATIVE TEST OR TESTS FOR OPEN ANGLE GLAUCOMA, |
| 11204 | ELECTRORETINOGRAPHY of one or both eyes by computerised averaging techniques, including 3 or more studies performed according to current professional guidelines or standards,performed by or on behalf of a specialist or consultant physician in the practice of his or her speciality. | ELECTRORETINOGRAPHY |
| 11205 | ELECTROOCULOGRAPHY of one or both eyes performed according to current professional guidelines or standards, performed by or on behalf of a specialist or consultant physician in the practice of his or her speciality. | ELECTROOCULOGRAPHY |
| 11210 | Pattern electroretinography of 1 or both eyes by computerised averaging techniques, including 3 or more studies performed according to current professional guidelines or standards | PATTERN ELECTRORETINOGRAPHY |
| 11211 | Dark adaptometry of 1 or both eyes with a quantitative estimation of threshold in log lumens at 45 minutes of dark adaptations | DARK ADAPTOMETRY |
| 11215 | Retinal angiography, multiple exposures of 1 eye with intravenous dye injection | FLUORESCEIN ANGIOGRAPHY |

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Mapped to local nomenclature

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| 11218 | Retinal angiography, multiple exposures of both eyes with intravenous dye injection | FLURESCEIN STAINING |
| 11219 | Optical coherence tomography to determine if the requirements relating to: a] age related macular degeneration for access to initial treatment with ranibizumab or aflibercept; orb] diabetic macular oedema for access to initial treatment with ranibizumab, aflibercept or dexamethasone; or c] central or branch retinal vein occlusion for access to initial treatment with ranibizumab or aflibercept; or d] vitreomacular traction for access to initial treatment with ocriplasmin; under the pharmaceutical benefits scheme are fulfilled. | ANTERIOR SEGMENT OPTICAL COH. TOMOGRAPHY CORNEA TOPOGRAPHY/TOMOGRAPHY RETINA Optical coherence tomography [OCT] |
| 11220 | Optical coherence tomography for the assessment of the need for treatment following provision of pharmaceutical benefits scheme-subsidised ocriplasmin. Maximum of one service per eye per lifetime. | OPTICAL COHERENCE TOMOGRAPHY |
| 11221 | Full quantitative computerised perimetry [automated absolute static threshold], not being a service involving multifocal multichannel objective perimetry, performed by or on behalf of a specialist in the practice of his or her specialty, if indicated by the presence of relevant ocular disease or suspected pathology of the visual pathways or brain with assessment and report, bilateral — to a maximum of 2 examinations [including examinations to which item 11224 applies] in any 12 month period | FULL QUANTITATIVE COMPUTERISED PERIMETRY |
| 11235 | Examination of the eye by impression cytology of cornea for the investigation of ocular surface dysplasia, including the collection of cells, processing and all cytological examinations and preparation of report | EXAMINATION OF THE EYE BY IMPRESSION CYTOLOGY OF CORNEA |
| 11237 | Ocular contents, simultaneous ultrasonic echography by both unidimensional and bidimensional techniques, for the diagnosis, monitoring or measurement of choroidal and ciliary body melanomas, retinoblastoma or suspicious naevi or simulating lesions, 1 eye, not being a service associated with a service to which an item in group I1 of the Diagnostic Imaging Services Table applies | A/B-SCAN ULTRASOUND TONOMETRIE |
| 11244 | Orbital contents, diagnostic B-scan of, by a specialist practising in his or her speciality of Ophthalmology, not being a service associated with a service to which an item in group I1 of the diagnostic imaging services table applies. | B-SCAN ULTRASOUND |
| 12325 | Assessment of visual acuity and bilateral retinal photography with a non mydriatic retinal camera, including analysis and reporting of the images for initial or repeat assessment for presence or absence of diabetic retinopathy, in a patient with medically diagnosed diabetes, if:[a] the patient is of aboriginal and torres strait islander descent; and[b] the assessment is performed by the medical practitioner [other than an optometrist or ophthalmologist] providing the primary glycaemic management of the patient s diabetes; and[c] this item and item 12326 have not applied to the patient in the preceding 12 months; and[d] the patient does not have:[i] an existing diagnosis of diabetic retinopathy; or[ii] visual acuity of less than 6/12 in either eye; or[iii] a difference of more than 2 lines of vision between the 2 eyes at the time of presentation | ASSESSMENT OF VISUAL ACUITY AND BILATERAL RETINAL PHOTOGRAPHY WITH A NON MYDRIATIC RETINAL CAMERA |

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| 18240 | Retrobulbar or peribulbar injection of an anaesthetic agent | SUBTARSAL/ PERIBULBAR INJECTION |
| 30071 | Diagnostic biopsy of skin, as an independent procedure, if the biopsy specimen is sent for pathological examination [Anaes.] | EXTERNAL BIOPSY [Lid] |
| 30072 | Diagnostic biopsy of mucous membrane, as an independent procedure, if the biopsy specimen is sent for pathological examination [Anaes.] | DIAGNOSTIC BIOPSY OF MUCOUS MEMBRANE |
| 30189 | warts or molluscum contagiosum [one or more], removal of, by any method [other than by chemical means], where undertaken in the operating theatre of a hospital, not being a service associated with a service to which another item in this group applies [H] [Anaes.] | CURETTAGE MOLLUSCUM |
| 42503 | Ophthalmological examination under general anaesthesia, not being a service associated with a service to which another item in this Group applies [Anaes.] | EXAMINATION UNDER ANEASTHESIA HERTEL EXOPHTHALMOMETRY SPECULA MICROSCOPY |
| 42509 | Eye, enucleation of, with insertion of integrated implant [Anaes.] [Assist.] | INSERTION OF EYEBALL PROSTHESIS |
| 42510 | Eye, enucleation of, with insertion of hydroxy apatite implant or similar coralline implant [Anaes.] [Assist.] | EYE, |
| 42512 | Globe, evisceration of [Anaes.] [Assist.] | EVISCERATION / ENUCLEATION |
| 42515 | Globe, evisceration of, and insertion of intrascleral ball or cartilage [Anaes.] [Assist.] | EVISCERATION WITH IMPLANT |
| 42533 | Orbit, exploration of, with drainage or biopsy not requiring removal of bone [Anaes.] [Assist.] | ORBIT, EXPLORATION OF, |
| 42536 | Orbit, exenteration of, with or without skin graft and with or without temporalis muscle transplant [Anaes.] [Assist.] | ORBIT EXENTERATION |
| 42539 | Orbit, exploration of, with removal of tumour or foreign body, requiring removal of bone [Anaes.] [Assist.] | ORBIT, EXPLORATION OF, |
| 42542 | Orbit, exploration of anterior aspect with removal of tumour or foreign body [Anaes.] [Assist.] | EXCISION OF ORBITAL MASS ORBIT, |
| 42543 | Orbit, exploration of retrobulbar aspect with removal of tumour or foreign body [Anaes.] [Assist.] | EXCISION OF ORBITAL MASS ORBIT, |

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| 42551 | Eye, penetrating wound or rupture of, not involving intraocular structures repair involving suture of cornea or sclera, or both, not being a service to which item 42632 applies [Anaes.] [Assist.] | EYE, PENETRATING WOUND OR RUPTURE OF, |
| 42563 | intraocular foreign body, removal from anterior segment [Anaes.] [Assist.] | INTRAOCULAR FOREIGN BODY, |
| 42569 | intraocular foreign body, removal from posterior segment [Anaes.] [Assist.] | INTRAOCULAR FOREIGN BODY, |
| 42572 | Orbital abscess or cyst, drainage of [Anaes.] | DRAINAGE OF ORBITAL ABCESS |
| 42575 | Tarsal cyst, extirpation of [Anaes.] | CHALAZION CURETTAGE |
| 42581 | Ectropion or entropion, tarsal cauterisation of [Anaes.] | ECTROPION / ENTROPION REPAIR |
| 42584 | Tarsorrhaphy [Anaes.] [Assist.] | TARSORRAPHY |
| 42587 | Trichiasis, treatment of by cryotherapy, laser or electrolysis - each eyelid [Anaes.] | EPILATION |
| 42590 | Canthoplasty, medial or lateral [Anaes.] [Assist.] | CANTHOPLASTY, |
| 42593 | Lacrimal gland, excision of palpebral lobe [Anaes.] | LACRIMAL PROBING AND SERINGING |
| 42596 | Lacrimal sac, excision of, or operation on [Anaes.] [Assist.] | LACRIMAL SAC, |
| 42599 | Lacrimal canalicular system, establishment of patency by closed operation using silicone tubes or similar, 1 eye [Anaes.] [Assist.] | LACRIMAL CANALICULAR SYSTEM, |
| 42602 | Lacrimal canalicular system, establishment of patency by open operation, 1 eye [Anaes.] [Assist.] | LACRIMAL CANALICULAR SYSTEM, |
| 42605 | Lacrimal canaliculus, immediate repair of [Anaes.] [Assist.] | LACRIMAL CANALICULUS, |
| 42608 | Lacrimal drainage by insertion of glass tube, as an independent procedure [Anaes.] [Assist.] | LACRIMAL DRAINAGE |
| 42610 | Nasolacrimal tube [unilateral], removal or replacement of, or lacrimal passages, probing for obstruction, unilateral, with or without lavage - under general anaesthesia [Anaes.] | DACRYOCYSTORHINOSTOMY |
| 42611 | Nasolacrimal tube [bilateral], removal or replacement of, or lacrimal passages, probing for obstruction, bilateral, with or without lavage - under general anaesthesia [Anaes.] | NASOLACRIMAL TUBE [|
| 42614 | Nasolacrimal tube [unilateral], removal or replacement of, or lacrimal passages, probing to establish patency of the lacrimal passage and/or site of obstruction, unilateral, including lavage, not being a service associated with a service to | NASOLACRIMAL TUBE [|

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Mapped to local nomenclature

| which item 42610 applies [excluding aftercare] | | |
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| 42615 | Nasolacrimal tube [bilateral], removal or replacement of, or lacrimal passages, probing to establish patency of the lacrimal passage and/or site of obstruction, bilateral, including lavage, not being a service associated with a service to which item 42611 applies [excluding aftercare] | NASOLACRIMAL TUBE [|
| 42617 | Punctum snip operation [Anaes.] | PUNCTUM SNIP |
| 42620 | Punctum, occlusion of, by use of a plug [Anaes.] | PUNCTUM, |
| 42632 | Conjunctival peritomy or repair of corneal laceration by conjunctival flap [Anaes.] | CONJUNCTIVAL GROWTH EXCISION |
| 42635 | Corneal perforations, sealing of, with tissue adhesive [Anaes.] [Assist.] | CORNEAL PERFORATIONS, |
| 42641 | Autoconjunctival transplant, or mucous membrane graft [Anaes.] [Assist.] | AUTOCONJUNCTIVAL TRANSPLANT, |
| 42644 | cornea or sclera, complete removal of embedded foreign body from - not more than once on the same day by the same practitioner [excluding aftercare] [Anaes.] | CORNEA FOREIGN BODY REMOVAL |
| 42647 | Corneal scars, removal of, by partial keratectomy, not being a service associated with a service to which item 42686 applies [Anaes.] | CORNEO-SCLERAL LACERATION REPAIR |
| 42650 | Cornea, epithelial debridement for corneal ulcer or corneal erosion [excluding aftercare] [Anaes.] | PPV + ENDOLASER+INTERNAL TEMPONADE |
| 42651 | Cornea, epithelial debridement for eliminating band keratopathy [Anaes.] | CORNEA, MANUAL SICS CATARACT |
| 42653 | Cornea transplantation of [Anaes.] [Assist.] | CORNEAL TRANSPLANT [PKP/DALK/DSEK/PDEK] |
| 42656 | Cornea, transplantation of, second and subsequent procedures [Anaes.] [Assist.] | CORNEAL TRANSPLANT [PKP/DALK/DSEK/PDEK] |
| 42662 | Sclera, transplantation of, full thickness, including collection of donor material [Anaes.] [Assist.] | SCLERA, |
| 42665 | Sclera, transplantation of, superficial or lamellar, including collection of donor material [Anaes.] [Assist.] | SCLERA, |
| 42667 | Running corneal suture, manipulation of, performed within 4 months of corneal grafting, to reduce astigmatism where a reduction of 2 dioptries of astigmatism is obtained, including any associated consultation | RUNNING CORNEAL SUTURE, |

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| 42668 | Corneal sutures, removal of, not earlier than 6 weeks after operation requiring use of slit lamp or operating microscope [Anaes.] | CORNEAL SUTURES, REMOVAL OF SUTURES |
| 42672 | Corneal incisions, to correct corneal astigmatism of more than 11/2 dioptres following anterior segment surgery, including appropriate measurements and calculations, performed as an independent procedure [Anaes.] [Assist.] | CORNEAL INCISIONS, |
| 42673 | Additional corneal incisions, to correct corneal astigmatism of more than 11/2 dioptres, including appropriate measurements and calculations, performed in conjunction with other anterior segment surgery [Anaes.] [Assist.] | ADDITIONAL CORNEAL INCISIONS, |
| 42676 | Conjunctiva, biopsy of, as an independent procedure | CONJUNCTIVA, |
| 42680 | Conjunctiva, cryotherapy to, for melanotic lesions or similar using CO2 or N20 [Anaes.] | CONJUNCTIVA, |
| 42683 | Conjunctival cysts, removal of, requiring admission to hospital or approved day-hospital facility [Anaes.] | CONJUNCTIVAL CYSTS, |
| 42686 | Pterygium, removal of [Anaes.] | PTERIGIUM EXCISION with GRAFT |
| 42689 | Pinguecula, removal of, not being a service associated with the fitting of contact lenses [Anaes.] | PINGUECULA, |
| 42692 | Limbic tumour, removal of, excluding Pterygium [Anaes.] [Assist.] | LIMBIC TUMOUR, |
| 42695 | Limbic tumour, excision of, requiring keratectomy or sclerectomy, excluding Pterygium [Anaes.] [Assist.] | LIMBIC TUMOUR, |
| 42698 | Lens extraction, excluding surgery performed for the correction of refractive error except for anisometropia greater than 3 dioptres following the removal of cataract in the first eye [Anaes.] | LENS EXTRACTION, |
| 42701 | Intraocular lens, insertion of, excluding surgery performed for the correction of refractive error except for anisometropia greater than 3 dioptres following the removal of cataract in the first eye [Anaes.] | GLUED INTEROCULAR LENS [IOL] |
| 42702 | Lens extraction and insertion of artificial lens, excluding surgery performed for the correction of refractive error except for anisometropia greater than 3 dioptres following the removal of cataract in the first eye [Anaes.] | LENS EXTRACTION AND INSERTION OF INTRAOCULAR LENS, PHACOEMULSIFICATION |
| 42703 | intraocular lens or iris prosthesis insertion of, into the posterior chamber with fixation to the iris or sclera [Anaes.] [Assist.] | INTRAOCULAR LENS |
| 42704 | intraocular lens, removal or repositioning of by open operation, not being a service associated with a service to which item 42701 applies [Anaes.] | INTRAOCULAR LENS, REMOVAL |
| 42713 | iris suturing, mccannell technique or similar, for fixation of intraocular lens or repair of iris defect [Anaes.] [Assist.] | IRIS SUTURING, M |

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| 42716 | Cataract, juvenile, removal of, including subsequent needlings [Anaes.] [Assist.] | CATARACT, JUVENILE, |
| 42719 | Capsulectomy or removal of vitreous, or both, via the anterior chamber by any method, not being a service associated with a service to which item 42698, 42702 or 42716 applies [Anaes.] [Assist.] | ANTERIOR VITRECTOMY POSTERIOR VITRECTOMY |
| 42731 | limbal or pars plana lensectomy combined with vitrectomy, not being a service associated with items 42698, 42702, 42719, or 42725 [Anaes.] [Assist.] | LIMBAL OR PARS PLANA LENSECTOMY |
| 42734 | Capsulotomy, other than by laser, and other than a service associated with a service to which item 42725 or 42731 applies [Anaes.] [Assist.] | CAPSULOTOMY, |
| 42738 | Paracentesis of anterior chamber or vitreous cavity, or both, for the injection of therapeutic substances, or the removal of aqueous or vitreous humours for diagnostic or therapeutic purposes, 1 or more of, as an independent procedure. | A/C TAP PARACENTESIS OF ANTERIOR CHAMBER OR VITREOUS CAVITY, |
| 42739 | Paracentesis of anterior chamber or vitreous cavity, or both, for the injection of therapeutic substances, or the removal of aqueous or vitreous humours for diagnostic or therapeutic purposes, 1 or more of, as an independent procedure, for a patient requiring anaesthetic services. [Anaes.] | A/C TAP |
| 42740 | Intravitreal injection of therapeutic substances, or the removal of vitreous humour for diagnostic purposes, 1 or more of, as a procedure associated with other intraocular surgery. [Anaes.] | INTRAVITREAL INJECTION OF THERAPEUTIC SUBSTANCES, |
| 42743 | Anterior chamber, irrigation of blood from, as an independent procedure [Anaes.] [Assist.] | ANTERIOR CHAMBER, IRRIGATION OF BLOOD FROM, |
| 42749 | Glaucoma, filtering operation for, where previous filtering operation has been performed [Anaes.] [Assist.] | GLAUCOMA, |
| 42752 | glaucoma, insertion of drainage device incorporating an extraocular reservoir for, such as a molteno device [Anaes.] [Assist.] | GLAUCOMA FILTERING SURGERY WITH MMC |
| 42755 | glaucoma, removal of drainage device incorporating an extraocular reservoir for, such as a molteno device [Anaes.] | GLAUCOMA FILTERING SURGERY WITH DRAINAGE TUBE |
| 42758 | Goniotomy for the treatment of primary congenital glaucoma, excluding the minimally invasive implantation of glaucoma drainage devices [Anaes.] [Assist.] | GONIOTOMY |
| 42761 | Division of anterior or posterior synechiae, as an independent procedure, other than by laser [Anaes.] [Assist.] | DIVISION OF ANTERIOR OR POSTERIOR SYNECHIAE |
| 42764 | Iridectomy [including excision of tumour of iris] or iridotomy, as an independent procedure, other than by laser [Anaes.] [Assist.] | SURGICAL IRIDECTOMY |

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| 42767 | Tumour, involving ciliary body or ciliary body and iris, excision of [Anaes.] [Assist.] | TUMOUR, INVOLVING CILIARY BODY OR CILIARY BODY AND IRIS, |
| 42770 | Cyclodestructive procedures for the treatment of intractable glaucoma, treatment to 1 eye, to a maximum of 2 treatments to that eye in a 2 year period [Anaes.] [Assist.] | CYCLODESTRUCTIVE CYCLOPHOTOCOAGULATION |
| 42773 | detached retina, pneumatic retinopexy for, not being a service associated with a service to which item 42776 applies [Anaes.] [Assist.] | RETINAL DETACHMENT REPAIR -DACE |
| 42776 | Detached retina, buckling or resection operation for [Anaes.] [Assist.] | DETACHED RETINA, |
| 42779 | Detached retina, revision operation for [Anaes.] [Assist.] | DETACHED RETINA, |
| 42782 | laser trabeculoplasty, for the treatment of glaucoma. each treatment to 1 eye, to a maximum of 4 treatments to that eye in a 2 year period [Anaes.] [Assist.] | ARGON LASER TRABACULOPLASTY |
| 42783 | Laser trabeculoplasty - each treatment to 1 eye - where it can be demonstrated that a 5th or subsequent treatment to that eye [including any treatments to which item 42782 applies] is indicated in a 2 year period [Anaes.] [Assist.] | Trabeculectomy+ iridectomy |
| 42785 | Laser iridotomy - each treatment episode to 1 eye, to a maximum of 2 treatments to that eye in a 2 year period [Anaes.] [Assist.] | ARGON LASER PRP PER SITTING YAG- LASER IRIDOTOMY / CAPSULOTOMY |
| 42786 | Laser iridotomy - each treatment episode to 1 eye - where it can be demonstrated that a 3rd or subsequent treatment to that eye [including any treatments to which item 42785 applies] is indicated in a 2 year period [Anaes.] [Assist.] | YAG- LASER IRIDOTOMY / CAPSULOTOMY |
| 42788 | Laser capsulotomy—each treatment episode to one eye, to a maximum of 2 treatments to that eye in a 2 year period—other than a service associated with a service to which item 42702 applies [Anaes.] [Assist.] | GLAUCOMA FILTERING SURGERY WITHOUT MMC YAG- LASER IRIDOTOMY / CAPSULOTOMY |
| 42789 | Laser capsulotomy—each treatment episode to one eye—if it can be demonstrated that a third or subsequent treatment to that eye [including any treatments to which item 42788 applies] is indicated in a 2 year period—other than a service associated with a service to which item 42702 applies [Anaes.] [Assist.] | YAG- LASER IRIDOTOMY / CAPSULOTOMY |
| 42791 | Laser vitreolysis or corticolysis of lens material or fibrinolysis, excluding vitreolysis in the posterior vitreous cavity—each treatment to one eye, to a maximum of 2 treatments to that eye in a 2 year period [Anaes.] [Assist.] | INTRAVITREAL INJECTION |
| 42794 | Division of suture by laser following glaucoma filtration surgery, each treatment to 1 eye, to a maximum of 2 treatments to that eye in a 2 year period [Anaes.] | FOCAL LASER / GRID LASER |

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| 42806 | Iris tumour, laser photocoagulation of [Anaes.] [Assist.] | CRYO-THERMO-COAGULATION TUMORS EXCISION |
| 42809 | Retina, photocoagulation of, not being a service associated with photodynamic therapy with verteporfin [Anaes.] [Assist.] | RETINA PHOTOCOAGULATION OF |
| 42812 | removal of scleral buckling material, from an eye having undergone previous scleral buckling surgery [Anaes.] | REMOVAL OF SCLERAL BUCKLING MATERIAL, |
| 42833 | Squint, operation for, on 1 or both eyes, the operation involving a total of 1 or 2 muscles on a patient aged 15 years or over [Anaes.] [Assist.] | 2 MUSCLES OBLIQUE STRABISMUS REPAIR |
| 42839 | Squint, operation for, on 1 or both eyes, the operation involving a total of 3 or more muscles on a patient aged 15 years or over [Anaes.] [Assist.] | STRABISMUS REPAIR 2 MUSCLES HORIZ |
| 42845 | Readjustment of adjustable sutures, 1 or both eyes, as an independent procedure following an operation for correction of squint [Anaes.] | READJUSTMENT OF ADJUSTABLE SUTURES, 1 |
| 42848 | Squint, muscle transplant for [Hummelsheim type, or similar operation] on a patient aged 15 years or over [Anaes.] [Assist.] | SQUINT, |
| 42857 | Resuturing of wound following intraocular procedures with or without excision of prolapsed iris [Anaes.] [Assist.] | RESUTURING OF WOUND FOLLOWING INTRAOCULAR PROCEDURES |
| 42860 | Eyelid [upper or lower], scleral or Goretex or other non-autogenous graft to, with recession of the lid retractors [Anaes.] [Assist.] | BLEPHAROPLASTY LID REPAIR WITH LACRIMAL APPARATUS |
| 42863 | Eyelid, recession of [Anaes.] [Assist.] | EYELID, |
| 42866 | Entropion or tarsal ectropion, repair of, by tightening, shortening or repair of inferior retractors by open operation across the entire width of the eyelid [Anaes.] [Assist.] | ENTROPION |
| 42872 | Eyebrow, elevation of, for parietic states [Anaes.] | PTOSIS REPAIR |
| 61495 | Tear duct study [R] | TEAR DUCT STUDY |

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Specialty **OPHTALMOLOGY**

Sub-classification: **null**

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| C3-3 | Consultation Ophtalmic by an Optometrist | Consultation Ophtalmic by an Optometrist |
| | Consultation Ophtalmic by a Refractionist [a Skill not a qualification] | Consultation Ophtalmic by a Refractionist [a Skill not a qualification] |

Specialty **OPHTALMOLOGY**

Sub-classification:

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| OP001 | Colour Vision/Refraction | Colour Vision/Refraction |
| OP002 | Fundoscopy | Fundoscopy |
| OP003 | Lancaster Test | Lancaster Test |

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| Specialty | Orthopedics | Sub-classification: | |
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| 46300 | Inter-phalangeal joint or metacarpophalangeal joint, arthrodesis of, with synovectomy if performed [Anaes.] [Assist.] | | CARPOMETACARPAL JOINT, ARTHRODESIS OF |
| 46303 | Carpometacarpal joint, arthrodesis of, with synovectomy if performed [Anaes.] [Assist.] | | INTERPHALANGEAL JOINT or METACARPOPHALANGEAL JOINT, interposition arthroplasty |
| 46306 | Inter-phalangeal joint or metacarpophalangeal joint - interposition arthroplasty of and including tendon transfers or realignment on the 1 ray [Anaes.] [Assist.] | | INTERPHALANGEAL JOINT OR METACARPOPHALANGEAL JOINT - volar plate arthroplasty |
| 46307 | Interphalangeal joint or metacarpophalangeal joint - volar plate arthroplasty for traumatic deformity including tendon transfers or realignment on the 1 ray [Anaes.] [Assist.] | | INTERPHALANGEAL JOINT or METACARPOPHALANGEAL JOINT, total replacement arthroplasty or hemiarthroplasty of |
| 46309 | Interphalangeal joint or metacarpophalangeal joint, total replacement arthroplasty or hemiarthroplasty of, including associated synovectomy, tendon transfer or realignment - 1 joint [Anaes.] [Assist.] | | INTERPHALANGEAL JOINT or METACARPOPHALANGEAL JOINT, total replacement arthroplasty or hemiarthroplasty of |
| 46312 | Interphalangeal joint or metacarpophalangeal joint, total replacement arthroplasty or hemiarthroplasty of, including associated synovectomy, tendon transfer or realignment - 2 joints [Anaes.] [Assist.] | | INTERPHALANGEAL JOINT or METACARPOPHALANGEAL JOINT, total replacement arthroplasty or hemiarthroplasty OF |
| 46315 | Interphalangeal joint or metacarpophalangeal joint, total replacement arthroplasty or hemiarthroplasty of, including associated synovectomy, tendon transfer or realignment - 3 joints [Anaes.] [Assist.] | | INTERPHALANGEAL JOINT or METACARPOPHALANGEAL JOINT, total replacement arthroplasty or hemiarthroplasty of |
| 46318 | Interphalangeal joint or metacarpophalangeal joint, total replacement arthroplasty or hemiarthroplasty of, including associated synovectomy, tendon transfer or realignment - 4 joints [Anaes.] [Assist.] | | INTERPHALANGEAL JOINT OR METACARPOPHALANGEAL JOINT, total replacement arthroplasty or hemiarthroplasty of |
| 46321 | Interphalangeal joint or metacarpophalangeal joint, total replacement arthroplasty or hemiarthroplasty of, including associated synovectomy, tendon transfer or realignment - 5 or more joints [Anaes.] [Assist.] | | CARPAL BONE REPLACEMENT ARTHROPLASTY |
| 46324 | Carpal bone replacement arthroplasty including associated tendon transfer or realignment when performed [Anaes.] [Assist.] | | CARPAL BONE REPLACEMENT OR RESECTION ARTHROPLASTY |
| 46325 | Carpal bone replacement or resection arthroplasty using adjacent tendon or other soft tissue including associated tendon transfer or realignment when performed [Anaes.] [Assist.] | | INTER-PHALANGEAL JOINT or METACARPOPHALANGEAL JOINT, arthrotomy of |

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| 46327 | Inter-phalangeal joint or metacarpophalangeal joint, arthrotomy of [Anaes.] | INTER-PHALANGEAL JOINT or METACARPOPHALANGEAL JOINT, ligamentous or capsular repair |
| 46330 | Inter-phalangeal joint or metacarpophalangeal joint, ligamentous or capsular repair with or without arthrotomy [Anaes.] [Assist.] | INTER-PHALANGEAL JOINT or METACARPOPHALANGEAL JOINT, ligamentous repair of |
| 46333 | Inter-phalangeal joint or metacarpophalangeal joint, ligamentous repair of, using free tissue graft or implant [Anaes.] [Assist.] | INTER-PHALANGEAL JOINT or METACARPOPHALANGEAL JOINT, synovectomy, capsulectomy or debridement of |
| 46336 | Inter-phalangeal joint or metacarpophalangeal joint, synovectomy, capsulectomy or debridement of, not being a service associated with any other procedure related to that joint [Anaes.] [Assist.] | EXTENSOR TENDONS or FLEXOR TENDONS of hand or wrist, synovectomy of |
| 46339 | Extensor tendons or flexor tendons of hand or wrist, synovectomy of [Anaes.] [Assist.] | DISTAL RADIOULNAR JOINT or CARPOMETACARPAL JOINT OR JOINTS, synovectomy of |
| 46342 | Distal radioulnar joint or carpometacarpal joint or joints, synovectomy of [Anaes.] [Assist.] | DISTAL RADIOULNAR JOINT, reconstruction or stabilisation of |
| 46345 | Distal radioulnar joint, reconstruction or stabilisation of, including fusion, or ligamentous arthroplasty and excision of distal ulna, when performed [Anaes.] [Assist.] | DIGIT, synovectomy of flexor tendon or tendons |
| 46348 | Digit, synovectomy of flexor tendon or tendons - 1 digit [Anaes.] | DIGIT, synovectomy of flexor tendon or tendons |
| 46351 | Digit, synovectomy of flexor tendon or tendons - 2 digits [Anaes.] [Assist.] | DIGIT, synovectomy of flexor tendon or tendons |
| 46354 | Digit, synovectomy of flexor tendon or tendons - 3 digits [Anaes.] [Assist.] | DIGIT, synovectomy of flexor tendon or tendons |
| 46357 | Digit, synovectomy of flexor tendon or tendons - 4 digits [Anaes.] [Assist.] | DIGIT, synovectomy of flexor tendon or tendons |
| 46360 | Digit, synovectomy of flexor tendon or tendons - 5 digits [Anaes.] [Assist.] | TENDON SHEATH OF HAND OR WRIST, open operation on, for STENOSING TENOVAGINITIS |
| 46363 | Tendon sheath of hand or wrist, open operation on, for stenosing tenovaginitis [Anaes.] | DUPUYTREN`S CONTRACTURE, subcutaneous fasciotomy |

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| 46366 | Dupuytren`s contracture, subcutaneous fasciotomy for - each hand [Anaes.] | DUPUYTREN`S CONTRACTURE, palmar fasciectomy |
| 46369 | Dupuytren`s contracture, palmar fasciectomy for - 1 hand [Anaes.] | DUPUYTREN`S CONTRACTURE, fasciectomy |
| 46372 | Dupuytren`s contracture, fasciectomy for, from 1 ray, including dissection of nerves - 1 hand [Anaes.] [Assist.] | DUPUYTREN`S CONTRACTURE, fasciectomy |
| 46375 | Dupuytren`s contracture, fasciectomy for, from 2 rays, including dissection of nerves - 1 hand [Anaes.] [Assist.] | DUPUYTREN`S CONTRACTURE, fasciectomy |
| 46378 | Dupuytren`s contracture, fasciectomy for, from 3 or more rays, including dissection of nerves - 1 hand [Anaes.] [Assist.] | INTER-PHALANGEAL JOINT, joint capsule release |
| 46381 | Inter-phalangeal joint, joint capsule release when performed in conjunction with operation for Dupuytren`s contracture - each procedure [Anaes.] [Assist.] | Z PLASTY |
| 46384 | Z plasty [or similar local flap procedure] when performed in conjunction with operation for Dupuytren`s contracture - 1 such procedure [Anaes.] [Assist.] | DUPUYTREN`S CONTRACTURE, FASCIECTOMY |
| 46387 | Dupuytren`s contracture, fasciectomy for, from 1 ray, including dissection of nerves - operation for recurrence in that ray [Anaes.] [Assist.] | DUPUYTREN`S CONTRACTURE, FASCIECTOMY |
| 46390 | Dupuytren`s contracture, fasciectomy for, from 2 rays, including dissection of nerves - operation for recurrence in those rays [Anaes.] [Assist.] | DUPUYTREN`S CONTRACTURE, FASCIECTOMY |
| 46393 | Dupuytren`s contracture, fasciectomy for, from 3 or more rays, including dissection of nerves - operation for recurrence in those rays [Anaes.] [Assist.] | PHALANX OR METACARPAL OF THE HAND, osteotomy or osteectomy |
| 46396 | Phalanx or metacarpal of the hand, osteotomy or osteectomy of, and excluding services to which item 47933 or 47936 apply [Anaes.] [Assist.] | PHALANX OR METACARPAL OF THE HAND, osteotomy |
| 46399 | Phalanx or metacarpal of the hand, osteotomy of, with internal fixation [Anaes.] [Assist.] | PHALANX or METACARPAL, bone grafting of, for pseudarthrosis [non-union] |
| 46402 | Phalanx or metacarpal, bone grafting of, for pseudarthrosis [non-union], including obtaining of graft material [Anaes.] [Assist.] | PHALANX or METACARPAL, bone grafting of, for pseudarthrosis [non-union] |
| 46405 | Phalanx or metacarpal, bone grafting of, for pseudarthrosis [non-union], involving internal fixation and including obtaining of graft material [Anaes.] [Assist.] | TENDON, RECONSTRUCTION |
| 46408 | Tendon, reconstruction of, by tendon graft [Anaes.] [Assist.] | FLEXOR TENDON PULLEY, RECONSTRUCTION |
| 46411 | Flexor tendon pulley, reconstruction of, by graft [Anaes.] [Assist.] | ARTIFICIAL TENDON PROSTHESIS, INSERTION OF, |

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| 46414 | Artificial tendon prosthesis, insertion of in preparation for tendon grafting [Anaes.] [Assist.] | TENDON TRANSFER FOR RESTORATION OF HAND FUNCTION |
| 46417 | Tendon transfer for restoration of hand function, each transfer [Anaes.] [Assist.] | EXTENSOR TENDON OF HAND OR WRIST, PRIMARY REPAIR |
| 46420 | Extensor tendon of hand or wrist, primary repair of, each tendon [Anaes.] | EXTENSOR TENDON OF HAND OR WRIST, SECONDARY REPAIR |
| 46423 | Extensor tendon of hand or wrist, secondary repair of, each tendon [Anaes.] [Assist.] | FLEXOR TENDON OF HAND OR WRIST, PRIMARY REPAIR |
| 46426 | Flexor tendon of hand or wrist, primary repair of, proximal to A1 pulley, each tendon [Anaes.] [Assist.] | FLEXOR TENDON OF HAND OR WRIST, SECONDARY REPAIR |
| 46429 | Flexor tendon of hand or wrist, secondary repair of, proximal to A1 pulley, each tendon [Anaes.] [Assist.] | FLEXOR TENDON OF HAND, PRIMARY REPAIR |
| 46432 | Flexor tendon of hand, primary repair of, distal to A1 pulley, each tendon [Anaes.] [Assist.] | FLEXOR TENDON OF HAND, SECONDARY REPAIR |
| 46435 | Flexor tendon of hand, secondary repair of, distal to A1 pulley, each tendon [Anaes.] [Assist.] | MALLET FINGER, closed pin fixation |
| 46438 | Mallet finger, closed pin fixation of [Anaes.] | MALLET FINGER, open repair of |
| 46441 | Mallet finger, open repair of, including pin fixation when performed [Anaes.] [Assist.] | MALLET FINGER with intra articular fracture involving more than one third of base of terminal phalanx - open reduction |
| 46442 | Mallet finger with intra-articular fracture involving more than one-third of base of terminal phalanx - open reduction [Anaes.] [Assist.] | BOUTONNIERE DEFORMITY RECONSTRUCTION |
| 46444 | Boutonniere deformity without joint contracture, reconstruction of [Anaes.] [Assist.] | BOUTONNIERE DEFORMITY RECONSTRUCTION |
| 46447 | Boutonniere deformity with joint contracture, reconstruction of [Anaes.] [Assist.] | EXTENSOR TENDON, TENOLYSIS OF, |
| 46450 | Extensor tendon, tenolysis of, following tendon injury, repair or graft [Anaes.] | FLEXOR TENDON, TENOLYSIS OF, |
| 46453 | Flexor tendon, tenolysis of, following tendon injury, repair or graft [Anaes.] [Assist.] | FINGER, percutaneous tenotomy of [Anaes.] |
| 46456 | Finger, percutaneous tenotomy of [Anaes.] | OPERATION for OSTEOMYELITIS on distal phalanx |

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| 46459 | Operation for osteomyelitis on distal phalanx [Anaes.] | OPERATION for OSTEOMYELITIS on middle or proximal phalanx, metacarpal or carpus |
| 46462 | Operation for osteomyelitis on middle or proximal phalanx, metacarpal or carpus [Anaes.] [Assist.] | AMPUTATION of a supernumerary complete digit |
| 46464 | Amputation of a supernumerary complete digit [Anaes.] | AMPUTATION of DIGIT, proximal to nail bed |
| 46465 | Amputation of single digit, proximal to nail bed, involving section of bone or joint and requiring soft tissue cover [Anaes.] | AMPUTATION of DIGIT, proximal to nail bed |
| 46468 | Amputation of 2 digits, proximal to nail bed, involving section of bone or joint and requiring soft tissue cover [Anaes.] [Assist.] | AMPUTATION of DIGIT, proximal to nail bed |
| 46471 | Amputation of 3 digits, proximal to nail bed, involving section of bone or joint and requiring soft tissue cover [Anaes.] [Assist.] | AMPUTATION of DIGIT, proximal to nail bed |
| 46474 | Amputation of 4 digits, proximal to nail bed, involving section of bone or joint and requiring soft tissue cover [Anaes.] [Assist.] | AMPUTATION of DIGIT, proximal to nail bed |
| 46477 | Amputation of 5 digits, proximal to nail bed, involving section of bone or joint and requiring soft tissue cover [Anaes.] [Assist.] | AMPUTATION of DIGIT, proximal to nail bed |
| 46480 | Amputation of single digit, proximal to nail bed, involving section of bone or joint and requiring soft tissue cover, including metacarpal [Anaes.] [Assist.] | REVISION OF AMPUTATION STUMP |
| 46483 | Revision of amputation stump to provide adequate soft tissue cover [Anaes.] [Assist.] | NAIL BED, ACCURATE RECONSTRUCTION |
| 46486 | Nail bed, accurate reconstruction of nail bed laceration using magnification, undertaken in the operating theatre of a hospital [Anaes.] | NAIL BED, SECONDARY EXPLORATION AND REPAIR |
| 46489 | Nail bed, secondary exploration and accurate repair of nail bed deformity using magnification, undertaken in the operating theatre of a hospital [Anaes.] [Assist.] | CONTRACTURE OF DIGITS OF HAND, REPAIR |
| 46492 | Contracture of digits of hand, flexor or extensor, correction of, involving tissues deeper than skin and subcutaneous tissue [Anaes.] [Assist.] | GANGLION OF HAND, EXCISION OF |
| 46494 | Ganglion of hand, excision of, not being a service associated with a service to which another item in this Group applies [Anaes.] | GANGLION OR MUCOUS CYST OF DISTAL DIGIT, EXCISION OF |
| 46495 | GANGLION OR MUCOUS CYST OF DISTAL DIGIT, excision of, other than a service associated with a service to which item 30107 applies [Anaes.] | GANGLION OF FLEXOR TENDON SHEATH, EXCISION OF |
| 46498 | GANGLION OF FLEXOR TENDON SHEATH, excision of, other than a service associated with a service to which item 30107 applies [Anaes.] | GANGLION OF DORSAL WRIST JOINT, EXCISION OF |

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| 46500 | GANGLION OF DORSAL WRIST JOINT, excision of, other than a service associated with a service to which item 30107 applies [Anaes.] [Assist.] | GANGLION OF VOLAR WRIST JOINT, EXCISION OF |
| 46501 | GANGLION OF VOLAR WRIST JOINT, excision of, other than a service associated with a service to which item 30107 applies [Anaes.] [Assist.] | RECURRENT GANGLION OF DORSAL WRIST JOINT, EXCISION OF |
| 46502 | RECURRENT GANGLION OF DORSAL WRIST JOINT, excision of, other than a service associated with a service to which item 30107 applies [Anaes.] [Assist.] | RECURRENT GANGLION OF VOLAR WRIST JOINT, EXCISION OF |
| 46503 | RECURRENT GANGLION OF VOLAR WRIST JOINT, excision of, other than a service associated with a service to which item 30107 applies [Anaes.] [Assist.] | NEUROVASCULAR ISLAND FLAP |
| 46504 | Neurovascular island flap, for pulp innervation [Anaes.] [Assist.] | DIGIT OR RAY, TRANSPOSITION OR TRANSFER OF |
| 46507 | Digit or ray, transposition or transfer of, on vascular pedicle, complete procedure [Anaes.] [Assist.] | MACRODACTYLY, SURGICAL REDUCTION OF ENLARGED ELEMENTS |
| 46510 | Macroductyly, surgical reduction of enlarged elements - each digit [Anaes.] [Assist.] | DIGITAL NAIL OF FINGER OR THUMB, REMOVAL |
| 46513 | Digital nail of finger or thumb, removal of, not being a service to which item 46516 applies [Anaes.] | DIGITAL NAIL OF FINGER OR THUMB, REMOVAL |
| 46516 | Digital nail of finger or thumb, removal of, in the operating theatre of a hospital [Anaes.] | MIDDLE PALMAR, THENAR OR HYPOTHENAR SPACES OF HAND, DRAINAGE |
| 46519 | Middle palmar, thenar or hypothenar spaces of hand, drainage of [excluding aftercare] [Anaes.] | FLEXOR TENDON SHEATH OF FINGER OR THUMB, OPEN OPERATION AND DRAINAGE |
| 46522 | Flexor tendon sheath of finger or thumb - open operation and drainage for infection [Anaes.] [Assist.] | PULP SPACE INFECTION, PARONYCHIA OF HAND, INCISION FOR |
| 46525 | Pulp space infection, paronychia of hand, incision for, when performed in an operating theatre of a hospital, not being a service to which another item in this Group applies [excluding after-care] [Anaes.] | INGROWING NAIL OF FINGER OR THUMB, WEDGE RESECTION |
| 46528 | Ingrowing nail of finger or thumb, wedge resection for, including removal of segment of nail, unguis fold and portion of the nail bed [Anaes.] | INGROWING NAIL OF FINGER OR THUMB, PARTIAL RESECTION |
| 46531 | Ingrowing nail of finger or thumb, partial resection of nail, including phenolisation but not including excision of nail bed [Anaes.] | NAIL PLATE INJURY OR DEFORMITY, RADICAL EXCISION OF NAIL |
| 46534 | Nail plate injury or deformity, radical excision of nail germinal matrix [Anaes.] | MANDIBLE, treatment of dislocation of, by closed reduction |

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| 47000 | Mandible, treatment of dislocation of, by closed reduction [Anaes.] | CLAVICLE, treatment of dislocation of, by closed reduction |
| 47003 | Clavicle, treatment of dislocation of, by closed reduction [Anaes.] | CLAVICLE, treatment of dislocation of, by open reduction |
| 47006 | Clavicle, treatment of dislocation of, by open reduction [Anaes.] | SHOULDER, treatment of dislocation of, requiring general anaesthesia |
| 47009 | Shoulder, treatment of dislocation of, requiring general anaesthesia, not being a service to which item 47012 applies [Anaes.] | SHOULDER, treatment of dislocation of, requiring general anaesthesia |
| 47012 | Shoulder, treatment of dislocation of, requiring general anaesthesia, open reduction [Anaes.] [Assist.] | SHOULDER, treatment of dislocation of, NOT requiring general anaesthesia |
| 47015 | Shoulder, treatment of dislocation of, not requiring general anaesthesia | ELBOW, treatment of dislocation of, by closed reduction |
| 47018 | Elbow, treatment of dislocation of, by closed reduction [Anaes.] | ELBOW, treatment of dislocation of, by open reduction |
| 47021 | Elbow, treatment of dislocation of, by open reduction [Anaes.] [Assist.] | RADIOULNAR JOINT, DISTAL or PROXIMAL, treatment of dislocation of, by closed reduction |
| 47024 | Radioulnar joint, distal or proximal, treatment of dislocation of, by closed reduction, not being a service associated with fracture or dislocation in the same region [Anaes.] | RADIOULNAR JOINT, DISTAL or PROXIMAL, treatment of dislocation of, by open reduction |
| 47027 | Radioulnar joint, distal or proximal, treatment of dislocation of, by open reduction, not being a service associated with fracture or dislocation in the same region [Anaes.] [Assist.] | CARPUS, or CARPUS on RADIUS and ULNA, or CARPOMETACARPAL JOINT, treatment of dislocation of, by closed reduction |
| 47030 | Carpus, or carpus on radius and ulna, or carpometacarpal joint, treatment of dislocation of, by closed reduction [Anaes.] | CARPUS, or CARPUS on RADIUS and ULNA, or CARPOMETACARPAL JOINT, treatment of dislocation of, by OPEN reduction |
| 47033 | Carpus, or carpus on radius and ulna, or carpometacarpal joint, treatment of dislocation of, by open reduction [Anaes.] [Assist.] | INTERPHALANGEAL JOINT, treatment of dislocation of, by closed reduction |
| 47036 | Interphalangeal joint, treatment of dislocation of, by closed reduction [Anaes.] | INTERPHALANGEAL JOINT, treatment of dislocation of, by open reduction |
| 47039 | Interphalangeal joint, treatment of dislocation of, by open reduction [Anaes.] | METACARPOPHALANGEAL JOINT, treatment of dislocation of, by closed reduction |
| 47042 | Metacarpophalangeal joint, treatment of dislocation of, by closed reduction [Anaes.] | METACARPOPHALANGEAL JOINT, treatment |

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| | of dislocation of, by open reduction |
| 47045 Metacarpophalangeal joint, treatment of dislocation of, by open reduction [Anaes.] | HIP, treatment of dislocation of, by closed reduction |
| 47048 Hip, treatment of dislocation of, by closed reduction [Anaes.] | HIP, treatment of dislocation of, by open reduction |
| 47051 Hip, treatment of dislocation of, by open reduction [Anaes.] [Assist.] | KNEE, treatment of dislocation of, by closed reduction |
| 47054 Knee, treatment of dislocation of, by closed reduction [Anaes.] [Assist.] | PATELLA, treatment of dislocation of, by closed reduction |
| 47057 Patella, treatment of dislocation of, by closed reduction [Anaes.] | PATELLA, treatment of dislocation of, by open reduction |
| 47060 Patella, treatment of dislocation of, by open reduction [Anaes.] | ANKLE or TARSUS, treatment of dislocation of, by closed reduction |
| 47063 Ankle or tarsus, treatment of dislocation of, by closed reduction [Anaes.] | ANKLE or TARSUS, treatment of dislocation of, by open reduction |
| 47066 Ankle or tarsus, treatment of dislocation of, by open reduction [Anaes.] [Assist.] | TOE, treatment of dislocation of, by closed reduction |
| 47069 Toe, treatment of dislocation of, by closed reduction [Anaes.] | TOE, treatment of dislocation of, by open reduction |
| 47072 Toe, treatment of dislocation of, by open reduction [Anaes.] | Phalanx, middle or proximal, treatment of fracture of, by closed reduction, requiring anaesthesia |
| 47301 Phalanx, middle or proximal, treatment of fracture of, by closed reduction, requiring anaesthesia, not provided on the same occasion as a service described in item 47304, 47307, 47310, 47313, 47316 or 47319 [Anaes.] | Metacarpal, treatment of fracture of, by closed reduction, requiring anaesthesia |
| 47304 Metacarpal, treatment of fracture of, by closed reduction, requiring anaesthesia, not provided on the same occasion as a service described in item 47301, 47307, 47310, 47313, 47316 or 47319 [Anaes.] | Phalanx or metacarpal, treatment of fracture of, by closed reduction |
| 47307 Phalanx or metacarpal, treatment of fracture of, by closed reduction with percutaneous k wire fixation [Anaes.] [Assist.] | Phalanx or metacarpal, treatment of fracture of, by open reduction |
| 47310 Phalanx or metacarpal, treatment of fracture of, by open reduction with fixation [Anaes.] [Assist.] | Phalanx or metacarpal, treatment of intra articular fracture of, by closed reduction |

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| 47313 | Phalanx or metacarpal, treatment of intra articular fracture of, by closed reduction with percutaneous k wire fixation [Anaes.] [Assist.] | Phalanx or metacarpal, treatment of intra articular fracture of, by open reduction |
| 47316 | Phalanx or metacarpal, treatment of intra articular fracture of, by open reduction with fixation, not provided on the same occasion as a service to which item 47319 applies [Anaes.] [Assist.] | Middle phalanx, proximal end, treatment of intra articular fracture of, by open reduction |
| 47319 | Middle phalanx, proximal end, treatment of intra articular fracture of, by open reduction with fixation, not provided on the same occasion as a service to which item 47316 applies [Anaes.] [Assist.] | CARPUS [excluding scaphoid], treatment of fracture |
| 47348 | Carpus [excluding scaphoid], treatment of fracture of, not being a service to which item 47351 applies [Anaes.] | CARPUS [excluding scaphoid], treatment of fracture of, by open reduction |
| 47351 | Carpus [excluding scaphoid], treatment of fracture of, by open reduction [Anaes.] | CARPAL SCAPHOID, treatment of fracture of |
| 47354 | Carpal scaphoid, treatment of fracture of, not being a service to which item 47357 applies [Anaes.] | CARPAL SCAPHOID, treatment of fracture of, by open reduction |
| 47357 | Carpal scaphoid, treatment of fracture of, by open reduction [Anaes.] [Assist.] | Radius or ulna, or radius and ulna, distal end of, treatment of fracture of, by cast immobilisation |
| 47361 | Radius or ulna, or radius and ulna, distal end of, treatment of fracture of, by cast immobilisation, other than a service associated with a service to which item 47362, 47364, 47367, 47370 or 47373 applies | Radius or ulna, or radius and ulna, distal end of, treatment of fracture of, by closed reduction |
| 47362 | Radius or ulna, or radius and ulna, distal end of, treatment of fracture of, by closed reduction, requiring general or major regional anaesthesia, but excluding local infiltration, other than a service associated with a service to which item 47361, 47364, 47367, 47370 or 47373 applies [Anaes.] | Radius or ulna, distal end of, not involving joint surface, treatment of fracture of, by open reduction |
| 47364 | Radius or ulna, distal end of, not involving joint surface, treatment of fracture of, by open reduction with fixation, other than a service associated with a service to which item 47361 or 47362 applies [Anaes.] [Assist.] | Radius, distal end of, treatment of fracture of, by closed reduction |
| 47367 | Radius, distal end of, treatment of fracture of, by closed reduction with percutaneous fixation, other than a service associated with a service to which item 47361 or 47362 applies [Anaes.] [Assist.] | Radius, distal end of, treatment of intra articular fracture of, by open reduction |
| 47370 | Radius, distal end of, treatment of intra articular fracture of, by open reduction with fixation, other than a service associated with a service to which item 47361 or 47362 applies [Anaes.] [Assist.] | Ulna, distal end of, treatment of intra articular fracture of, by open reduction |
| 47373 | Ulna, distal end of, treatment of intra articular fracture of, by open reduction with fixation, other than a service associated with a service to which item 47361 or 47362 applies [Anaes.] [Assist.] | RADIUS OR ULNA, shaft of, treatment of fracture of, by cast immobilisation |
| 47378 | Radius or ulna, shaft of, treatment of fracture of, by cast immobilisation, not being a service to which item 47381, 47384, 47385 or 47386 applies [Anaes.] | RADIUS OR ULNA, shaft of, treatment of fracture of, by closed reduction |
| 47381 | Radius or ulna, shaft of, treatment of fracture of, by closed reduction undertaken in the operating theatre of a hospital [Anaes.] | RADIUS OR ULNA, shaft of, treatment of fracture of, by open reduction |

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| 47384 | Radius or ulna, shaft of, treatment of fracture of, by open reduction [Anaes.] [Assist.] | RADIUS OR ULNA, shaft of, treatment of fracture of, by closed reduction |
| 47385 | Radius or ulna, shaft of, treatment of fracture of, in conjunction with dislocation of distal radio-ulnar joint or proximal radio-humeral joint [Galeazzi or Monteggia injury], by closed reduction undertaken in the operating theatre of a hospital [Anaes.] [Assist.] | RADIUS OR ULNA, shaft of, treatment of fracture of, by open reduction or internal fixation |
| 47386 | Radius or ulna, shaft of, treatment of fracture of, in conjunction with dislocation of distal radio-ulnar joint or proximal radio-humeral joint [Galeazzi or Monteggia injury], by open reduction or internal fixation [Anaes.] [Assist.] | RADIUS AND ULNA, shafts of, treatment of fracture of, by cast immobilisation |
| 47387 | Radius and ulna, shafts of, treatment of fracture of, by cast immobilisation, not being a service to which item 47390 or 47393 applies [Anaes.] [Assist.] | RADIUS AND ULNA, shafts of, treatment of fracture of, by closed reduction |
| 47390 | Radius and ulna, shafts of, treatment of fracture of, by closed reduction, undertaken in the operating theatre of a hospital [Anaes.] | RADIUS AND ULNA, shafts of, treatment of fracture of, by open reduction |
| 47393 | Radius and ulna, shafts of, treatment of fracture of, by open reduction [Anaes.] [Assist.] | OLECRANON, treatment of fracture of |
| 47396 | Olecranon, treatment of fracture of, not being a service to which item 47399 applies [Anaes.] | OLECRANON, treatment of fracture of, by open reduction |
| 47399 | Olecranon, treatment of fracture of, by open reduction [Anaes.] [Assist.] | OLECRANON, treatment of fracture of, involving excision of olecranon fragment and reimplantation of tendon |
| 47402 | Olecranon, treatment of fracture of, involving excision of olecranon fragment and reimplantation of tendon [Anaes.] [Assist.] | RADIUS, treatment of fracture of head or neck of, closed reduction |
| 47405 | Radius, treatment of fracture of head or neck of, closed reduction of [Anaes.] | RADIUS, treatment of fracture of head or neck of, open reduction |
| 47408 | Radius, treatment of fracture of head or neck of, open reduction of, including internal fixation and excision where performed [Anaes.] [Assist.] | HUMERUS, treatment of fracture of tuberosity of |
| 47411 | Humerus, treatment of fracture of tuberosity of, not being a service to which item 47417 applies [Anaes.] | HUMERUS, treatment of fracture of tuberosity of, by open reduction |
| 47414 | Humerus, treatment of fracture of tuberosity of, by open reduction [Anaes.] | HUMERUS, treatment of fracture of tuberosity of, and associated dislocation of shoulder, by closed reduction |
| 47417 | Humerus, treatment of fracture of tuberosity of, and associated dislocation of shoulder, by closed reduction [Anaes.] [Assist.] | HUMERUS, treatment of fracture of tuberosity of, and associated dislocation of shoulder, by open reduction |

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| 47420 | Humerus, treatment of fracture of tuberosity of, and associated dislocation of shoulder, by open reduction [Anaes.] [Assist.] | HUMERUS, proximal, treatment of fracture of |
| 47423 | Humerus, proximal, treatment of fracture of, not being a service to which item 47426, 47429 or 47432 applies [Anaes.] | HUMERUS, proximal, treatment of fracture of, by closed reduction |
| 47426 | Humerus, proximal, treatment of fracture of, by closed reduction, undertaken in the operating theatre of a hospital [Anaes.] | HUMERUS, proximal, treatment of fracture of, by open reduction |
| 47429 | Humerus, proximal, treatment of fracture of, by open reduction [Anaes.] [Assist.] | HUMERUS, proximal, treatment of intra-articular fracture of, by open reduction |
| 47432 | Humerus, proximal, treatment of intra-articular fracture of, by open reduction [Anaes.] [Assist.] | HUMERUS, proximal, treatment of fracture of, and associated dislocation of shoulder, by closed reduction |
| 47435 | Humerus, proximal, treatment of fracture of, and associated dislocation of shoulder, by closed reduction [Anaes.] [Assist.] | HUMERUS, proximal, treatment of fracture of, and associated dislocation of shoulder, by open reduction |
| 47438 | Humerus, proximal, treatment of fracture of, and associated dislocation of shoulder, by open reduction [Anaes.] [Assist.] | Humerus, proximal, treatment of fracture of, and associated dislocation of shoulder, by open reduction |
| 47441 | Humerus, proximal, treatment of intra-articular fracture of, and associated dislocation of shoulder, by open reduction [Anaes.] [Assist.] | HUMERUS, shaft of, treatment of fracture of |
| 47444 | Humerus, shaft of, treatment of fracture of, not being a service to which item 47447 or 47450 applies [Anaes.] | HUMERUS, shaft of, treatment of fracture of, by closed reduction |
| 47447 | Humerus, shaft of, treatment of fracture of, by closed reduction, undertaken in the operating theatre of a hospital [Anaes.] | HUMERUS, shaft of, treatment of fracture of, by internal or external fixation |
| 47450 | Humerus, shaft of, treatment of fracture of, by internal or external [Anaes.] [Assist.] | HUMERUS, shaft of, treatment of fracture of, by intramedullary fixation |
| 47451 | Humerus, shaft of, treatment of fracture of, by intramedullary fixation [Anaes.] [Assist.] | HUMERUS, distal, [supracondylar or condylar], treatment of fracture of |
| 47453 | Humerus, distal, [supracondylar or condylar], treatment of fracture of, not being a service to which item 47456 or 47459 applies [Anaes.] [Assist.] | HUMERUS, distal [supracondylar or condylar], treatment of fracture of, by closed reduction |
| 47456 | Humerus, distal [supracondylar or condylar], treatment of fracture of, by closed reduction, undertaken in the operating theatre of a hospital [Anaes.] | HUMERUS, distal [supracondylar or condylar], treatment of fracture of, by open reduction |

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| 47459 | Humerus, distal [supracondylar or condylar], treatment of fracture of, by open reduction, undertaken in the operating theatre of a hospital [Anaes.] [Assist.] | CLAVICLE, treatment of fracture of |
| 47462 | Clavicle, treatment of fracture of, not being a service to which item 47465 applies [Anaes.] | CLAVICLE, treatment of fracture of, by open reduction |
| 47465 | Clavicle, treatment of fracture of, by open reduction [Anaes.] [Assist.] | STERNUM, treatment of fracture of |
| 47466 | Sternum, treatment of fracture of, not being a service to which item 47467 applies [Anaes.] | STERNUM, treatment of fracture of, by open reduction |
| 47467 | Sternum, treatment of fracture of, by open reduction [Anaes.] | SCAPULA, neck or glenoid region of, treatment of fracture of, by open reduction |
| 47468 | Scapula, neck or glenoid region of, treatment of fracture of, by open reduction [Anaes.] [Assist.] | RIBS [1 or more], treatment of fracture of - each attendance |
| 47471 | Ribs [1 or more], treatment of fracture of - each attendance | PELVIC RING, treatment of fracture of |
| 47474 | Pelvic ring, treatment of fracture of, not involving disruption of pelvic ring or acetabulum | PELVIC RING, treatment of fracture of |
| 47477 | Pelvic ring, treatment of fracture of, with disruption of pelvic ring or acetabulum | PELVIC RING, treatment of fracture of |
| 47480 | Pelvic ring, treatment of fracture of, requiring traction [Anaes.] [Assist.] | PELVIC RING, treatment of fracture of |
| 47483 | Pelvic ring, treatment of fracture of, requiring control by external fixation [Anaes.] [Assist.] | PELVIC RING, treatment of fracture of, by open reduction |
| 47486 | Pelvic ring, treatment of fracture of, by open reduction and involving internal fixation of anterior segment, including diastasis of pubic symphysis [Anaes.] [Assist.] | PELVIC RING, treatment of fracture of, by open reduction |
| 47489 | Pelvic ring, treatment of fracture of, by open reduction and involving internal fixation of posterior segment [including sacro-iliac joint], with or without fixation of anterior segment [Anaes.] [Assist.] | ACETABULUM, treatment of fracture of |
| 47492 | Acetabulum, treatment of fracture of, and associated dislocation of hip [Anaes.] | ACETABULUM, treatment of fracture of, and associated dislocation of hip |
| 47495 | Acetabulum, treatment of fracture of, and associated dislocation of hip, requiring traction [Anaes.] [Assist.] | ACETABULUM, treatment of fracture of, and associated dislocation of hip |
| 47498 | Acetabulum, treatment of fracture of, and associated dislocation of hip, requiring internal fixation, with or without traction [Anaes.] [Assist.] | ACETABULUM, treatment of single column fracture of, by open reduction and internal fixation |

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| 47501 | Acetabulum, treatment of single column fracture of, by open reduction and internal fixation, including any osteotomy, osteectomy or capsulotomy required for exposure and subsequent repair, and excluding services to which item 47933 or 47936 apply [Anaes.] [Assist.] | ACETABULUM, treatment of T-shape fracture of, by open reduction and internal fixation |
| 47504 | Acetabulum, treatment of T-shape fracture of, by open reduction and internal fixation, including any osteotomy, osteectomy or capsulotomy required for exposure and subsequent repair, and excluding services to which item 47933 or 47936 apply [Anaes.] [Assist.] | ACETABULUM, treatment of transverse fracture of, by open reduction and internal fixation |
| 47507 | Acetabulum, treatment of transverse fracture of, by open reduction and internal fixation, including any osteotomy, osteectomy or capsulotomy required for exposure and subsequent repair, and excluding services to which item 47933 or 47936 apply [Anaes.] [Assist.] | ACETABULUM, treatment of double column fracture of, by open reduction and internal fixation |
| 47510 | Acetabulum, treatment of double column fracture of, by open reduction and internal fixation, including any osteotomy, osteectomy or capsulotomy required for exposure and subsequent repair, and excluding services to which item 47933 or 47936 apply [Anaes.] [Assist.] | SACRO-ILIAC JOINT DISRUPTION, treatment of, requiring internal fixation |
| 47513 | Sacro-iliac joint disruption, treatment of, requiring internal fixation, being a service associated with a service to which items 47501 to 47510 apply [Anaes.] [Assist.] | FEMUR, treatment of fracture of, by closed reduction or traction |
| 47516 | Femur, treatment of fracture of, by closed reduction or traction [Anaes.] [Assist.] | FEMUR, treatment of trochanteric or subcapital fracture of, by internal fixation |
| 47519 | Femur, treatment of trochanteric or subcapital fracture of, by internal fixation [Anaes.] [Assist.] | FEMUR, treatment of subcapital fracture of, by hemi-arthroplasty |
| 47522 | Femur, treatment of subcapital fracture of, by hemi-arthroplasty [Anaes.] [Assist.] | FEMUR, treatment of fracture of, for slipped capital femoral epiphysis |
| 47525 | Femur, treatment of fracture of, for slipped capital femoral epiphysis [Anaes.] [Assist.] | FEMUR, treatment of fracture of, by internal fixation or external fixation |
| 47528 | Femur, treatment of fracture of, by internal fixation or external fixation [Anaes.] [Assist.] | FEMUR, treatment of fracture of shaft, by intramedullary fixation and cross fixation |
| 47531 | Femur, treatment of fracture of shaft, by intramedullary fixation and cross fixation [Anaes.] [Assist.] | FEMUR, condylar region of, treatment of intra-articular [T-shaped condylar] fracture of, requiring internal fixation |
| 47534 | Femur, condylar region of, treatment of intra-articular [T-shaped condylar] fracture of, requiring internal fixation, with or without internal fixation of 1 or more osteochondral fragments [Anaes.] [Assist.] | FEMUR, condylar region of, treatment of fracture of, requiring internal fixation of 1 or more osteochondral fragments |
| 47537 | Femur, condylar region of, treatment of fracture of, requiring internal fixation of 1 or more osteochondral fragments, not being a service associated with a service to which item 47534 applies [Anaes.] [Assist.] | HIP SPICA OR SHOULDER SPICA, APPLICATION OF |

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| 47540 | Hip spica or shoulder spica, application of, as an independent procedure [Anaes.] | TIBIA, plateau of, treatment of medial or lateral fracture of |
| 47543 | Tibia, plateau of, treatment of medial or lateral fracture of, not being a service to which item 47546 or 47549 applies [Anaes.] | TIBIA, plateau of, treatment of medial or lateral fracture of, by closed reduction |
| 47546 | Tibia, plateau of, treatment of medial or lateral fracture of, by closed reduction [Anaes.] | TIBIA, plateau of, treatment of medial or lateral fracture of, by open reduction |
| 47549 | Tibia, plateau of, treatment of medial or lateral fracture of, by open reduction [Anaes.] [Assist.] | TIBIA, plateau of, treatment of both medial and lateral fractures of |
| 47552 | Tibia, plateau of, treatment of both medial and lateral fractures of, not being a service to which item 47555 or 47558 applies [Anaes.] [Assist.] | TIBIA, plateau of, treatment of both medial and lateral fractures of, by closed reduction |
| 47555 | Tibia, plateau of, treatment of both medial and lateral fractures of, by closed reduction [Anaes.] | TIBIA, plateau of, treatment of both medial and lateral fractures of, by open reduction |
| 47558 | Tibia, plateau of, treatment of both medial and lateral fractures of, by open reduction [Anaes.] [Assist.] | TIBIA, shaft of, treatment of fracture of, by cast immobilisation |
| 47561 | Tibia, shaft of, treatment of fracture of, by cast immobilisation, not being a service to which item 47564, 47567, 47570 or 47573 applies [Anaes.] | TIBIA, shaft of, treatment of fracture of, by closed reduction |
| 47564 | Tibia, shaft of, treatment of fracture of, by closed reduction, with or without treatment of fibular fracture [Anaes.] | TIBIA, shaft of, treatment of fracture of, by internal fixation or external fixation |
| 47565 | Tibia, shaft of, treatment of fracture of, by internal fixation or external fixation [Anaes.] [Assist.] | TIBIA, shaft of, treatment of fracture of, by intramedullary fixation and cross fixation |
| 47566 | Tibia, shaft of, treatment of fracture of, by intramedullary fixation and cross fixation [Anaes.] [Assist.] | TIBIA, shaft of, treatment of intra-articular fracture of, by closed reduction |
| 47567 | Tibia, shaft of, treatment of intra-articular fracture of, by closed reduction, with or without treatment of fibular fracture [Anaes.] [Assist.] | TIBIA, shaft of, treatment of fracture of, by open reduction |
| 47570 | Tibia, shaft of, treatment of fracture of, by open reduction, with or without treatment of fibular fracture [Anaes.] [Assist.] | TIBIA, shaft of, treatment of intra-articular fracture of, by open reduction |
| 47573 | Tibia, shaft of, treatment of intra-articular fracture of, by open reduction, with or without treatment of fibular fracture [Anaes.] [Assist.] | FIBULA, treatment of fracture of |
| 47576 | Fibula, treatment of fracture of [Anaes.] | PATELLA, treatment of fracture of |
| 47579 | Patella, treatment of fracture of, not being a service to which item 47582 or 47585 applies [Anaes.] | PATELLA, treatment of fracture of, by excision |

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| | | of patella or pole with reattachment of tendon |
| 47582 | Patella, treatment of fracture of, by excision of patella or pole with reattachment of tendon [Anaes.] [Assist.] | PATELLA, treatment of fracture of, by internal fixation |
| 47585 | Patella, treatment of fracture of, by internal fixation [Anaes.] [Assist.] | KNEE JOINT, treatment of fracture of, by internal fixation of intra-articular fractures of femoral condylar or tibial articular surfaces |
| 47588 | Knee joint, treatment of fracture of, by internal fixation of intra-articular fractures of femoral condylar or tibial articular surfaces and requiring repair or reconstruction of 1 or more ligaments [Anaes.] [Assist.] | KNEE JOINT, treatment of fracture of, by internal fixation of intra-articular fractures of femoral condylar and tibial articular surfaces |
| 47591 | Knee joint, treatment of fracture of, by internal fixation of intra-articular fractures of femoral condylar and tibial articular surfaces and requiring repair or reconstruction of 1 or more ligaments [Anaes.] [Assist.] | ANKLE JOINT, treatment of fracture of |
| 47594 | Ankle joint, treatment of fracture of, not being a service to which item 47597 applies [Anaes.] | ANKLE JOINT, treatment of fracture of, by closed reduction |
| 47597 | Ankle joint, treatment of fracture of, by closed reduction [Anaes.] | ANKLE JOINT, treatment of fracture of, by internal fixation |
| 47600 | Ankle joint, treatment of fracture of, by internal fixation of 1 of malleolus, fibula or diastasis [Anaes.] [Assist.] | ANKLE JOINT, treatment of fracture of, by internal fixation |
| 47603 | Ankle joint, treatment of fracture of, by internal fixation of more than 1 of malleolus, fibula or diastasis [Anaes.] [Assist.] | CALCANEUM OR TALUS, treatment of fracture of |
| 47606 | Calcaneum or talus, treatment of fracture of, not being a service to which item 47609, 47612, 47615 or 47618 applies, with or without dislocation [Anaes.] | CALCANEUM OR TALUS, treatment of fracture of, by closed reduction |
| 47609 | Calcaneum or talus, treatment of fracture of, by closed reduction, with or without dislocation [Anaes.] [Assist.] | CALCANEUM OR TALUS, treatment of intra-articular fracture of, by closed reduction |
| 47612 | Calcaneum or talus, treatment of intra-articular fracture of, by closed reduction, with or without dislocation [Anaes.] [Assist.] | CALCANEUM OR TALUS, treatment of fracture of, by open reduction |
| 47615 | Calcaneum or talus, treatment of fracture of, by open reduction, with or without dislocation [Anaes.] [Assist.] | CALCANEUM OR TALUS, treatment of intra-articular fracture of, by open reduction |
| 47618 | Calcaneum or talus, treatment of intra-articular fracture of, by open reduction, with or without dislocation [Anaes.] [Assist.] | TARSO-METATARSAL, treatment of intra-articular fracture of, by closed reduction |
| 47621 | Tarso-metatarsal, treatment of intra-articular fracture of, by closed reduction, with or without dislocation [Anaes.] [Assist.] | TARSO-METATARSAL, treatment of fracture of, by open reduction |

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| 47624 | Tarso-metatarsal, treatment of fracture of, by open reduction, with or without dislocation [Anaes.] [Assist.] | TARSUS [excluding calcaneum or talus], treatment of fracture of |
| 47627 | Tarsus [excluding calcaneum or talus], treatment of fracture of [Anaes.] | TARSUS [excluding calcaneum or talus], treatment of fracture of, by open reduction |
| 47630 | Tarsus [excluding calcaneum or talus], treatment of fracture of, by open reduction, with or without dislocation [Anaes.] [Assist.] | METATARSAL, 1 of, treatment of fracture of |
| 47633 | Metatarsal, 1 of, treatment of fracture of [Anaes.] | METATARSAL, 1 of, treatment of fracture of, by closed reduction |
| 47636 | Metatarsal, 1 of, treatment of fracture of, by closed reduction [Anaes.] | METATARSAL, 1 of, treatment of fracture of, by open reduction |
| 47639 | Metatarsal, 1 of, treatment of fracture of, by open reduction [Anaes.] | METATARSALS, 2 of, treatment of fracture of |
| 47642 | Metatarsals, 2 of, treatment of fracture of [Anaes.] | METATARSALS, 2 of, treatment of fracture of, by closed reduction |
| 47645 | Metatarsals, 2 of, treatment of fracture of, by closed reduction [Anaes.] | METATARSALS, 2 of, treatment of fracture of, by open reduction |
| 47648 | Metatarsals, 2 of, treatment of fracture of, by open reduction [Anaes.] [Assist.] | METATARSALS, 3 or more of, treatment of fracture of |
| 47651 | Metatarsals, 3 or more of, treatment of fracture of [Anaes.] | METATARSALS, 3 or more of, treatment of fracture of, by closed reduction |
| 47654 | Metatarsals, 3 or more of, treatment of fracture of, by closed reduction [Anaes.] [Assist.] | METATARSALS, 3 or more of, treatment of fracture of, by open reduction |
| 47657 | Metatarsals, 3 or more of, treatment of fracture of, by open reduction [Anaes.] [Assist.] | PHALANX OF GREAT TOE, treatment of fracture of, by closed reduction |
| 47663 | Phalanx of great toe, treatment of fracture of, by closed reduction [Anaes.] | PHALANX OF GREAT TOE, treatment of fracture of, by open reduction |
| 47666 | Phalanx of great toe, treatment of fracture of, by open reduction [Anaes.] | PHALANX OF TOE [other than great toe], 1 of, treatment of fracture of, by open reduction |
| 47672 | Phalanx of toe [other than great toe], 1 of, treatment of fracture of, by open reduction [Anaes.] | PHALANX OF TOE [other than great toe], more than 1 of, treatment of fracture of, by open reduction |

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| 47678 | Phalanx of toe [other than great toe], more than 1 of, treatment of fracture of, by open reduction [Anaes.] | SPINE [excluding sacrum], treatment of fracture of transverse process, vertebral body, or posterior elements |
| 47681 | Spine [excluding sacrum], treatment of fracture of transverse process, vertebral body, or posterior elements - each attendance | SPINE, treatment of fracture, dislocation or fracture-dislocation, without spinal cord involvement, with immobilisation by calipers or halo |
| 47684 | Spine, treatment of fracture, dislocation or fracture-dislocation, without spinal cord involvement, with immobilisation by calipers or halo [Anaes.] [Assist.] | SPINE, treatment of fracture, dislocation or fracture-dislocation, with spinal cord involvement, with immobilisation by calipers or halo |
| 47687 | Spine, treatment of fracture, dislocation or fracture-dislocation, with spinal cord involvement, with immobilisation by calipers or halo, and including up to 14 days post-operative care [Assist.] | SPINE, treatment of fracture, dislocation or fracture-dislocation, without cord involvement, with immobilisation by calipers or halo, requiring reduction by closed manipulation |
| 47690 | Spine, treatment of fracture, dislocation or fracture-dislocation, without cord involvement, with immobilisation by calipers or halo, requiring reduction by closed manipulation [Anaes.] [Assist.] | SPINE, treatment of fracture, dislocation or fracture-dislocation, with cord involvement, with immobilisation by calipers or halo, requiring reduction by closed manipulation |
| 47693 | Spine, treatment of fracture, dislocation or fracture-dislocation, with cord involvement, with immobilisation by calipers or halo, requiring reduction by closed manipulation, including up to 14 days post-operative care [Assist.] | SPINE, reduction of fracture or dislocation of, without cord involvement |
| 47696 | Spine, reduction of fracture or dislocation of, without cord involvement, undertaken in the operating theatre of a hospital [Anaes.] [Assist.] | SPINE, treatment of fracture, dislocation or fracture-dislocation, without cord involvement, requiring open reduction |
| 47699 | Spine, treatment of fracture, dislocation or fracture-dislocation without cord involvement requiring open reduction with or without internal fixation [Anaes.] [Assist.] | SPINE, treatment of fracture, dislocation or fracture-dislocation, with cord involvement, requiring open reduction |
| 47702 | Spine, treatment of fracture, dislocation or fracture-dislocation with cord involvement requiring open reduction with or without internal fixation, including up to 14 days post-operative care [Anaes.] [Assist.] | SKULL, treatment of fracture of, each attendance |
| 47703 | Skull, treatment of fracture of, each attendance | SKULL CALIPERS, insertion of, as an independent procedure |
| 47705 | Skull calipers, insertion of, as an independent procedure [Anaes.] [Assist.] | PLASTER JACKET, application of, as an independent procedure |

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| 47708 | Plaster jacket, application of, as an independent procedure [Anaes.] | HALO, application of, as an independent procedure |
| 47711 | Halo, application of, as an independent procedure [Anaes.] [Assist.] | HALO, application of, in addition to spinal fusion |
| 47714 | Halo, application of, in addition to spinal fusion for scoliosis, or other conditions [Anaes.] | HALO-THORACIC TRACTION - application of both halo and thoracic jacket |
| 47717 | Halo-thoracic traction - application of both halo and thoracic jacket [Anaes.] [Assist.] | HALO-FEMORAL TRACTION |
| 47720 | Halo-femoral traction, as an independent procedure [Anaes.] [Assist.] | HALO-FEMORAL TRACTION, in conjunction with a major spine operation |
| 47723 | Halo-femoral traction in conjunction with a major spine operation [Anaes.] [Assist.] | BONE GRAFT, harvesting of, via separate incision |
| 47726 | Bone graft, harvesting of, via separate incision, in conjunction with another service - autogenous - small quantity [Anaes.] | BONE GRAFT, harvesting of, via separate incision |
| 47729 | Bone graft, harvesting of, via separate incision, in conjunction with another service - autogenous - large quantity [Anaes.] | VASCULARISED PEDICLE BONE GRAFT, harvesting of |
| 47732 | Vascularised pedicle bone graft, harvesting of, in conjunction with another service [Anaes.] [Assist.] | NASAL BONES, treatment of fracture of |
| 47735 | Nasal bones, treatment of fracture of, not being a service to which item 47738 or 47741 applies - each attendance | NASAL BONES, treatment of fracture of, by reduction |
| 47738 | Nasal bones, treatment of fracture of, by reduction [Anaes.] | NASAL BONES, treatment of fracture of, by open reduction involving osteotomies |
| 47741 | Nasal bones, treatment of fracture of, by open reduction involving osteotomies [Anaes.] [Assist.] | MAXILLA, treatment of fracture of, requiring splinting, wiring of teeth, circumosseous fixation or external fixation |
| 47753 | Maxilla, treatment of fracture of, requiring splinting, wiring of teeth, circumosseous fixation or external fixation [Anaes.] [Assist.] | MANDIBLE, treatment of fracture of, requiring splinting, wiring of teeth, circumosseous fixation or external fixation |
| 47756 | Mandible, treatment of fracture of, requiring splinting, wiring of teeth, circumosseous fixation or external fixation [Anaes.] [Assist.] | ZYGOMATIC BONE, treatment of fracture of, requiring surgical reduction |
| 47762 | Zygomatic bone, treatment of fracture of, requiring surgical reduction by a temporal, intra-oral or other approach [Anaes.] | ZYGOMATIC BONE, treatment of fracture of, requiring surgical reduction and involving |

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| | | internal or external fixation |
| 47765 | Zygomatic bone, treatment of fracture of, requiring surgical reduction and involving internal or external fixation at 1 site [Anaes.] [Assist.] | ZYGOMATIC BONE, treatment of fracture of, requiring surgical reduction and involving internal or external fixation |
| 47768 | Zygomatic bone, treatment of fracture of, requiring surgical reduction and involving internal or external fixation or both at 2 sites [Anaes.] [Assist.] | ZYGOMATIC BONE, treatment of fracture of, requiring surgical reduction and involving internal or external fixation |
| 47771 | Zygomatic bone, treatment of fracture of, requiring surgical reduction and involving internal or external fixation or both at 3 sites [Anaes.] [Assist.] | MAXILLA, treatment of fracture of, requiring open operation |
| 47774 | Maxilla, treatment of fracture of, requiring open operation [Anaes.] [Assist.] | MANDIBLE, treatment of fracture of, requiring open reduction |
| 47777 | Mandible, treatment of fracture of, requiring open reduction [Anaes.] [Assist.] | MAXILLA, treatment of fracture of, requiring open reduction and internal fixation |
| 47780 | Maxilla, treatment of fracture of, requiring open reduction and internal fixation not involving plate[s] [Anaes.] [Assist.] | MANDIBLE, treatment of fracture of, requiring open reduction and internal fixation |
| 47783 | Mandible, treatment of fracture of, requiring open reduction and internal fixation not involving plate[s] [Anaes.] [Assist.] | MAXILLA, treatment of fracture of, requiring open reduction and internal fixation involving plate[s] |
| 47786 | Maxilla, treatment of fracture of, requiring open reduction and internal fixation involving plate[s] [Anaes.] [Assist.] | MANDIBLE, treatment of fracture of, requiring open reduction and internal fixation involving plate[s] |
| 47789 | Mandible, treatment of fracture of, requiring open reduction and internal fixation involving plate[s] [Anaes.] [Assist.] | BONE CYST, injection into or aspiration of |
| 47900 | Bone cyst, injection into or aspiration of [Anaes.] | EPICONDYLITIS, open operation |
| 47903 | Epicondylitis, open operation for [Anaes.] | DIGITAL NAIL OF TOE, removal of |
| 47904 | Digital nail of toe, removal of, not being a service to which item 47906 applies [Anaes.] | DIGITAL NAIL OF TOE, removal of |
| 47906 | Digital nail of toe, removal of, in the operating theatre of a hospital [Anaes.] | PULP SPACE INFECTION, PARONYCHIA of FOOT, incision for |
| 47912 | Pulp space infection, paronychia of foot, incision for, not being a service to which another item in this Group applies [excluding aftercare] [Anaes.] | INGROWING NAIL OF TOE, WEDGE RESECTION |

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| 47915 | ingrowing nail of toe, wedge resection for, with removal of segment of nail, ungual fold and portion of the nail bed [Anaes.] | INGROWING NAIL OF TOE, PARTIAL RESECTION |
| 47916 | ingrowing nail of toe, partial resection of nail, with destruction of nail matrix by phenolisation, electrocautery, laser, sodium hydroxide or acid but not including excision of nail bed [Anaes.] | INGROWING TOENAIL, RADICAL EXCISION OF NAILBED |
| 47918 | Ingrowing toenail, radical excision of nailbed [Anaes.] | BONE GROWTH STIMULATOR, INSERTION |
| 47920 | Bone growth stimulator, insertion of [Anaes.] [Assist.] | ORTHOPAEDIC PIN OR WIRE, INSERTION |
| 47921 | Orthopaedic pin or wire, insertion of, as an independent procedure [Anaes.] | BURIED WIRE, PIN OR SCREW INSERTION |
| 47924 | Buried wire, pin or screw, 1 or more of, which were inserted for internal fixation purposes, removal of requiring incision and suture, not being a service to which item 47927 or 47930 applies - per bone [Anaes.] | BURIED WIRE, PIN OR SCREW INSERTION |
| 47927 | Buried wire, pin or screw, 1 or more of, which were inserted for internal fixation purposes, removal of, in the operating theatre of a hospital - per bone [Anaes.] | PLATE, ROD OR NAIL AND ASSOCIATED WIRES, PINS OR SCREWS, REMOVAL OF |
| 47930 | Plate, rod or nail and associated wires, pins or screws, 1 or more of, all of which were inserted for internal fixation purposes, removal of, not being a service associated with a service to which item 47924 or 47927 applies - per bone [Anaes.] [Assist.] | SMALL EXOSTOSIS [NOT MORE THAN 20MM OF GROWTH ABOVE BONE], |
| 47933 | Small exostosis [not more than 20mm of growth above bone], excision of, or simple removal of bunion and any associated bursa, not being a service associated with a service for removal of bursa [Anaes.] | LARGE EXOSTOSIS [GREATER THAN 20MM GROWTH ABOVE BONE],EXCISION OF |
| 47936 | Large exostosis [greater than 20mm growth above bone], excision of [Anaes.] [Assist.] | EXTERNAL FIXATION, REMOVAL OF |
| 47948 | External fixation, removal of, in the operating theatre of a hospital [Anaes.] | EXTERNAL FIXATION, REMOVAL OF |
| 47951 | External fixation, removal of, in conjunction with operations involving internal fixation or bone grafting or both [Anaes.] | TENDON, REPAIR |
| 47954 | Tendon, repair of, as an independent procedure [Anaes.] [Assist.] | TENDON, LARGE, LENGTHENING OF |
| 47957 | Tendon, large, lengthening of, as an independent procedure [Anaes.] [Assist.] | TENOTOMY, SUBCUTANEOUS, |
| 47960 | Tenotomy, subcutaneous, not being a service to which another item in this Group applies [Anaes.] | TENOTOMY, OPEN, |
| 47963 | Tenotomy, open, with or without tenoplasty, not being a service to which another item in this Group applies [Anaes.] | TENDON OR LIGAMENT, TRANSFER, |
| 47966 | Tendon or ligament transfer, as an independent procedure [Anaes.] [Assist.] | TENOSYNOVECTOMY, |

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| 47969 | Tenosynovectomy, not being a service to which another item in this Group applies [Anaes.] [Assist.] | TENDON SHEATH, OPEN OPERATION |
| 47972 | Tendon sheath, open operation for teno-vaginitis, not being a service to which another item in this Group applies [Anaes.] | FOREARM OR CALF, decompression fasciotomy of |
| 47975 | Forearm or calf, decompression fasciotomy of, for acute compartment syndrome, requiring excision of muscle and deep tissue [Anaes.] [Assist.] | FOREARM OR CALF, decompression fasciotomy of |
| 47978 | Forearm or calf, decompression fasciotomy of, for chronic compartment syndrome, requiring excision of muscle and deep tissue [Anaes.] | FOREARM, CALF OR INTEROSSEOUS MUSCLE SPACE OF HAND, decompression fasciotomy of |
| 47981 | Forearm, calf or interosseous muscle space of hand, decompression fasciotomy of, not being a service to which another item applies [Anaes.] | FORAGE [Drill decompression], of NECK OR HEAD of FEMUR, or BOTH |
| 47982 | Forage [Drill decompression], of neck or head of femur, or both [Anaes.] [Assist.] | FEMUR, BONE GRAFT |
| 48200 | Femur, bone graft to [Anaes.] [Assist.] | FEMUR, BONE GRAFT |
| 48203 | Femur, bone graft to, with internal fixation [Anaes.] [Assist.] | TIBIA, BONE GRAFT |
| 48206 | Tibia, bone graft to [Anaes.] [Assist.] | TIBIA, BONE GRAFT |
| 48209 | Tibia, bone graft to, with internal fixation [Anaes.] [Assist.] | HUMERUS, BONE GRAFT |
| 48212 | Humerus, bone graft to [Anaes.] [Assist.] | HUMERUS, BONE GRAFT |
| 48215 | Humerus, bone graft to, with internal fixation [Anaes.] [Assist.] | RADIUS AND ULNA, BONE GRAFT |
| 48218 | Radius or ulna, bone graft to [Anaes.] [Assist.] | RADIUS AND ULNA, BONE GRAFT |
| 48221 | Radius and ulna, bone graft to, with internal fixation of 1 or both bones [Anaes.] [Assist.] | RADIUS OR ULNA, BONE GRAFT |
| 48224 | Radius or ulna, bone graft to [Anaes.] [Assist.] | RADIUS OR ULNA, BONE GRAFT |
| 48227 | Radius or ulna, bone graft to, with internal fixation of 1 or both bones [Anaes.] [Assist.] | SCAPHOID, BONE GRAFT |
| 48230 | Scaphoid, bone graft to, for non-union [Anaes.] [Assist.] | SCAPHOID, BONE GRAFT |
| 48233 | Scaphoid, bone graft to, for non-union, with internal fixation [Anaes.] [Assist.] | SCAPHOID, BONE GRAFT |

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| 48236 | Scaphoid, bone graft to, for mal-union, including osteotomy, bone graft and internal fixation [Anaes.] [Assist.] | BONE GRAFT, |
| 48239 | Bone graft, not being a service to which another item in this Group applies [Anaes.] [Assist.] | BONE GRAFT, |
| 48242 | Bone graft, with internal fixation, not being a service to which another item in this Group applies [Anaes.] [Assist.] | PHALANX, METATARSAL, ACCESSORY BONE OR SESAMOID BONE, OSTEOTOMY OR OSTEECTOMY |
| 48400 | Phalanx, metatarsal, accessory bone or sesamoid bone, osteotomy or osteectomy of, excluding services to which item 49848 or 49851 applies, any of items 49848, 49851, 47933 or 47936 apply [Anaes.] [Assist.] | PHALANX OR METATARSAL, OSTEOTOMY OR OSTEECTOMY |
| 48403 | Phalanx or metatarsal, osteotomy or osteectomy of, with internal fixation, and excluding services to which items 47933 or 47936 apply [Anaes.] [Assist.] | FIBULA, RADIUS, ULNA, CLAVICLE, SCAPULA [other than acromion], RIB, TARSUS OR CARPUS, osteotomy or osteectomy |
| 48406 | Fibula, radius, ulna, clavicle, scapula [other than acromion], rib, tarsus or carpus, osteotomy or osteectomy of, excluding services to which items 47933 or 47936 apply [Anaes.] [Assist.] | FIBULA, RADIUS, ULNA, CLAVICLE, SCAPULA [other than acromion], RIB, TARSUS OR CARPUS, osteotomy or osteectomy |
| 48409 | Fibula, radius, ulna, clavicle, scapula [other than acromion], rib, tarsus or carpus, osteotomy or osteectomy, with internal fixation, and excluding services to which items 47933 or 47936 apply [Anaes.] [Assist.] | HUMERUS, OSTEOTOMY OR OSTEECTOMY |
| 48412 | Humerus, osteotomy or osteectomy of, excluding services to which items 47933 or 47936 apply [Anaes.] [Assist.] | HUMERUS, OSTEOTOMY OR OSTEECTOMY |
| 48415 | Humerus, osteotomy or osteectomy of, with internal fixation, and excluding services to which items 47933 or 47936 apply [Anaes.] [Assist.] | TIBIA, OSTEOTOMY OR OSTEECTOMY |
| 48418 | Tibia, osteotomy or osteectomy of, excluding services to which items 47933 or 47936 apply [Anaes.] [Assist.] | TIBIA, OSTEOTOMY OR OSTEECTOMY |
| 48421 | Tibia, osteotomy or osteectomy of, with internal fixation, and excluding services to which items 47933 or 47936 apply [Anaes.] [Assist.] | FEMUR OR PELVIS OSTEOTOMOT OR OSTEECTOMY OF |
| 48424 | Femur or pelvis, osteotomy or osteectomy of, other than a service associated with surgery for femoroacetabular impingement, or to which item 47933 or 47936 applies [H] [Anaes.] [Assist.] | FEMUR OR PELVIS, OSTEOTOMY OR OSTEECTOMY |
| 48427 | Femur or pelvis, osteotomy or osteectomy of, with internal fixation, and excluding services to which items 47933 or 47936 apply [Anaes.] [Assist.] | FEMUR, epiphysiodesis |
| 48500 | Femur, epiphysiodesis of [Anaes.] [Assist.] | TIBIA AND FIBULA, epiphysiodesis of |

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| 48503 | Tibia and fibula, epiphysiodesis of [Anaes.] [Assist.] | FEMUR, TIBIA AND FIBULA, epiphysiodesis of |
| 48506 | Femur, tibia and fibula, epiphysiodesis of [Anaes.] [Assist.] | EPIPHYSIODESIS, staple arrest of hemiepiphysis |
| 48509 | Epiphysiodesis, staple arrest of hemiepiphysis [Anaes.] | EPIPHYSIOLYSIS, operation to prevent closure of plate |
| 48512 | Epiphysiolysis, operation to prevent closure of plate [Anaes.] [Assist.] | SPINE, MANIPULATION OF, |
| 48600 | Spine, manipulation of, performed in the operating theatre of a hospital [Anaes.] | SPINE, MANIPULATION OF, |
| 48603 | Spine, manipulation of, under epidural anaesthesia, with or without steroid injection, where the manipulation and the administration of the epidural anaesthetic are performed by the same medical practitioner in the operating theatre of a hospital, not being a service associated with a service to which item 48600 or 50115 applies [Anaes.] | SCOLIOSIS or KYPHOSIS, spinal fusion for |
| 48606 | Scoliosis or Kyphosis, spinal fusion for [without instrumentation] [Anaes.] [Assist.] | SCOLIOSIS, spinal fusion for |
| 48612 | Scoliosis, spinal fusion for, using segmental instrumentation [C D, Zielke, Luque, or similar] [Anaes.] [Assist.] | SCOLIOSIS or KYPHOSIS, spinal fusion for |
| 48613 | Scoliosis or kyphosis, spinal fusion for, using segmental instrumentation, reconstruction using separate anterior and posterior approaches [Anaes.] [Assist.] | SCOLIOSIS, RE-EXPLORATION FOR |
| 48615 | Scoliosis, re-exploration for, involving adjustment or removal of instrumentation or simple bone grafting procedure [Anaes.] [Assist.] | SCOLIOSIS, REVISION OF FAILED SCOLIOSIS SURGERY |
| 48618 | Scoliosis, revision of failed scoliosis surgery, involving more than 1 of multiple osteotomy, fusion or instrumentation [Anaes.] [Assist.] | SCOLIOSIS, ANTERIOR CORRECTION OF |
| 48621 | Scoliosis, anterior correction of, with fusion and segmental fixation [Dwyer, Zielke, or similar] - not more than 4 levels [Anaes.] [Assist.] | SCOLIOSIS, ANTERIOR CORRECTION OF |
| 48624 | Scoliosis, anterior correction of, with fusion and segmental fixation [Dwyer, Zielke or similar] - more than 4 levels [Anaes.] [Assist.] | SCOLIOSIS, spinal fusion for |
| 48627 | Scoliosis, spinal fusion for, combined with segmental instrumentation [C D, Zielke or similar] down to and including pelvis [Anaes.] [Assist.] | SCOLIOSIS, REQUIRING ANTERIOR DECOMPRESSION OF SPINAL CORD |
| 48630 | Scoliosis, requiring anterior decompression of spinal cord with resection of vertebrae including bone graft and instrumentation in the presence of spinal cord involvement [Anaes.] [Assist.] | SCOLIOSIS, congenital, vertebral resection and fusion for |
| 48632 | Scoliosis, congenital, vertebral resection and fusion for [Anaes.] [Assist.] | PERCUTANEOUS LUMBAR PARTIAL OR TOTAL DISCECTOMY |

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| 48636 | Percutaneous lumbar partial or total discectomy, 1 or more levels, not being a service associated with intradiscal electrothermal annuloplasty [Anaes.] [Assist.] | VERTEBRAL BODY, TOTAL OR SUBTOTAL EXCISION OF |
| 48639 | Vertebral body, total or subtotal excision of, including bone grafting or other form of fixation [Anaes.] [Assist.] | VERTEBRAL BODY, DISEASE OF, EXCISION AND SPINAL FUSION FOR |
| 48640 | Vertebral body, disease of, excision and spinal fusion for, using segmental instrumentation, reconstruction utilising separate anterior and posterior approaches [Anaes.] [Assist.] | SPINE, posterior, bone graft to |
| 48642 | Spine, posterior, bone graft to, not being a service to which item 48648 or 48651 applies - 1 or 2 levels [Anaes.] [Assist.] | SPINE, posterior, bone graft to |
| 48645 | Spine, posterior, bone graft to, not being a service to which item 48648 or 48651 applies - more than 2 levels [Anaes.] [Assist.] | SPINE, bone graft to, [postero-lateral fusion] |
| 48648 | Spine, bone graft to, [postero-lateral fusion] - 1 or 2 levels [Anaes.] [Assist.] | SPINE, bone graft to, [postero-lateral fusion] |
| 48651 | Spine, bone graft to, [postero-lateral fusion] - more than 2 levels [Anaes.] [Assist.] | SPINAL FUSION [posterior interbody], with partial or total laminectomy |
| 48654 | Spinal fusion [posterior interbody], with partial or total laminectomy, 1 level [Anaes.] [Assist.] | SPINAL FUSION [posterior interbody], with partial or total laminectomy |
| 48657 | Spinal fusion [posterior interbody], with partial or total laminectomy, more than 1 level [Anaes.] [Assist.] | SPINAL FUSION [anterior interbody] to cervical, thoracic or lumbar regions |
| 48660 | Spinal fusion [anterior interbody] to cervical, thoracic or lumbar regions - 1 level [Anaes.] [Assist.] | SPINAL FUSION [anterior interbody] to cervical, thoracic or lumbar regions |
| 48663 | Spinal fusion [anterior interbody] to cervical, thoracic or lumbar regions - 1 level - principal surgeon [Anaes.] | SPINAL FUSION [anterior interbody] to cervical, thoracic or lumbar regions |
| 48666 | Spinal fusion [anterior interbody] to cervical, thoracic or lumbar regions - 1 level - assisting surgeon | SPINAL FUSION [anterior interbody] to cervical, thoracic or lumbar regions |
| 48669 | Spinal fusion [anterior interbody] to cervical, thoracic or lumbar regions - more than 1 level [Anaes.] [Assist.] | SPINAL FUSION [anterior interbody] to cervical, thoracic or lumbar regions |
| 48672 | Spinal fusion [anterior interbody] to cervical, thoracic or lumbar regions - more than 1 level - principal surgeon [Anaes.] | SPINAL FUSION [anterior interbody] to cervical, thoracic or lumbar regions |
| 48675 | Spinal fusion [anterior interbody] to cervical, thoracic or lumbar regions - more than 1 level - assisting surgeon | SPINE, SIMPLE INTERNAL FIXATION OF |
| 48678 | Spine, simple internal fixation of, involving 1 or more of facet screw, wire loop or similar, being a service associated with a service to which items 48642 to 48675 apply [Anaes.] [Assist.] | SPINE, NON-SEGMENTAL INTERNAL FIXATION OF |

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| 48681 | Spine, non-segmental internal fixation of [Harrington or similar], other than for scoliosis, being a service associated with a service to which any one of items 48642 to 48675 applies [Anaes.] [Assist.] | SPINE, SEGMENTAL INTERNAL FIXATION OF |
| 48684 | Spine, segmental internal fixation of, other than for scoliosis, being a service associated with a service to which any one of items 48642 to 48675 applies - 1 or 2 levels [Anaes.] [Assist.] | SPINE, SEGMENTAL INTERNAL FIXATION OF |
| 48687 | Spine, segmental internal fixation of, other than for scoliosis, being a service associated with a service to which items 48642 to 48675 apply - 3 or 4 levels [Anaes.] [Assist.] | SPINE, SEGMENTAL INTERNAL FIXATION OF |
| 48690 | Spine, segmental internal fixation of, other than for scoliosis, being a service associated with a service to which items 48642 to 48675 apply - more than 4 levels [Anaes.] [Assist.] | Lumbar artificial intervertebral total disc replacement |
| 48691 | Lumbar artificial intervertebral total disc replacement, at one level only, including removal of disc, for a patient who: [a] has not had prior spinal fusion surgery at the same lumbar level; and [b] does not have vertebral osteoporosis; and [c] has failed conservative therapy; other than a service associated with item 40300 or 40301 [Anaes.] [Assist.] | Lumbar artificial intervertebral total disc replacement |
| 48692 | Lumbar artificial intervertebral total disc replacement, at one level only, including removal of disc, for a patient who: [a] has not had prior spinal fusion surgery at the same lumbar level; and [b] does not have vertebral osteoporosis; and [c] has failed conservative therapy; other than a service associated with item 40300 or 40301 - principal surgeon [Anaes.] [Assist.] | Lumbar artificial intervertebral total disc replacement |
| 48693 | Lumbar artificial intervertebral total disc replacement, at one level only, including removal of disc, for a patient who: [a] has not had prior spinal fusion surgery at the same lumbar level; and [b] does not have vertebral osteoporosis; and [c] has failed conservative therapy; other than a service associated with item 40300 or 40301—assisting surgeon [Anaes.] [Assist.] | Lumbar artificial intervertebral total disc replacement |
| 48694 | Cervical artificial intervertebral total disc replacement, at one level only, including removal of disc, for a patient who: [a] has not had prior spinal surgery at the same cervical level; and [b] is skeletally mature; and [c] has symptomatic degenerative disc disease with radiculopathy; and [d] does not have vertebral osteoporosis; and [e] has failed conservative therapy; other than a service associated with item 40300 or 40301 [Anaes.] [Assist.] | Cervical artificial intervertebral total disc replacement |
| 48900 | Shoulder, excision of coraco-acromial ligament or removal of calcium deposit from cuff or both [Anaes.] [Assist.] | SHOULDER, excision of coraco-acromial ligament or removal of calcium deposit from cuff or both |
| 48903 | Shoulder, decompression of subacromial space by acromioplasty, excision of coraco-acromial ligament and distal clavicle, or any combination [Anaes.] [Assist.] | SHOULDER, decompression of subacromial space by acromioplasty, excision of coraco-acromial ligament and distal clavicle, or any combination |
| 48906 | Shoulder, repair of rotator cuff, including excision of coraco-acromial ligament or removal of calcium deposit from cuff, or both - not being a service associated with a service to which item 48900 applies [Anaes.] [Assist.] | SHOULDER, repair of rotator cuff, INCLUDING EXCISION |
| 48909 | Shoulder, repair of rotator cuff, including decompression of subacromial space by acromioplasty, excision of coraco-acromial ligament and distal clavicle, or any combination, not being a service associated with a service to which item | SHOULDER, repair of rotator cuff, INCLUDING DECOMPRESSION |

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| | 48903 applies [Anaes.] [Assist.] | |
| 48912 | Shoulder, arthrotomy of [Anaes.] [Assist.] | SHOULDER, ARTHROTOMY |
| 48915 | Shoulder, hemi-arthroplasty of [Anaes.] [Assist.] | SHOULDER, HEMI-ARTHROPLASTY |
| 48918 | Shoulder, total replacement arthroplasty of, including any associated rotator cuff repair [Anaes.] [Assist.] | SHOULDER, TOTAL REPLACEMENT ARTHROPLASTY |
| 48921 | Shoulder, total replacement arthroplasty, revision of [Anaes.] [Assist.] | SHOULDER, TOTAL REPLACEMENT ARTHROPLASTY, REVISION |
| 48924 | Shoulder, total replacement arthroplasty, revision of, requiring bone graft to scapula or humerus, or both [Anaes.] [Assist.] | SHOULDER, TOTAL REPLACEMENT ARTHROPLASTY, REVISION |
| 48927 | Shoulder prosthesis, removal of [Anaes.] [Assist.] | SHOULDER, PROTHESIS REMOVAL |
| 48930 | Shoulder, stabilisation procedure for recurrent anterior or posterior dislocation [Anaes.] [Assist.] | SHOULDER, stabilisation procedure for recurrent dislocation |
| 48933 | Shoulder, stabilisation procedure for multi-directional instability, anterior or posterior [or both] repair when performed [Anaes.] [Assist.] | SHOULDER, stabilisation procedure for multi-directional instability |
| 48936 | Shoulder, synovectomy of, as an independent procedure [Anaes.] [Assist.] | SHOULDER, SYNOVECTOMY |
| 48939 | Shoulder, arthrodesis of, with synovectomy if performed [Anaes.] [Assist.] | SHOULDER, ARTHRODESIS |
| 48942 | Shoulder, arthrodesis of, with synovectomy if performed, with removal of prosthesis, requiring bone grafting or internal fixation [Anaes.] [Assist.] | SHOULDER, ARTHRODESIS |
| 48945 | Shoulder, diagnostic arthroscopy of [including biopsy] - not being a service associated with any other arthroscopic procedure of the shoulder region [Anaes.] [Assist.] | SHOULDER, DIAGNOSTIC ARTHROSCOPY |
| 48948 | Shoulder, arthroscopic surgery of, involving any 1 or more of: removal of loose bodies; decompression of calcium deposit; debridement of labrum, synovium or rotator cuff; or chondroplasty - not being a service associated with any other arthroscopic procedure of the shoulder region [Anaes.] [Assist.] | SHOULDER, ARTHROSCOPIC SURGERY |
| 48951 | Shoulder, arthroscopic division of coraco-acromial ligament including acromioplasty - not being a service associated with any other arthroscopic procedure of the shoulder region [Anaes.] [Assist.] | SHOULDER, ARTHROSCOPIC DIVISION OF CORACO-ACROMIAL LIGAMENT |
| 48954 | Shoulder, arthroscopic total synovectomy of, including release of contracture when performed - not being a service associated with any other arthroscopic procedure of the shoulder region [Anaes.] [Assist.] | SHOULDER, arthroscopic total synovectomy |

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| 48957 | Shoulder, arthroscopic stabilisation of, for recurrent instability including labral repair or reattachment when performed - not being a service associated with any other arthroscopic procedure of the shoulder region [Anaes.] [Assist.] | SHOULDER, ARTHROSCOPIC STABILISATION |
| 48960 | Shoulder, reconstruction or repair of, including repair of rotator cuff by arthroscopic, arthroscopic assisted or mini open means; arthroscopic acromioplasty; or resection of acromioclavicular joint by separate approach when performed - not being a service associated with any other procedure of the shoulder region [Anaes.] [Assist.] | SHOULDER, RECONSTRUCTION OR REPAIR |
| 49100 | Elbow, arthrotomy of, involving 1 or more of lavage, removal of loose body or division of contracture [Anaes.] [Assist.] | ELBOW, arthrotomy of |
| 49103 | Elbow, ligamentous stabilisation of [Anaes.] [Assist.] | ELBOW, ligamentous stabilisation of |
| 49106 | Elbow, arthrodesis of, with synovectomy if performed [Anaes.] [Assist.] | ELBOW, arthrodesis of |
| 49109 | Elbow, total synovectomy of [Anaes.] [Assist.] | ELBOW, total synovectomy of |
| 49112 | Elbow, silastic or other replacement of radial head [Anaes.] [Assist.] | ELBOW, silastic or other replacement of radial head |
| 49115 | Elbow, total joint replacement of [Anaes.] [Assist.] | ELBOW, total joint replacement of |
| 49116 | Elbow, total replacement arthroplasty of, revision procedure, including removal of prosthesis [Anaes.] [Assist.] | ELBOW, total replacement arthroplasty of, |
| 49117 | Elbow, total replacement arthroplasty of, revision procedure, requiring bone grafting, including removal of prosthesis [Anaes.] [Assist.] | ELBOW, total replacement arthroplasty of, revision procedure |
| 49118 | Elbow, diagnostic arthroscopy of, including biopsy and lavage, not being a service associated with any other arthroscopic procedure of the elbow [Anaes.] [Assist.] | ELBOW, diagnostic arthroscopy of |
| 49121 | Elbow, arthroscopic surgery involving any 1 or more of: drilling of defect, removal of loose body; release of contracture or adhesions; chondroplasty; or osteoplasty - not being a service associated with any other arthroscopic procedure of the elbow [Anaes.] [Assist.] | ELBOW, arthroscopic surgery |
| 49200 | Wrist, arthrodesis of, with synovectomy if performed, with or without bone graft and internal fixation of the radiocarpal joint [Anaes.] [Assist.] | WRIST, arthrodesis of |
| 49203 | Wrist, limited arthrodesis of the intercarpal joint, with synovectomy if performed, with or without bone graft [Anaes.] [Assist.] | WRIST, limited arthrodesis of the intercarpal joint, with synovectomy if performed |
| 49206 | Wrist, proximal carpectomy of, including styloidectomy when performed [Anaes.] [Assist.] | WRIST, proximal carpectomy of, including styloidectomy |
| 49209 | Wrist, total replacement arthroplasty of [Anaes.] [Assist.] | WRIST, total replacement arthroplasty |

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| 49210 | Wrist, total replacement arthroplasty of, revision procedure, including removal of prosthesis [Anaes.] [Assist.] | WRIST, total replacement arthroplasty of, revision procedure |
| 49211 | Wrist, total replacement arthroplasty of, revision procedure, requiring bone grafting, including removal of prosthesis [Anaes.] [Assist.] | WRIST, total replacement arthroplasty of, revision procedure |
| 49212 | Wrist, arthrotomy of [Anaes.] | WRIST, arthrotomy of |
| 49215 | Wrist, reconstruction of, including repair of single or multiple ligaments or capsules, including associated arthrotomy [Anaes.] [Assist.] | WRIST, reconstruction of, including repair of single or multiple ligaments or capsules, including associated arthrotomy |
| 49218 | Wrist, diagnostic arthroscopy of, including radiocarpal or midcarpal joints, or both [including biopsy] - not being a service associated with any other arthroscopic procedure of the wrist joint [Anaes.] [Assist.] | WRIST, diagnostic arthroscopy of, including radiocarpal or midcarpal joints, or both [including biopsy] |
| 49221 | Wrist, arthroscopic surgery of, involving any 1 or more of: drilling of defect; removal of loose body, release of adhesions; local synovectomy; or debridement of one area - not being a service associated with any other arthroscopic procedure of the wrist joint [Anaes.] [Assist.] | WRIST, arthroscopic surgery of, involving any 1 or more of: drilling of defect; removal of loose body; release of adhesions; local synovectomy; or debridement of one area |
| 49224 | Wrist, arthroscopic debridement of 2 or more distinct areas; or osteoplasty including excision of the distal ulna; or total synovectomy, not being a service associated with any other arthroscopic procedure of the wrist [Anaes.] [Assist.] | WRIST, arthroscopic debridement of 2 or more distinct areas; or osteoplasty including excision of the distal ulna; or total synovectomy |
| 49227 | Wrist, arthroscopic pinning of osteochondral fragment or stabilisation procedure for ligamentous disruption - not being a service associated with any other arthroscopic procedure of the wrist joint [Anaes.] [Assist.] | WRIST, arthroscopic pinning of osteochondral fragment or stabilisation procedure for ligamentous disruption |
| 49300 | Sacroiliac joint arthrodesis of [Anaes.] [Assist.] | SACROILIAC JOINT ARTHRODESIS |
| 49303 | Hip, arthrotomy of, including lavage, drainage or biopsy when performed, other than a service associated with surgery for femoroacetabular impingement [H] [Anaes.] [Assist.] | Hip, arthrotomy |
| 49306 | Hip arthrodesis of, with synovectomy if performed [Anaes.] [Assist.] | HIP arthrodesis |
| 49309 | Hip, arthrectomy or excision arthroplasty of, including removal of prosthesis [Austin Moore or similar [non cement]] [Anaes.] [Assist.] | HIP, arthrectomy or excision arthroplasty of |
| 49312 | Hip, arthrectomy or excision arthroplasty of, including removal of prosthesis [cemented, porous coated or similar] [Anaes.] [Assist.] | HIP, arthrectomy or excision arthroplasty of |
| 49315 | Hip, arthroplasty of, unipolar or bipolar [Anaes.] [Assist.] | HIP, arthroplasty of, unipolar or bipolar |

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| 49318 | Hip, total replacement arthroplasty of, including minor bone grafting [Anaes.] [Assist.] | HIP, total replacement arthroplasty |
| 49319 | Hip, total replacement arthroplasty of, including associated minor grafting, if performed - bilateral [Anaes.] [Assist.] | HIP, total replacement arthroplasty |
| 49321 | Hip, total replacement arthroplasty of, including major bone grafting, including obtaining of graft [Anaes.] [Assist.] | HIP, total replacement arthroplasty |
| 49324 | Hip, total replacement arthroplasty of, revision procedure including removal of prosthesis [Anaes.] [Assist.] | HIP, total replacement arthroplasty |
| 49327 | Hip, total replacement arthroplasty of, revision procedure requiring bone grafting to acetabulum, including obtaining of graft [Anaes.] [Assist.] | HIP, total replacement arthroplasty |
| 49330 | Hip, total replacement arthroplasty of, revision procedure requiring bone grafting to femur, including obtaining of graft [Anaes.] [Assist.] | HIP, total replacement arthroplasty |
| 49333 | Hip, total replacement arthroplasty of, revision procedure requiring bone grafting to both acetabulum and femur, including obtaining of graft [Anaes.] [Assist.] | HIP, total replacement arthroplasty |
| 49336 | Hip, treatment of a fracture of the femur where revision total hip replacement is required as part of the treatment of the fracture [not including intra-operative fracture], being a service associated with a service to which items 49324 to 49333 apply [Anaes.] [Assist.] | HIP, TREATMENT OF FRACTURE OF FEMUR WHERE REVISION TOTAL HIP REPLACEMENT IS REQUIRED |
| 49339 | Hip, revision total replacement of, requiring anatomic specific allograft of proximal femur greater than 5 cm in length [Anaes.] [Assist.] | HIP, REVISION TOTAL REPLACEMENT |
| 49342 | Hip, revision total replacement of, requiring anatomic specific allograft of acetabulum [Anaes.] [Assist.] | HIP, REVISION TOTAL REPLACEMENT |
| 49345 | Hip, revision total replacement of, requiring anatomic specific allograft of both femur and acetabulum [Anaes.] [Assist.] | HIP, REVISION TOTAL REPLACEMENT |
| 49346 | Hip, revision arthroplasty with replacement of acetabular liner or ceramic head, not requiring removal of femoral component or acetabular shell [Anaes.] [Assist.] | HIP, REVISION ARTHROPLASTY |
| 49360 | Hip, diagnostic arthroscopy of, not being a service associated with any other arthroscopic procedure of the hip [Anaes.] [Assist.] | HIP, DIAGNOSTIC ARTHROPLASTY |
| 49363 | Hip, diagnostic arthroscopy of, with synovial biopsy, not being a service associated with any other arthroscopic procedure of the hip [Anaes.] [Assist.] | HIP, DIAGNOSTIC ARTHROPLASTY |
| 49366 | Hip, arthroscopic surgery of, other than a service associated with another arthroscopic procedure of the hip, or a service associated with surgery for femoroacetabular impingement [H] [Anaes.] [Assist.] | HIP, ARTHROSCOPIC SURGERY |
| 49500 | Knee, arthrotomy of, involving 1 or more of; capsular release, biopsy or lavage, or removal of loose body or foreign body [Anaes.] [Assist.] | KNEE, arthrotomy |

Rwanda Medical Procedure Code Database

RMP Code Detailed Nomenclature

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| 49503 | Knee, partial or total meniscectomy of, repair of collateral or cruciate ligament, patellectomy of, chondroplasty of, osteoplasty of, patellofemoral stabilisation or single transfer of ligament or tendon [not being a service to which another item in this Group applies] any 1 procedure [Anaes.] [Assist.] | KNEE, partial or total meniscectomy |
| 49506 | Knee, partial or total meniscectomy of, repair of collateral or cruciate ligament, patellectomy of, chondroplasty of, osteoplasty of, patellofemoral stabilisation or single transfer of ligament or tendon [not being a service to which another item in this Group applies] any 2 or more procedures [Anaes.] [Assist.] | KNEE, partial or total meniscectomy |
| 49509 | Knee, total synovectomy or arthrodesis with synovectomy if performed [Anaes.] [Assist.] | KNEE, total synovectomy or arthrodesis |
| 49512 | Knee, arthrodesis of, with synovectomy if performed, with removal of prosthesis [Anaes.] [Assist.] | KNEE, arthrodesis |
| 49515 | Knee, removal of prosthesis, cemented or uncemented, including associated cement, as the first stage of a 2 stage procedure [Anaes.] [Assist.] | KNEE, removal of prosthesis |
| 49517 | Knee, hemiarthroplasty of [Anaes.] [Assist.] | KNEE, hemiarthroplasty |
| 49518 | Knee, total replacement arthroplasty of [Anaes.] [Assist.] | KNEE, total replacement arthroplasty |
| 49519 | Knee, total replacement arthroplasty of, including associated minor grafting, if performed - bilateral [Anaes.] [Assist.] | KNEE, total replacement arthroplasty |
| 49521 | Knee, total replacement arthroplasty of, requiring major bone grafting to femur or tibia, including obtaining of graft [Anaes.] [Assist.] | KNEE, total replacement arthroplasty |
| 49524 | Knee, total replacement arthroplasty of, requiring major bone grafting to femur and tibia, including obtaining of graft [Anaes.] [Assist.] | KNEE, total replacement arthroplasty |
| 49527 | Knee, total replacement arthroplasty of, revision procedure, including removal of prosthesis [Anaes.] [Assist.] | KNEE, total replacement arthroplasty |
| 49530 | Knee, total replacement arthroplasty of, revision procedure, requiring bone grafting to femur or tibia, including obtaining of graft and including removal of prosthesis [Anaes.] [Assist.] | KNEE, total replacement arthroplasty |
| 49533 | Knee, total replacement arthroplasty of, revision procedure, requiring bone grafting to both femur and tibia, including obtaining of graft and including removal of prosthesis [Anaes.] [Assist.] | KNEE, total replacement arthroplasty |
| 49534 | Knee, patello-femoral joint of, total replacement arthroplasty as a primary procedure [Anaes.] [Assist.] | KNEE, patello-femoral joint of, total replacement arthroplasty |
| 49536 | Knee, repair or reconstruction of, for chronic instability [open or arthroscopic, or both] involving either cruciate or collateral ligaments, including notchplasty when performed, not being a service associated with any other arthroscopic procedure of instability [open or arthroscopic, or both] the knee [Anaes.] [Assist.] | KNEE, repair or reconstruction of, for chronic instability [open or arthroscopic, or both] the knee |

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| 49539 | Knee, reconstructive surgery of cruciate ligament or ligaments [open or arthroscopic, or both], including notchplasty when performed and surgery to other internal derangements, not being a service to which another item in this Group applies or a service associated with any other arthroscopic procedure of the knee [Anaes.] [Assist.] | KNEE, reconstructive surgery of cruciate ligament or ligaments [open or arthroscopic, or both] |
| 49542 | Knee, reconstructive surgery of cruciate ligament or ligaments [open or arthroscopic, or both], including notchplasty, meniscus repair, extracapsular procedure and debridement when performed, not being a service associated with any other arthroscopic procedure of the knee [Anaes.] [Assist.] | KNEE, reconstructive surgery of cruciate ligament or ligaments [open or arthroscopic, or both] |
| 49545 | Knee, revision arthrodesis of, with synovectomy if performed [Anaes.] [Assist.] | KNEE, revision arthrodesis |
| 49548 | Knee, revision of patello-femoral stabilisation [Anaes.] [Assist.] | KNEE, revision of patello-femoral stabilisation |
| 49551 | Knee, revision of procedures to which item 49536, 49539 or 49542 applies [Anaes.] [Assist.] | KNEE, revision of procedures |
| 49554 | Knee, revision of total replacement of, by anatomic specific allograft of tibia or femur [Anaes.] [Assist.] | KNEE, revision of total replacement |
| 49557 | Knee, diagnostic arthroscopy of [including biopsy, simple trimming of meniscal margin or plica] - not being a service associated with autologous chondrocyte implantation or matrix-induced autologous chondrocyte implantation or any other arthroscopic procedure of the knee region [Anaes.] [Assist.] | KNEE, diagnostic arthroscopy of [including biopsy, simple trimming of meniscal margin or plica] |
| 49558 | Knee, arthroscopic surgery of, involving 1 or more of: debridement, osteoplasty or chondroplasty - not associated with any other arthroscopic procedure of the knee region [Anaes.] [Assist.] | KNEE, arthroscopic surgery |
| 49559 | Knee, arthroscopic surgery of, involving chondroplasty requiring multiple drilling or carbon fibre [or similar] implant; including any associated debridement or oestoplasty - not associated with any other arthroscopic procedure of the knee region [Anaes.] [Assist.] | KNEE, arthroscopic surgery |
| 49560 | Knee, arthroscopic surgery of, involving 1 or more of: partial or total meniscectomy, removal of loose body or lateral release not being a service associated with any other arthroscopic procedure of the knee region [Anaes.] [Assist.] | KNEE, arthroscopic surgery |
| 49561 | Knee, arthroscopic surgery of, involving 1 or more of: partial or total meniscectomy, removal of loose body or lateral release; where the procedure includes associated debridement, osteoplasty or chondroplasty not associated with any other arthroscopic procedure of the knee region [Anaes.] [Assist.] | KNEE, arthroscopic surgery |
| 49562 | Knee, arthroscopic surgery of, involving 1 or more of: partial or total meniscectomy, removal of loose body or lateral release; where the procedure includes chondroplasty requiring multiple drilling or carbon fibre [or similar] implant and associated debridement or osteoplasty not associated with any other arthroscopic procedure of the knee region [Anaes.] [Assist.] | KNEE, arthroscopic surgery |
| 49563 | knee, arthroscopic surgery of, involving 1 or more of: meniscus repair; osteochondral graft; or chondral graft [excluding autologous chondrocyte implantation or matrix-induced autologous chondrocyte implantation] –not associated with any other arthroscopic procedure of the knee region [Anaes.] [Assist.] | KNEE, arthroscopic surgery |

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| 49564 | Knee, patello-femoral stabilisation of, combined arthroscopic and open procedure, including lateral release, medial capsulorrhaphy and tendon transfer, not being a service associated with any other arthroscopic procedure of the knee [Anaes.] [Assist.] | KNEE, patello-femoral stabilisation of, combined arthroscopic and open procedure |
| 49566 | Knee, arthroscopic total synovectomy of, not being a service associated with any other arthroscopic procedure of the knee [Anaes.] [Assist.] | KNEE, arthroscopic total synovectomy |
| 49569 | Knee, mobilisation for post-traumatic stiffness, by multiple muscle or tendon release [quadricepsplasty] [Anaes.] [Assist.] | KNEE, mobilisation for post-traumatic stiffness, by multiple muscle or tendon release |
| 49700 | Ankle, diagnostic arthroscopy of, including biopsy [Anaes.] [Assist.] | ANKLE, DIAGNOSTIC ARTHROSCOPY OF, |
| 49703 | Ankle, arthroscopic surgery of, not being a service associated with any other arthroscopic procedure of the ankle [Anaes.] [Assist.] | ANKLE, ARTHROSCOPIC SURGERY OF, |
| 49706 | Ankle, arthrotomy of, involving 1 or more of: lavage, removal of loose body or division of contracture [Anaes.] [Assist.] | ANKLE, ARTHROTOMY OF, |
| 49709 | Ankle, ligamentous stabilisation of [Anaes.] [Assist.] | ANKLE, ligamentous stabilisation |
| 49712 | Ankle, arthrodesis of, with synovectomy if performed [Anaes.] [Assist.] | ANKLE, arthrodesis |
| 49715 | Ankle, total joint replacement of [Anaes.] [Assist.] | ANKLE, total JOINT replacement |
| 49716 | Ankle, total replacement arthroplasty of, revision procedure, including removal of prosthesis [Anaes.] [Assist.] | ANKLE, total replacement arthroplasty |
| 49717 | Ankle, total replacement arthroplasty of, revision procedure, requiring bone grafting, including removal of prosthesis [Anaes.] [Assist.] | ANKLE, total replacement arthroplasty |
| 49718 | Ankle, Achilles` tendon or other major tendon, repair of [Anaes.] [Assist.] | ANKLE, Achilles` tendon or other major tendon, repair |
| 49721 | Ankle, Achilles` tendon rupture managed by non-operative treatment | ANKLE, Achilles` tendon rupture managed by non-operative treatment |
| 49724 | Ankle, Achilles` tendon, secondary repair or reconstruction of [Anaes.] [Assist.] | ANKLE, Achilles` tendon, secondary repair or reconstruction |
| 49727 | Ankle, Achilles` tendon, operation for lengthening [Anaes.] [Assist.] | ANKLE, Achilles` tendon, operation for lengthening |
| 49728 | Ankle, lengthening of the gastrocnemius aponeurosis and soleus fascia, for the correction of equinus deformity in children with cerebral palsy [Anaes.] [Assist.] | ANKLE, LENGTHENING |

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| 49800 | Foot, flexor or extensor tendon, primary repair of [Anaes.] | FOOT, flexor or extensor tendon, primary repair of |
| 49803 | Foot, flexor or extensor tendon, secondary repair of [Anaes.] | FOOT, flexor or extensor tendon, secondary repair of] |
| 49806 | Foot, subcutaneous tenotomy of, 1 or more tendons [Anaes.] | FOOT, subcutaneous tenotomy of |
| 49809 | Foot, open tenotomy of, with or without tenoplasty [Anaes.] | FOOT, open tenotomy of |
| 49812 | Foot, tendon or ligament transplantation of, not being a service to which another item in this Group applies [Anaes.] [Assist.] | FOOT, tendon or ligament transplantation of |
| 49815 | Foot, triple arthrodesis of, with synovectomy if performed [Anaes.] [Assist.] | FOOT, triple arthrodesis of |
| 49818 | Foot, excision of calcaneal spur [Anaes.] [Assist.] | FOOT, excision of calcaneal spur |
| 49821 | Foot, correction of hallux valgus or hallux rigidus by excision arthroplasty [Keller`s or similar procedure] - unilateral [Anaes.] [Assist.] | FOOT, correction of hallux valgus or hallux rigidus by excision arthroplasty |
| 49824 | Foot, correction of hallux valgus or hallux rigidus by excision arthroplasty [Keller`s or similar procedure] - bilateral [Anaes.] [Assist.] | FOOT, correction of hallux valgus or hallux rigidus by excision arthroplasty |
| 49827 | Foot, correction of hallux valgus by transfer of adductor hallucis tendon - unilateral [Anaes.] [Assist.] | FOOT, correction of hallux valgus by transfer of adductor hallucis tendon - unilateral |
| 49830 | Foot, correction of hallux valgus by transfer of adductor hallucis tendon - bilateral [Anaes.] [Assist.] | FOOT, correction of hallux valgus by transfer of adductor hallucis tendon - bilateral |
| 49833 | foot, correction of hallux valgus by osteotomy of first metatarsal with or without internal fixation and with or without excision of exostoses associated with the first metatarsophalangeal joint - unilateral [Anaes.] [Assist.] | FOOT, correction of hallux valgus by osteotomy of first metatarsal |
| 49836 | foot, correction of hallux valgus by osteotomy of first metatarsal with or without internal fixation and with or without excision of exostoses associated with the first metatarsophalangeal joint - bilateral [Anaes.] [Assist.] | FOOT, correction of hallux valgus by osteotomy of first metatarsal |
| 49837 | foot, correction of hallux valgus by osteotomy of first metatarsal and transfer of adductor hallicus tendon, with or without internal fixation and with or without excision of exostoses associated with the first metatarsophalangeal joint - unilateral [Anaes.] [Assist.] | FOOT, correction of hallux valgus by osteotomy of first metatarsal and transfer of adductor hallicus tendon |
| 49838 | foot, correction of hallux valgus by osteotomy of first metatarsal and transfer of adductor hallicus tendon, with or without internal fixation and with or without excision of exostoses associated with the first metatarsophalangeal joint - bilateral [Anaes.] [Assist.] | FOOT, correction of hallux valgus by osteotomy of first metatarsal and transfer of adductor hallicus tendon |

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| 49839 | Foot, correction of hallux rigidus or hallux valgus by prosthetic arthroplasty - unilateral [Anaes.] [Assist.] | FOOT, correction of hallux rigidus or hallux valgus by prosthetic arthroplasty - unilateral |
| 49842 | Foot, correction of hallux rigidus or hallux valgus by prosthetic arthroplasty - bilateral [Anaes.] [Assist.] | FOOT, correction of hallux rigidus or hallux valgus by prosthetic arthroplasty - bilateral |
| 49845 | Foot, arthrodesis of, first metatarso-phalangeal joint, with synovectomy if performed [Anaes.] [Assist.] | FOOT, arthrodesis of, first metatarso-phalangeal joint |
| 49848 | Foot, correction of claw or hammer toe [Anaes.] | FOOT, correction of claw or hammer toe |
| 49851 | Foot, correction of claw or hammer toe with internal fixation [Anaes.] | FOOT, correction of claw or hammer toe with internal fixation |
| 49854 | Foot, radical plantar fasciotomy or fasciectomy of [Anaes.] [Assist.] | FOOT, radical plantar fasciotomy or fasciectomy of |
| 49857 | Foot, metatarso-phalangeal joint replacement [Anaes.] [Assist.] | FOOT, metatarso-phalangeal joint replacement |
| 49860 | Foot, synovectomy of metatarso-phalangeal joint, single joint [Anaes.] [Assist.] | FOOT, synovectomy of metatarso-phalangeal joint, single joint |
| 49863 | Foot, synovectomy of metatarso-phalangeal joint, 2 or more joints [Anaes.] [Assist.] | FOOT, synovectomy of metatarso-phalangeal joint, 2 or more joints |
| 49866 | Foot, neurectomy for plantar or digital neuritis [Morton`s or Bett`s syndrome] [Anaes.] [Assist.] | FOOT, neurectomy for plantar or digital neuritis |
| 49878 | Talipes equinovarus, calcaneo valgus or metatarsus varus, treatment by cast, splint or manipulation - each attendance [Anaes.] | TALIPES EQUINOVARUS, treatment |
| 50100 | Joint, diagnostic arthroscopy of [including biopsy], not being a service to which another item in this Group applies and not being a service associated with any other arthroscopic procedure [Anaes.] [Assist.] | JOINT, diagnostic arthroscopy of [including biopsy] |
| 50102 | Joint, arthroscopic surgery of, not being a service to which another item in this Group applies [Anaes.] [Assist.] | JOINT, arthroscopic surgery |
| 50103 | Joint, arthrotomy of, not being a service to which another item in this Group applies [Anaes.] [Assist.] | JOINT, arthrotomy |
| 50104 | Joint, synovectomy of, not being a service to which another item in this Group applies [Anaes.] [Assist.] | JOINT, synovectomy |
| 50106 | Joint, stabilisation of, involving 1 or more of: repair of capsule, repair of ligament or internal fixation, not being a service to which another item in this Group applies [Anaes.] [Assist.] | JOINT, stabilisation |
| 50109 | Joint, arthrodesis of, not being a service to which another item in this Group applies, with synovectomy if performed | JOINT, arthrodesis |

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| | [Anaes.] [Assist.] | |
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| 50112 | Cicatricial flexion or extension contraction of joint, correction of, involving tissues deeper than skin and subcutaneous tissue, not being a service to which another item in this Group applies [Anaes.] [Assist.] | CICATRICAL FLEXION OR EXTENSION CONTRACTION OF JOINT, CORRECTION |
| 50115 | Joint or joints, manipulation of, performed in the operating theatre of a hospital, not being a service associated with a service to which another item in this Group applies [Anaes.] | JOINT or JOINTS, manipulation |
| 50118 | Subtalar joint, arthrodesis of, with synovectomy if performed [Anaes.] [Assist.] | SUBTALAR JOINT, ARTHRODESIS |
| 50121 | Greater Trochanter, transplantation of ileopsoas tendon to [Anaes.] [Assist.] | GREATER TROCHANTER, transplantation of ileopsoas tendon to |
| 50127 | Joint or joints, arthroplasty of, by any technique not being a service to which another item applies [Anaes.] [Assist.] | JOINT OR JOINTS, ARTHROPLASTY |
| 50130 | Joint or joints, application of external fixator to, other than for treatment of fractures [Anaes.] [Assist.] | JOINT OR JOINTS, APPLICATION OF EXTERNAL FIXATOR |
| 50200 | Aggressive or potentially malignant bone or deep soft tissue tumour, biopsy of [not including aftercare] [Anaes.] | AGGRESSIVE OR POTENTIALLY MALIGNANT BONE OR DEEP SOFT TISSUE TUMOUR, BIOPSY |
| 50201 | Aggressive or potentially malignant bone or deep soft tissue tumour, involving neurovascular structures, open biopsy of [not including aftercare] [Anaes.] [Assist.] | AGGRESSIVE OR POTENTIALLY MALIGNANT BONE OR DEEP SOFT TISSUE TUMOUR, BIOPSY |
| 50203 | Bone or malignant deep soft tissue tumour, lesional or marginal excision of [Anaes.] [Assist.] | BONE OR MALIGNANT DEEP SOFT TISSUE TUMOUR, lesional or marginal excision |
| 50206 | Bone tumour, lesional or marginal excision of, combined with any 1 of: liquid nitrogen freezing, autograft, allograft or cementation [Anaes.] [Assist.] | BONE TUMOUR, lesional or marginal excision |
| 50209 | Bone tumour, lesional or marginal excision of, combined with any 2 or more of: liquid nitrogen freezing, autograft, allograft or cementation [Anaes.] [Assist.] | BONE TUMOUR, lesional or marginal excision |
| 50212 | Malignant or aggressive soft tissue tumour affecting the long bones of leg or arm, enbloc resection of, with compartmental or wide excision of soft tissue, without reconstruction [Anaes.] [Assist.] | MALIGNANT or AGGRESSIVE SOFT TISSUE TUMOUR affecting the long bones of leg or arm, enbloc resection |
| 50215 | Malignant or aggressive soft tissue tumour affecting the long bones of leg or arm, enbloc resection of, with compartmental or wide excision of soft tissue, with intercalary reconstruction [prosthesis, allograft or autograft] [Anaes.] [Assist.] | MALIGNANT or AGGRESSIVE SOFT TISSUE TUMOUR affecting the long bones of leg or arm, enbloc resection |

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| 50218 | Malignant tumour of long bone, enbloc resection of, with replacement or arthrodesis of adjacent joint, with synovectomy if performed [Anaes.] [Assist.] | MALIGNANT TUMOUR of LONG BONE, enbloc resection |
| 50221 | Malignant or aggressive soft tissue tumour of pelvis, sacrum or spine; or scapula and shoulder, enbloc resection of [Anaes.] [Assist.] | MALIGNANT or AGGRESSIVE SOFT TISSUE TUMOUR of PELVIS, SACRUM or SPINE; or SCAPULA and SHOULDER, enbloc resection |
| 50224 | Malignant or aggressive soft tissue tumour of pelvis, sacrum or spine; or scapula and shoulder, enbloc resection of, with reconstruction by prosthesis, allograft or autograft [Anaes.] [Assist.] | MALIGNANT or AGGRESSIVE SOFT TISSUE TUMOUR of PELVIS, SACRUM or SPINE; or SCAPULA and SHOULDER, enbloc resection of, with reconstruction |
| 50227 | Malignant bone tumour, enbloc resection of, with massive anatomic specific allograft or autograft, with or without prosthetic replacement [Anaes.] [Assist.] | MALIGNANT BONE TUMOUR, enbloc resection of, with massive anatomic specific allograft or autograft |
| 50230 | Benign tumour, resection of, requiring anatomic specific allograft, with or without internal fixation [Anaes.] [Assist.] | BENIGN TUMOUR, resection of, requiring anatomic specific allograft |
| 50233 | Malignant tumour, amputation for, hemipelvectomy or interscapulo-thoracic [Anaes.] [Assist.] | MALIGNANT TUMOUR, amputation for, hemipelvectomy or interscapulo-thoracic |
| 50236 | Malignant tumour, amputation for, hip disarticulation, shoulder disarticulation or proximal third femur [Anaes.] [Assist.] | MALIGNANT TUMOUR, amputation for, hip disarticulation, shoulder disarticulation or proximal third femur |
| 50239 | Malignant tumour, amputation for, not being a service to which another item in this Group applies [Anaes.] [Assist.] | MALIGNANT TUMOUR, amputation for |
| 50300 | Joint deformity, slow correction of, using ring fixator or similar device, including all associated attendances - payable only once in any 12 month period [Anaes.] [Assist.] | JOINT DEFORMITY, SLOW CORRECTION OF, USING RING FIXATOR |
| 50303 | Limb lengthening, 5cm or less, by gradual distraction, with application of an external fixator or intra-medullary device, in the operating theatre of a hospital - payable only once per limb in any 12 month period [Anaes.] [Assist.] | LIMB LENGTHENING, BY GRADUAL DISTRACTION |
| 50306 | Limb lengthening, where the lengthening is bipolar, or bone transport is performed or where the fixator is extended to correct an adjacent joint deformity, or where the lengthening is greater than 5cm [Anaes.] [Assist.] | LIMB LENGTHENING , where the lengthening is bipolar, or bone transport is performed or where the fixator is extended to correct an adjacent joint deformity |
| 50309 | Ring fixator or similar device, adjustment of, with or without insertion or removal of fixation pins, performed under general anaesthesia in the operating theatre of a hospital, not being a service to which item 50303 or 50306 applies [Anaes.] [Assist.] | RING FIXATOR OR SIMILAR DEVICE, ADJUSTMENT |

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| 50312 | Ankle, synovectomy of, by arthroscopic or open means - not associated with any other arthroscopic procedure of the ankle [Anaes.] [Assist.] | ANKLE, SYNOVECTOMY |
| 50315 | Talipes equinovarus, posterior release of [Anaes.] [Assist.] | TALIPES EQUINOVARUS, POSTERIAL RELEASE |
| 50318 | Talipes equinovarus, medial release of [Anaes.] [Assist.] | TALIPES EQUINOVARUS, MEDIAL RELEASE |
| 50321 | Talipes equinovarus, combined postero-medial release of [Anaes.] [Assist.] | TALIPES EQUINOVARUS, COMBINED POSTERO-MEDIAL RELEASE |
| 50324 | Talipes equinovarus, combined postero-medial release of, revision procedure [Anaes.] [Assist.] | TALIPES EQUINOVARUS, COMBINED POSTERO-MEDIAL RELEASE, REVISION PROCEDURE |
| 50327 | Talipes equinovarus, bilateral procedures [Anaes.] [Assist.] | TALIPES EQUINOVARUS, BILATERAL PROCEDURES |
| 50330 | Talipes equinovarus, or talus, vertical congenital - post operative manipulation and change of plaster, performed under general anaesthesia in the operating theatre of a hospital, not being a service to which item 50315, 50318, 50321, 50324 or 50327 applies [Anaes.] | TALIPES EQUINOVARUS, or talus, vertical congenital - post operative manipulation and change of plaster |
| 50333 | Tarsal coalition, excision of, with interposition of muscle, fat graft or similar graft [Anaes.] [Assist.] | TARSAL COALITION, EXCISION |
| 50336 | Talus, vertical, congenital, combined anterior and posterior reconstruction [Anaes.] [Assist.] | TALUS, VERTICAL, CONGENITAL, ANTERIOR AND POSTERIOR REPAIR |
| 50339 | Foot and ankle, tibialis anterior tendon [split or whole] transfer to lateral column [Anaes.] [Assist.] | FOOT AND ANKLE, tibialis anterior tendon [split or whole] transfer to lateral column |
| 50342 | Foot and ankle, tibialis or tibialis posterior tendon transfer, through the interosseous membrane to anterior or posterior aspect of foot [Anaes.] [Assist.] | FOOT AND ANKLE, tibialis or tibialis posterior tendon transfer, through the interosseous membrane to anterior or posterior aspect of foot |
| 50345 | Hyperextension deformity of toe, release incorporating V-Y plasty of skin, lengthening of extensor tendons and release of capsule contracture [Anaes.] [Assist.] | HYPEREXTENSION DEFORMITY OF TOE, RELEASE |
| 50348 | Knee, deformity of, post-operative manipulation and change of plaster, performed under general anaesthesia in the operating theatre of a hospital [Anaes.] | KNEE, deformity of, post-operative manipulation and change of plaster |
| 50349 | Hip, congenital dislocation of, treatment of, by closed reduction [Anaes.] | HIP, congenital dislocation of, treatment of, by closed reduction |
| 50351 | Hip, developmental dislocation of, open reduction of [Anaes.] [Assist.] | HIP, developmental dislocation of, open |

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| | | reduction |
| 50352 | Hip, congenital dislocation of, treatment of, involving supervision of splint, harness or cast - each attendance [Anaes.] | HIP, congenital dislocation of, treatment of INVOLVING SPLINT, HARNESS OR CAST |
| 50353 | Hip spica, initial application of, for congenital dislocation of hip [excluding aftercare] [Anaes.] [Assist.] | HIP SPICA, INITIAL APPLICATION OF |
| 50354 | Tibia, pseudarthrosis of, congenital, resection and internal fixation [Anaes.] [Assist.] | TIBIA, PSEUDARTROSIS, CONGENITAL, RESECTION AND INTERNAL FIXATION |
| 50357 | Knee, leg or thigh, rectus femoris tendon transfer or medial or lateral hamstring tendon transfer [Anaes.] [Assist.] | KNEE, LEG OR THIGH, rectus femoris tendon transfer, or medial or lateral hamstring tendon transfer |
| 50360 | Knee, leg or thigh, combined medial and lateral hamstring tendon transfer [Anaes.] [Assist.] | KNEE, LEG OR THIGH, combined medial and lateral hamstring tendon transfer |
| 50363 | Knee, contracture of, posterior release involving multiple tendon lengthening or tenotomies, unilateral [Anaes.] [Assist.] | KNEE, contracture of, posterior release involving multiple tendon lengthening or tenotomies |
| 50366 | Knee, contracture of, posterior release involving multiple tendon lengthening or tenotomies, bilateral [Anaes.] [Assist.] | KNEE, contracture of, posterior release involving multiple tendon lengthening or tenotomies |
| 50369 | Knee, contracture of, posterior release involving multiple tendon lengthening with or without tenotomies and release of joint capsule with or without cruciate ligaments, unilateral [Anaes.] [Assist.] | KNEE, contracture of, posterior release involving multiple tendon lengthening or tenotomies |
| 50372 | Knee, contracture of, posterior release involving multiple tendon lengthening with or without tenotomies and release of joint capsule with or without cruciate ligaments, bilateral [Anaes.] [Assist.] | KNEE, contracture of, posterior release involving multiple tendon lengthening or tenotomies |
| 50375 | Hip, contracture of, medial release, involving lengthening of, or division of the adductors and psoas with or without division of the obturator nerve, unilateral [Anaes.] [Assist.] | HIP, contracture of, medial release, involving lengthening of, or division of the adductors and psoas |
| 50378 | Hip, contracture of, medial release, involving lengthening of, or division of the adductors and psoas with or without division of the obturator nerve, bilateral [Anaes.] [Assist.] | HIP, contracture of, medial release, involving lengthening of, or division of the adductors and psoas |
| 50381 | Hip, contracture of, anterior release, involving lengthening of, or division of the hip flexors and psoas with or without division of the joint capsule, unilateral [Anaes.] [Assist.] | HIP, contracture of, anterior release, involving lengthening of, or division of the hip flexors and psoas |

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| 50384 | Hip, contracture of, anterior release, involving lengthening of, or division of the hip flexors and psoas with or without division of the joint capsule, bilateral [Anaes.] [Assist.] | HIP, contracture of, anterior release, involving lengthening of, or division of the hip flexors and psoas |
| 50387 | Hip, iliopsoas tendon transfer to greater trochanter, or transfer of abdominal musculature to greater trochanter, or transfer or adductors to ischium [Anaes.] [Assist.] | HIP, iliopsoas tendon transfer to greater trochanter, or transfer of abdominal musculature to greater trochanter, or transfer of adductors to ischium |
| 50390 | Perthes, cerebral palsy, or other neuromuscular conditions, affecting hips or knees, application of cast under general anaesthesia, performed in the operating theatre of a hospital [Anaes.] | PERTHES, CEREBRAL PALSY, or other neuromuscular conditions, affecting hips or knees, application of cast under general anaesthesia |
| 50393 | Pelvis, bone graft or shelf procedures for acetabular dysplasia [Anaes.] [Assist.] | PELVIS, BONE GRAFT OR SHELF PROCEDURES |
| 50394 | Acetabular dysplasia, treatment of, by multiple peri-acetabular osteotomy, including internal fixation where performed [Anaes.] [Assist.] | ACETABULAR DYSPLASIA, TREATMENT BY PERI-ACETABULAR OSTEOTOMY |
| 50396 | Hand, congenital abnormalities or duplication of digits, amputation or splitting of phalanx or phalanges, with ligament or joint reconstruction [Anaes.] [Assist.] | HAND, congenital abnormalities or duplication of digits |
| 50399 | Forearm, radial aplasia or dysplasia [radial club hand], centralisation or radialisation of [Anaes.] [Assist.] | FOREARM, RADIAL APLASIA OR DYSPLASIA [radial club hand], centralisation or radialisation |
| 50402 | Torticollis, bipolar release of sternocleidomastoid muscle and associated soft tissue [Anaes.] [Assist.] | TORTICOLLIS, bipolar release of sternocleidomastoid muscle and associated soft tissue |
| 50405 | Elbow, flexorplasty, or tendon transfer to restore elbow function [Anaes.] [Assist.] | ELBOW, FLEXORPLASTY OR TENDON TRANSFER |
| 50408 | Shoulder, congenital or developmental dislocation, open reduction of [Anaes.] [Assist.] | SHOULDER, congenital or developmental dislocation, open reduction |
| 50411 | Lower limb deficiency, treatment of congenital deficiency of the femur by resection of the distal femur and proximal tibia followed by knee fusion [Anaes.] [Assist.] | LOWER LIMB DEFICIENCY, |
| 50414 | Lower limb deficiency, treatment of congenital deficiency of the femur by resection of the distal femur and proximal tibia followed by knee fusion and rotationplasty [Anaes.] [Assist.] | LOWER LIMB DEFICIENCY, |

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| 50417 | Lower limb deficiency, treatment of congenital deficiency of the tibia by reconstruction of the knee, involving transfer of fibula or tibia, and repair of quadriceps mechanism [Anaes.] [Assist.] | LOWER LIMB DEFICIENCY, |
| 50420 | Patella, congenital dislocation of, reconstruction of the quadriceps [Anaes.] [Assist.] | PATELLA, CONGENITAL DISLOCATION OF, |
| 50423 | Tibia, fibula or both, congenital deficiency of, transfer of the fibula to tibia, with internal fixation [Anaes.] [Assist.] | TIBIA, FIBULA OR BOTH, |
| 50426 | Diaphyseal aclasia, removal of lesion or lesions from bone - 1 approach [Anaes.] [Assist.] | DIAPHYSEAL ACLASIA, removal of lesion or lesions from bone |
| 50450 | Unilateral single event multilevel surgery for patients less than 18 years of age with hemiplegic cerebral palsy comprising three or more of the following: Lengthening of one or more contracted muscle tendon units by tendon lengthening, muscle recession, fractional lengthening or intramuscular lengthening. Correction of muscle imbalance by tendon transfer/transfers. Correction of femoral torsion by rotational osteotomy of the femur. Correction of tibial torsion by rotational osteotomy of the tibia. Correction of joint instability by varus derotation osteotomy of the femur, subtalar arthrodesis, with synovectomy if performed, or os calcis lengthening. Conjoint surgery, principal specialist surgeon, including fluoroscopy and aftercare [Anaes.] [Assist.] | UNILATERAL SINGLE EVENT MULTILEVEL SURGERY for patients less than 18 years of age with hemiplegic cerebral palsy |
| 50451 | Unilateral single event multilevel surgery for patients less than 18 years of age with hemiplegic cerebral palsy comprising three or more of the following: [a] Lengthening of one or more contracted muscle tendon units by tendon lengthening, muscle recession, fractional lengthening or intramuscular lengthening. [b] Correction of muscle imbalance by tendon transfer/transfers. [c] Correction of femoral torsion by rotational osteotomy of the femur. [d] Correction of tibial torsion by rotational osteotomy of the tibia. [e] Correction of joint instability by varus derotation osteotomy of the femur, subtalar arthrodesis, with synovectomy if performed, or os calcis lengthening. Conjoint surgery, conjoint specialist surgeon, including fluoroscopy and excluding aftercare [Anaes.] [Assist.] | UNILATERAL SINGLE EVENT MULTILEVEL SURGERY for patients less than 18 years of age with hemiplegic cerebral palsy |
| 50455 | Bilateral single event multilevel surgery for patients less than 18 years of age with diplegic cerebral palsy that comprises: Lengthening of one or more contracted muscle tendon units by tendon lengthening, muscle recession, fractional lengthening or intramuscular lengthening. Correction of muscle imbalance by tendon transfer/transfers. Conjoint surgery, principal specialist surgeon, including fluoroscopy and aftercare [Anaes.] [Assist.] | BILATERAL SINGLE EVENT MULTILEVEL SURGERY for patients less than 18 years of age with diplegic cerebral palsy |
| 50456 | Bilateral single event multilevel surgery for patients less than 18 years of age with diplegic cerebral palsy that comprises: [a] Lengthening of one or more contracted muscle tendon units by tendon lengthening, muscle recession, fractional lengthening or intramuscular lengthening. [b] Correction of muscle imbalance by tendon transfer/transfers. Conjoint surgery, conjoint specialist surgeon, including fluoroscopy and excluding aftercare [Anaes.] [Assist.] | BILATERAL SINGLE EVENT MULTILEVEL SURGERY for patients less than 18 years of age with diplegic cerebral palsy |
| 50460 | Bilateral single event multilevel surgery for patients less than 18 years of age with diplegic cerebral palsy that comprises bilateral soft tissue surgery and bilateral femoral osteotomies. Lengthening of one or more contracted muscle tendon units by tendon lengthening, muscle recession, fractional lengthening or intramuscular lengthening. Correction of muscle imbalance by tendon transfer/transfers. Correction of torsional abnormality of the femur by rotational osteotomy and internal fixation. Conjoint surgery, principal specialist surgeon, including fluoroscopy and aftercare [Anaes.] [Assist.] | BILATERAL SINGLE EVENT MULTILEVEL SURGERY for patients less than 18 years of age with diplegic cerebral palsy that comprises bilateral soft tissue surgery and bilateral femoral osteotomies |

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| 50461 | Bilateral single event multilevel surgery for patients less than 18 years of age with diplegic cerebral palsy that comprises bilateral soft tissue surgery and bilateral femoral osteotomies. [a] Lengthening of one or more contracted muscle tendon units by tendon lengthening, muscle recession, fractional lengthening or intramuscular lengthening. [b] Correction of muscle imbalance by tendon transfer/transfers. [c] Correction of torsional abnormality of the femur by rotational osteotomy and internal fixation. Conjoint surgery, conjoint specialist surgeon, including fluoroscopy and excluding aftercare [Anaes.] [Assist.] | BILATERAL SINGLE EVENT MULTILEVEL SURGERY for patients less than 18 years of age with diplegic cerebral palsy that comprises bilateral soft tissue surgery and bilateral femoral osteotomies |
| 50465 | Bilateral single event multilevel surgery for patients less than 18 years of age with diplegic cerebral palsy that comprises bilateral soft tissue surgery, bilateral femoral osteotomies and bilateral tibial osteotomies. Lengthening of one or more contracted muscle tendon units by tendon lengthening, muscle recession, fractional lengthening or intramuscular lengthening. Correction of muscle imbalance by tendon transfer/transfers. Correction of abnormal torsion of the femur by rotational osteotomy with internal fixation. Correction of abnormal torsion of the tibia by rotational osteotomy with internal fixation. Conjoint surgery, principal specialist surgeon, including fluoroscopy and aftercare [Anaes.] [Assist.] | BILATERAL SINGLE EVENT MULTILEVEL SURGERY for patients less than 18 years of age with diplegic cerebral palsy that comprises bilateral soft tissue surgery, bilateral femoral osteotomies and bilateral tibial osteotomies |
| 50466 | Bilateral single event multilevel surgery for patients less than 18 years of age with diplegic cerebral palsy that comprises bilateral soft tissue surgery, bilateral femoral osteotomies and bilateral tibial osteotomies. [a] Lengthening of one or more contracted muscle tendon units by tendon lengthening, muscle recession, fractional lengthening or intramuscular lengthening. [b] Correction of muscle imbalance by tendon transfer/transfers. [c] Correction of abnormal torsion of the femur by rotational osteotomy with internal fixation. [d] Correction of abnormal torsion of the tibia by rotational osteotomy with internal fixation. Conjoint surgery, conjoint specialist surgeon, including fluoroscopy and excluding aftercare [Anaes.] [Assist.] | BILATERAL SINGLE EVENT MULTILEVEL SURGERY for patients less than 18 years of age with diplegic cerebral palsy that comprises bilateral soft tissue surgery, bilateral femoral osteotomies and bilateral tibial osteotomies |
| 50470 | Bilateral single event multilevel surgery for patients less than 18 years of age with cerebral palsy that comprises bilateral soft tissue surgery, bilateral femoral osteotomies, bilateral tibial osteotomies and bilateral foot stabilisation. Lengthening of one or more contracted muscle tendon units by tendon lengthening, muscle recession, fractional lengthening or intramuscular lengthening. Correction of muscle imbalance by tendon transfer/transfers. Correction of abnormal torsion of the femur by rotational osteotomy with internal fixation. Correction of abnormal torsion of the tibia by rotational osteotomy with internal fixation. Correction of bilateral pes valgus by os calcis lengthening or subtalar fusion. Conjoint surgery, principal specialist surgeon, including fluoroscopy and aftercare [Anaes.] [Assist.] | BILATERAL SINGLE EVENT MULTILEVEL SURGERY for patients less than 18 years of age with cerebral palsy that comprises bilateral soft tissue surgery, bilateral femoral osteotomies, bilateral tibial osteotomies and bilateral foot stabilisation. |
| 50471 | Bilateral single event multilevel surgery for patients less than 18 years of age with cerebral palsy that comprises bilateral soft tissue surgery, bilateral femoral osteotomies, bilateral tibial osteotomies and bilateral foot stabilisation. [a] Lengthening of one or more contracted muscle tendon units by tendon lengthening, muscle recession, fractional lengthening or intramuscular lengthening. [b] Correction of muscle imbalance by tendon transfer/transfers. [c] Correction of abnormal torsion of the femur by rotational osteotomy with internal fixation. [d] Correction of abnormal torsion of the tibia by rotational osteotomy with internal fixation. [e] Correction of bilateral pes valgus by os calcis lengthening or subtalar fusion. Conjoint surgery, conjoint specialist surgeon, including fluoroscopy and excluding aftercare [Anaes.] [Assist.] | BILATERAL SINGLE EVENT MULTILEVEL SURGERY for patients less than 18 years of age with cerebral palsy that comprises bilateral soft tissue surgery, bilateral femoral osteotomies, bilateral tibial osteotomies and bilateral foot stabilisation. |
| 50475 | Single event multilevel surgery for patients less than 18 years of age with diplegic cerebral palsy for the correction of crouch gait including: Lengthening of one or more contracted muscle tendon units by tendon lengthening, muscle | SINGLE EVENT MULTILEVEL SURGERY for patients less than 18 years of age with diplegic |

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| | recession, fractional lengthening or intramuscular lengthening. Correction of muscle imbalance by tendon transfer/transfers. Correction of flexion deformity at the knee by extension osteotomy of the distal femur including internal fixation. Correction of patella alta and quadriceps insufficiency by patella tendon shortening/reconstruction. Correction of tibial torsion by rotational osteotomy of the tibia with internal fixation. Correction of foot instability by os calcis lengthening or subtalar fusion. Conjoint surgery, principal specialist surgeon, including fluoroscopy and aftercare [Anaes.] [Assist.] | cerebral palsy for the correction of crouch gait including: Lengthening of one or more contracted muscle tendon units by tendon lengthening, muscle recession, fractional lengthening or intramuscular lengthening. |
| 50476 | Single event multilevel surgery for patients less than 18 years of age with diplegic cerebral palsy for the correction of crouch gait including: [a] Lengthening of one or more contracted muscle tendon units by tendon lengthening, muscle recession, fractional lengthening or intramuscular lengthening. [b] Correction of muscle imbalance by tendon transfer/transfers. [c] Correction of flexion deformity at the knee by extension osteotomy of the distal femur including internal fixation. [d] Correction of patella alta and quadriceps insufficiency by patella tendon shortening/reconstruction. [e] Correction of tibial torsion by rotational osteotomy of the tibia with internal fixation. [f] Correction of foot instability by os calcis lengthening or subtalar fusion. Conjoint surgery, conjoint specialist surgeon, including fluoroscopy and excluding aftercare [Anaes.] [Assist.] | SINGLE EVENT MULTILEVEL SURGERY for patients less than 18 years of age with diplegic cerebral palsy for the correction of crouch gait including: Lengthening of one or more contracted muscle tendon units by tendon lengthening, muscle recession, fractional lengthening or intramuscular lengthening. |
| 50500 | Radius or ulna, distal end of, with open growth plate, treatment of fracture of, by closed reduction [Anaes.] | RADIUS OR ULNA, distal end of, with open growth plate, treatment of fracture of, by closed reduction |
| 50504 | Radius or ulna, distal end of, with open growth plate, treatment of fracture of, by open reduction [Anaes.] [Assist.] | RADIUS OR ULNA, distal end of, with open growth plate, treatment of fracture of, by open reduction |
| 50508 | Radius, distal end of, with open growth plate, treatment of Colles`, Smith`s or Barton`s fracture, by closed reduction [Anaes.] | RADIUS, distal end of, with open growth plate, treatment of Colles`, Smith`s or Barton`s fracture, by closed reduction |
| 50512 | Radius, distal end of, with open growth plate, treatment of Colles`, Smith`s or Barton`s fracture of, by open reduction [Anaes.] [Assist.] | RADIUS, distal end of, with open growth plate, treatment of Colles`, Smith`s or Barton`s fracture of, by open reduction |
| 50516 | Radius or ulna, shaft of, with open growth plate, treatment of fracture of, by closed reduction undertaken in the operating theatre of a hospital [Anaes.] | RADIUS OR ULNA, shaft of, with open growth plate, treatment of fracture of, by closed reduction |
| 50520 | Radius or ulna, shaft of, with open growth plate, treatment of fracture of, by open reduction [Anaes.] [Assist.] | RADIUS OR ULNA, shaft of, with open growth plate, treatment of fracture of, by open reduction |
| 50524 | Radius or ulna, shaft of, with open growth plate, treatment of fracture of, in conjunction with dislocation of distal radio-ulnar joint or proximal radio-humeral joint [Galeazzi or Monteggia injury], by closed reduction undertaken in the operating theatre of a hospital [Anaes.] [Assist.] | RADIUS OR ULNA, shaft of, with open growth plate, treatment of fracture of, in conjunction with dislocation of distal radio-ulnar joint or |

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| RMP Code | Detailed Nomenclature | Local Nomenclature |
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| | | proximal radio-humeral joint [Galeazzi or Monteggia injury], by closed reduction |
| 50528 | Radius or ulna, shaft of, with open growth plate, treatment of fracture of, in conjunction with dislocation of distal radio-ulnar joint or proximal radio-humeral joint [Galeazzi or Monteggia injury], by reduction with or without internal fixation by open or percutaneous means [Anaes.] [Assist.] | Radius or ulna, shaft of, with open growth plate, treatment of fracture of, in conjunction with dislocation of distal radio-ulnar joint or proximal radio-humeral joint [Galeazzi or Monteggia injury], by reduction with or without internal fixation by open or percutaneous means |
| 50532 | Radius and ulna, shafts of, with open growth plates, treatment of fracture of, by closed reduction undertaken in the operating theatre of a hospital [Anaes.] | RADIUS AND ULNA, shafts of, with open growth plates, treatment of fracture of, by closed reduction |
| 50536 | Radius and ulna, shafts of, with open growth plates, treatment of fracture of, by open reduction [Anaes.] [Assist.] | RADIUS AND ULNA, shafts of, with open growth plates, treatment of fracture of, by open reduction |
| 50540 | Olecranon, with open growth plate, treatment of fracture of, by open reduction [Anaes.] [Assist.] | OLECRANON, with open growth plate, treatment of fracture of, by open reduction |
| 50544 | Radius, with open growth plate, treatment of fracture of head or neck of, by closed reduction of [Anaes.] | RADIUS, with open growth plate, treatment of fracture of head or neck of, by closed reduction |
| 50548 | Radius, with open growth plate, treatment of fracture of head or neck of, by reduction with or without internal fixation by open or percutaneous means [Anaes.] [Assist.] | RADIUS, with open growth plate, treatment of fracture of head or neck of, by reduction with or without internal fixation by open or percutaneous means |
| 50552 | Humerus, proximal, with open growth plate, treatment of fracture of, by closed reduction, undertaken in the operating theatre, neonatal unit or nursery of a hospital [Anaes.] | HUMERUS, proximal, with open growth plate, treatment of fracture of, by closed reduction |
| 50556 | Humerus, proximal, with open growth plate, treatment of fracture of, by open reduction [Anaes.] [Assist.] | HUMERUS, proximal, with open growth plate, treatment of fracture of, by open reduction |
| 50560 | Humerus, shaft of, with open growth plate, treatment of fracture of, by closed reduction, undertaken in the operating theatre, neonatal unit or nursery of a hospital [Anaes.] | HUMERUS, shaft of, with open growth plate, treatment of fracture of, by closed reduction |
| 50564 | Humerus, shaft of, with open growth plate, treatment of fracture of, by internal or external fixation [Anaes.] [Assist.] | HUMERUS, shaft of, with open growth plate, treatment of fracture of, by internal or external fixation |
| 50568 | Humhumerus, with open growth plate, supracondylar or condylar, treatment of fracture of, by closed reduction, undertaken in the operating theatre of a hospital [Anaes.] | HUMERUS, with open growth plate, supracondylar or condylar, treatment of fracture |

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| | | of, by closed reduction |
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| 50572 | Humerus, with open growth plate, supracondylar or condylar, treatment of fracture of, by reduction with or without internal fixation by open or percutaneous means, undertaken in the operating theatre of a hospital [Anaes.] [Assist.] | HUMERUS, with open growth plate, supracondylar or condylar, treatment of fracture of, by reduction with or without internal fixation by open or percutaneous means |
| 50576 | Femur, with open growth plate, treatment of fracture of, by closed reduction or traction [Anaes.] [Assist.] | FEMUR, with open growth plate, treatment of fracture of, by closed reduction or traction |
| 50580 | Tibia, with open growth plate, plateau or condyles, medial or lateral, treatment of fracture of, by reduction with or without internal fixation by open or percutaneous means [Anaes.] [Assist.] | TIBIA, with open growth plate, plateau or condyles, medial or lateral, treatment of fracture of, by reduction with or without internal fixation by open or percutaneous means |
| 50584 | Tibia, distal, with open growth plate, treatment of fracture of, by reduction with or without internal fixation by open or percutaneous means [Anaes.] [Assist.] | TIBIA, distal, with open growth plate, treatment of fracture of, by reduction with or without internal fixation by open or percutaneous means |
| 50588 | Tibia and fibula, with open growth plates, treatment of fracture of, by internal fixation [Anaes.] [Assist.] | TIBIA AND FIBULA, with open growth plates, treatment of fracture of, by internal fixation |
| 50600 | Scoliosis or kyphosis, in a growing child, manipulation of deformity and application of a localiser cast, under general anaesthesia, in a hospital [Anaes.] [Assist.] | SCOLIOSIS OR KYPHOSIS, in a growing child, manipulation of deformity and application of a localiser cast |
| 50604 | Scoliosis or kyphosis, in a child or adolescent, spinal fusion for [without instrumentation] [Anaes.] [Assist.] | SCOLIOSIS or KYPHOSIS, in a child or adolescent, spinal fusion for [without instrumentation] |
| 50608 | Scoliosis or kyphosis, in a child or adolescent, treatment by segmental instrumentation and fusion of the spine, not being a service to which item 48642 to 48675 applies [Anaes.] [Assist.] | SCOLIOSIS OR KYPHOSIS, in a child or adolescent, treatment by segmental instrumentation and fusion of the spine |
| 50612 | Scoliosis or kyphosis, in a child or adolescent, with spinal deformity, treatment by segmental instrumentation, utilising separate anterior and posterior approaches, not being a service to which item 48642 to 48675 applies [Anaes.] [Assist.] | SCOLIOSIS OR KYPHOSIS, in a child or adolescent, with spinal deformity, treatment by segmental instrumentation, utilising separate anterior and posterior approaches |
| 50616 | Scoliosis, in a child or adolescent, re-exploration for adjustment or removal of segmental instrumentation used for correction of spine deformity [Anaes.] [Assist.] | SCOLIOSIS, in a child or adolescent, re-exploration for adjustment or removal of segmental instrumentation used for correction |

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| | | of spine deformity |
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| 50620 | Scoliosis, in a child or adolescent, revision of failed scoliosis surgery, involving more than 1 of osteotomy, fusion, removal of instrumentation or instrumentation, not being a service to which item 48642 to 48675 applies [Anaes.] [Assist.] | SCOLIOSIS, in a child or adolescent, revision of failed scoliosis surgery, involving more than 1 of osteotomy, fusion, removal of instrumentation or instrumentation |
| 50624 | Scoliosis, in a child or adolescent, anterior correction of, with fusion and segmental fixation [Dwyer, Zielke or similar] - not more than 4 levels [Anaes.] [Assist.] | SCOLIOSIS, in a child or adolescent, anterior correction of, with fusion and segmental fixation [Dwyer, Zielke or similar] - not more than 4 levels |
| 50628 | Scoliosis, in a child or adolescent, anterior correction of, with fusion and segmental fixation [Dwyer, Zielke or similar] - more than 4 levels [Anaes.] [Assist.] | SCOLIOSIS, in a child or adolescent, anterior correction of, with fusion and segmental fixation [Dwyer, Zielke or similar] - more than 4 levels |
| 50632 | Scoliosis or kyphosis, in a child or adolescent, requiring segmental instrumentation and fusion of the spine down to and including the pelvis or sacrum, not being a service to which item 48642 to 48675 applies [Anaes.] [Assist.] | SCOLIOSIS OR KYPHOSIS, in a child or adolescent, requiring segmental instrumentation and fusion of the spine down to and including the pelvis or sacrum |
| 50636 | Scoliosis, in a child or adolescent, requiring anterior decompression of the spinal cord with vertebral resection and instrumentation in the presence of spinal cord involvement, not being a service to which item 48642 to 48675 applies [Anaes.] [Assist.] | SCOLIOSIS, in a child or adolescent, requiring anterior decompression of the spinal cord with vertebral resection and instrumentation in the presence of spinal cord involvement |
| 50640 | Scoliosis, in a child or adolescent, congenital, resection and fusion of abnormal vertebra via an anterior or posterior approach, not being a service to which item 48642 to 48675 applies [Anaes.] [Assist.] | SCOLIOSIS, in a child or adolescent, congenital, resection and fusion of abnormal vertebra via an anterior or posterior approach |
| 50644 | Spine, bone graft to, for a child or adolescent, associated with surgery for correction of scoliosis or kyphosis or both [Anaes.] [Assist.] | SPINE, bone graft to, for a child or adolescent, associated with surgery for correction of scoliosis or kyphosis or both |
| 50650 | Hip dysplasia or dislocation, in a child, examination, manipulation and arthrography of the hip under anaesthesia [Anaes.] | HIP DYSPLASIA or DISLOCATION, in a child, examination, manipulation and arthrography of the hip |
| 50654 | Hip dysplasia or dislocation, in a child, application or reapplication of a hip spica, including examination of the hip [Anaes.] [Assist.] | HIP DYSPLASIA or DISLOCATION, in a child, application or reapplication of a hip spica, including examination of the hip |

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| PT0078 Corset cast | Corset cast |
| PT0079 Delbet cast | Delbet cast |
| PT0080 Dujarier bandage | Dujarier bandage |
| PT0081 Neck brace | Neck brace |
| PT0082 Splint with plaster | Splint with plaster |
| PT0083 Gantelet | Gantelet |
| PT0084 Manchette | Manchette |

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| Specialty | Outpatient Consultations | Sub-classification: |
|-----------|---|---|
| 16500 | Antenatal attendance | Antenatal consultation, follow-up visit |
| 2700 | Professional attendance by a medical practitioner [including a general practitioner who has not undertaken mental health skills training, but not including a specialist or consultant physician] of at least 20 minutes but less than 40 minutes in duration for the preparation of a gp mental health treatment plan for a patient | Mental health consultation, screening |
| 2712 | Professional attendance by a medical practitioner [not including a specialist or consultant physician] to review a gp mental health treatment plan which he or she, or an associated medical practitioner has prepared, or to review a psychiatrist assessment and management plan | Mental health consultation, follow-up visit |
| 2715 | Professional attendance by a medical practitioner [including a general practitioner who has undertaken mental health skills training, but not including a specialist or consultant physician] of at least 20 minutes but less than 40 minutes in duration for the preparation of a gp mental health treatment plan for a patient | Mental health consultation, screening |
| 5000 | Professional attendance at consulting rooms [other than a service to which another item applies] by a general practitioner for an obvious problem characterised by the straightforward nature of the task that requires a short patient history and, if required, limited examination and management--each attendance | Consultation night, week ends and holidays <20 minutes |
| 5040 | Professional attendance by a general practitioner at consulting rooms [other than a service to which another item in the table applies], lasting at least 20 minutes and including any of the following that are clinically relevant: [a] taking a detailed patient history; [b] performing a clinical examination; [c] arranging any necessary investigation; [d] implementing a management plan; [e] providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation--each attendance | Consultation night, week ends and holidays >=20 minutes |
| 597 | Professional attendance by a general practitioner on not more than 1 patient on 1 occasion — each attendance [other than an attendance in unsociable hours] in an after-hours period if:[a] the attendance is requested by the patient or a responsible person in, or not more than 2 hours before the start of, the same unbroken after-hours period, and the patient's condition requires urgent medical treatment; and [b] if the attendance is performed at consulting rooms — it must be necessary for the practitioner to return to, and specially open, the consulting rooms for the attendance | Urgent Consultation night, week ends and holidays <20 minutes |
| 82100 | Initial antenatal professional attendance by a participating midwife, lasting at least 40 minutes, including all of the following:[a] taking a detailed patient history;[b] performing a comprehensive examination;[c] performing a risk assessment;[d] based on the risk assessment - arranging referral or transfer of the patient's care to an obstetrician;[e] requesting pathology and diagnostic imaging services, when necessary; [f] discussing with the patient the collaborative arrangements for her maternity care and recording the arrangements in the midwife's written records in accordance with section 2e of the health insurance regulations 1975. payable once only for any pregnancy. | Antenatal consultation, first visit |
| 88012 | Periodic oral examination. An evaluation performed on a patient of record to determine any changes in the patient's dental and medical health status since a previous comprehensive or periodic examination. | Dental checkup |

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| Specialty Physiotherapy | Sub-classification: null | |
|--------------------------------|--|--|
| C3-2 | Consultation - physiotherapist Masters | Consultation - physiotherapist Masters |
| C3-3 | Consultation - physiotherapist A0 | Consultation - physiotherapist A0 |
| | Consultation - physiotherapist A1 | Consultation - physiotherapist A1 |
| | | Consultation - physiotherapist A1 |
| Specialty Physiotherapy | Sub-classification: | |
| PT0085 | Corrective arch support for foot | Corrective arch support for foot |
| PT0086 | Corrective support for hip or knee | Corrective support for hip or knee |
| PT0087 | Facilitation [PNF] [Bahath, Kabath] | Facilitation [PNF] [Bahath, Kabath] |
| PT0088 | Inner range | Inner range |
| PT0089 | ionisation | ionisation |
| PT0090 | Outer range | Outer range |
| PT0091 | Passive Stretching | Passive Stretching |
| PT0092 | Physical supplement | Physical supplement |
| PT0093 | Physiotherapy dynamic isotonic | Physiotherapy dynamic isotonic |
| PT0094 | Positioning | Positioning |
| PT0095 | Postural drainage [genera!] | Postural drainage [genera!] |
| PT0096 | Proprioceptive neuromuscular | Proprioceptive neuromuscular |
| PT0097 | Shaking | Shaking |

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| PT0098 Strengtening/muscle | Strengtening/muscle |
| PT0099 Stretching Complex [spinal] | Stretching Complex [spinal] |
| PT0100 Stretching Simple [vertebrae] | Stretching Simple [vertebrae] |
| PT0101 Theraputic exercise < 1 hour | Theraputic exercise < 1 hour |
| PT0102 Theraputic exercise <15 minutes | Theraputic exercise <15 minutes |
| PT0103 Theraputic exercise 1 Hour | Theraputic exercise 1 Hour |
| PT0104 Theraputic exercise 30 Minutes | Theraputic exercise 30 Minutes |
| PT0105 Traction complex [vertabrae] | Traction complex [vertabrae] |
| PT0106 Vibration physiotherapy | Vibration physiotherapy |
| PT0125 Knee brace [Zimmer] | Knee brace [Zimmer] |

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| Specialty Prosthesis | Sub-classification: | |
|--|---------------------|---------------------------------------|
| PT0107 Canadian cane | | Canadian cane |
| PT0108 Corrective sandal | | Corrective sandal |
| PT0109 Elbow crutch | | Elbow crutch |
| PT0110 Femoral prostheses with foot and knee | | Femoral prostheses with foot and knee |
| PT0111 Femoral prosthesis stump | | Femoral prosthesis stump |
| PT0112 Femoral prosthesis with knee and foot | | Femoral prosthesis with knee and foot |
| PT0113 Innertube for wheelchair | | Innertube for wheelchair |
| PT0114 Plastic brace lower limbs | | Plastic brace lower limbs |
| PT0115 Plastic brace upper limbs | | Plastic brace upper limbs |
| PT0116 Prosthesis - long without shoe | | Prosthesis - long without shoe |
| PT0117 Prosthesis - short without shoe | | Prosthesis - short without shoe |
| PT0118 Prosthesis - tibial | | Prosthesis - tibial |
| PT0119 Prosthesis - tibial post | | Prosthesis - tibial post |
| PT0120 Prosthesis - tibial with foot | | Prosthesis - tibial with foot |
| PT0121 Simple cane | | Simple cane |
| PT0122 Tire for wheelchair | | Tire for wheelchair |
| PT0123 Walking stick/cane | | Walking stick/cane |
| PT0125 Wheelchair | | Wheelchair |

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Specialty **Rehabilitation**

Sub-classification: **training/therapies**

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| 81100 | <p>DIABETES EDUCATION SERVICE - ASSESSMENT FOR GROUP SERVICES Diabetes education health service provided to a person by an eligible diabetes educator for the purposes of ASSESSING a person`s suitability for group services for the management of type 2 diabetes, including taking a comprehensive patient history, identifying an appropriate group services program based on the patient`s needs, and preparing the person for the group services, if: [a]the service is provided to a person who has type 2 diabetes; and [b]the person is being managed by a medical practitioner [including a general practitioner, but not a specialist or consultant physician] under a shared care plan or a GP Management Plan [ie item 721 or 732], or if the person is a resident of an aged care facility, their medical practitioner has contributed to a multidisciplinary care plan [ie item 731]; and [c]the person is referred to an eligible diabetes educator by the medical practitioner using a referral form that has been issued by the Department of Health, or a referral form that contains all the components of the form issued by the Department; and [d]the person is not an admitted patient of a hospital; and [e]the service is provided to the person individually and in person; and [f]the service is of at least 45 minutes duration; and [g]after the service, the eligible diabetes educator gives a written report to the referring medical practitioner mentioned in paragraph [c]; and [h]in the case of a service in respect of which a private health insurance benefit is payable - the person who incurred the medical expenses in respect of the service has elected to claim the Medicare benefit in respect of the service, and not the private health insurance benefit. Benefits are payable once only in a calendar year for this or any other Assessment for Group Services item [including services to which items 81100, 81110 and 81120 apply].</p> | Diabetes education |
| 81105 | <p>DIABETES EDUCATION SERVICE GROUP SERVICE Diabetes education health service provided to a person by an eligible diabetes educator, as a GROUP SERVICE for the management of type 2 diabetes if:[a] the person has been assessed as suitable for a type 2 diabetes group service under assessment item 81100, 81110 or 81120; and[b] the service is provided to a person who is part of a group of between 2 and 12 patients inclusive; and [c] the person is not an admitted patient of a hospital; and[d] the service is provided to a person involving the personal attendance by an eligible diabetes educator; and[e] the service is of at least 60 minutes duration; and[f] after the last service in the group services program provided to the person under items 81105, 81115 or 81125, the eligible diabetes educator prepares, or contribute to, a written report to be provided to the referring medical practitioner; and[g] an attendance record for the group is maintained by the eligible diabetes educator; and[h] in the case of a service in respect of which a private health insurance benefit is payable - the person who incurred the medical expenses in respect of the service has elected to claim the Medicare benefit in respect of the service, and not the private health insurance benefit;- to a maximum of eight GROUP SERVICES [including services to which items 81105, 81115 and 81125 apply] in a calendar year.</p> | Diabetes education |
| 81110 | <p>EXERCISE PHYSIOLOGY SERVICE - ASSESSMENT FOR GROUPSERVICES Exercise physiology health service provided to a person by an eligible exercise physiologist for the purposes of ASSESSING a person`s suitability for group services for the management of type 2 diabetes, including taking a comprehensive patient history, identifying an appropriate group services program based on the patient`s needs, and preparing the person for the group services, if: [a]the service is provided to a person who has type 2 diabetes; and [b]the person is being managed by a medical practitioner [including a general practitioner, but not a specialist or consultant physician] under a shared care plan or a GP</p> | Exercise physiology |

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Management Plan [ie item 721 or 732, or if the person is a resident of an aged care facility, their medical practitioner has contributed to a multidisciplinary care plan [ie item 731]; and [c]the person is referred to an eligible exercise physiologist by the medical practitioner using a referral form that has been issued by the Department of Health, or a referral form that contains all the components of the form issued by the Department; and [d]the person is not an admitted patient of a hospital; and [e]the service is provided to the person individually and in person; and [f]the service is of at least 45 minutes duration; and [g]after the service, the eligible exercise physiologist gives a written report to the referring medical practitioner mentioned in paragraph [c]; and [h]in the case of a service in respect of which a private health insurance benefit is payable - the person who incurred the medical expenses in respect of the service has elected to claim the Medicare benefit in respect of the service, and not the private health insurance benefit. Benefits are payable once only in a calendar year for this or any other Assessment for Group Services item [including services to which items 81100, 81110 and 81120 apply].

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| 81115 | <p>EXERCISE PHYSIOLOGY SERVICE GROUP SERVICE Exercise physiology health service provided to a person by an eligible exercise physiologist, as a GROUP SERVICE for the management of type 2 diabetes if:[a] the person has been assessed as suitable for a type 2 diabetes group service under assessment item 81100, 81110 or 81120; and[b] the service is provided to a person who is part of a group of between 2 and 12 patients inclusive; and [c] the person is not an admitted patient of a hospital; and[d] the service is provided to a person involving the personal attendance by an eligible exercise physiologist; and[e] the service is of at least 60 minutes duration; and[f] after the last service in the group services program provided to the person under items 81105, 81115 or 81125, the eligible exercise physiologist prepares, or contribute to, a written report to be provided to the referring medical practitioner; and[g] an attendance record for the group is maintained by the eligible exercise physiologist; and[h] in the case of a service in respect of which a private health insurance benefit is payable - the person who incurred the medical expenses in respect of the service has elected to claim the Medicare benefit in respect of the service, and not the private health insurance benefit;- to a maximum of eight GROUP SERVICES [including services to which items 81105, 81115 and 81125 apply] in a calendar year.</p> | Exercise physiology |
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| 81120 | <p>DIETETICS SERVICE - ASSESSMENT FOR GROUP SERVICES Dietetics health service provided to a person by an eligible dietitian for the purposes of ASSESSING a person`s suitability for group services for the management of type 2 diabetes, including taking a comprehensive patient history, identifying an appropriate group services program based on the patient`s needs, and preparing the person for the group services, if: [a]the service is provided to a person who has type 2 diabetes; and [b]the person is being managed by a medical practitioner [including a general practitioner, but not a specialist or consultant physician] under a shared care plan or a GP Management Plan [ie item 721 or 732], or if the person is a resident of an aged care facility, their medical practitioner has contributed to a multidisciplinary care plan [ie item 731]; and [c]the person is referred to an eligible dietitian by the medical practitioner using a referral form that has been issued by the Department of Health, or a referral form that contains all components of the form issued by the Department; and [d]the person is not an admitted patient of a hospital; and [e]the service is provided to the person individually and in person; and [f]the service is of at least 45 minutes duration; and [g]after the service, the eligible dietitian gives a written report to the referring medical practitioner mentioned in paragraph [c]; and [h]in the case of a service in respect of which a private health insurance benefit is payable - the person who incurred the medical expenses in respect of the service has elected to claim the Medicare benefit in respect of the service, and not the private health insurance</p> | Dietetics |
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benefit. Benefits are payable once only in a calendar year for this or any other Assessment for Group Services item [including services to which items 81100, 81110 and item 81120 apply].

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| 81125 | <p>DIETETICS SERVICE GROUP SERVICE Dietetics health service provided to a person by an eligible dietitian, as a GROUP SERVICE for the management of type 2 diabetes if:[a] the person has been assessed as suitable for a type 2 diabetes group service under assessment item 81100, 81110 or 81120; and[b] the service is provided to a person who is part of a group of between 2 and 12 patients inclusive; and [c] the person is not an admitted patient of a hospital; and[d] the service is provided to a person involving the personal attendance by an eligible dietitian; and[e] the service is of at least 60 minutes duration; and[f] after the last service in the group services program provided to the person under items 81105, 81115 or 81125, the eligible dietitian prepares, or contribute to, a written report to be provided to the referring medical practitioner; and[g] an attendance record for the group is maintained by the eligible dietitian; and[h] in the case of a service in respect of which a private health insurance benefit is payable - the person who incurred the medical expenses in respect of the service has elected to claim the Medicare benefit in respect of the service, and not the private health insurance benefit;- to a maximum of eight GROUP SERVICES [including services to which items 81105, 81115 and 81125 apply] in a calendar year.</p> | Dietetics |
| 82005 | <p>speech pathology health service provided to a child, aged under 13 years, by an eligible speech pathologist where:[a] the child is referred by an eligible practitioner for the purpose of assisting the practitioner with their diagnosis of the child; or[b] the child is referred by an eligible practitioner for the purpose of contributing to the child`s pervasive developmental disorder [pdd] or disability treatment plan, developed by the practitioner; and[c] or for a child with pdd, the eligible practitioner is a consultant physician in the practice of his or her field of psychiatry or paediatrics; for a child with disability, the eligible practitioner is a specialist, consultant physician or general practitioner: and[d] the speech pathologist attending the child is registered with the department of human services as meeting the credentialing requirements for provision of these services; and[e] the child is not an admitted patient of a hospital; and[f] the service is provided to the child individually and in person; and[g] the service lasts at least 50 minutes in duration.these items are limited to a maximum of four services per patient, consisting of any combination of the following items 82000, 82005, 82010 and 82030</p> | Speech pathology |
| 82010 | <p>occupational therapy health service provided to a child, aged under 13 years, by an eligible occupational therapist where:[a] the child is referred by an eligible practitioner for the purpose of assisting the practitioner with their diagnosis of the child; or[b] the child is referred by an eligible practitioner for the purpose of contributing to the child`s pervasive developmental disorder [pdd] or disability treatment plan, developed by the practitioner; and[c] or for a child with pdd, the eligible practitioner is a consultant physician in the practice of his or her field of psychiatry or paediatrics; for a child with disability, the eligible practitioner is a specialist, consultant physician or general practitioner: and[d] the occupational therapist attending the child is registered with the department of human services as meeting the credentialing requirements for provision of these services; and[e] the child is not an admitted patient of a hospital; and[f] the service is provided to the child individually and in person; and[g] the service lasts at least 50 minutes in duration.these items are limited to a maximum of four services per patient, consisting of any combination of the following items 82000, 82005, 82010 and 82030</p> | Occupational therapy |
| 82020 | <p>speech pathology health service provided to a child, aged under 15 years, for treatment of a pervasive developmental</p> | Speech pathology |

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disorder [pdd] or an eligible disability by an eligible speech pathologist where:[a] the child has been diagnosed with pdd or an eligible disability ; and [b] the child has received a pdd or disability treatment plan [while aged under 13 years] as prepared by an eligible practitioner; and[c] the child has been referred by an eligible practitioner for the provision of services that are consistent with the pdd or disability treatment plan; and[d] for a child with pdd, the eligible practitioner is a consultant physician in the practice of his or her field of psychiatry or paediatrics; or for a child with disability, the eligible practitioner is a specialist, consultant physician or general practitioner: and[e] the speech pathologist attending the child is registered with the department of human services as meeting the credentialing requirements for provision of these services; and[f] the child is not an admitted patient of a hospital; and[g] the service is provided to the child individually and in person; and[h] the service lasts at least 30 minutes in duration.these items are limited to a maximum of 20 services per patient, consisting of any combination of items 82015, 82020, 82025 and 82035

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| 82025 | occupational therapy health service provided to a child, aged under 15 years, for treatment of a pervasive developmental disorder [pdd] or an eligible disability by an eligible occupational therapist where:[a] the child has been diagnosed with pdd or an eligible disability ; and [b] the child has received a pdd or disability treatment plan [while aged under 13 years] as prepared by an eligible practitioner; and[c] the child has been referred by an eligible practitioner for the provision of services that are consistent with the pdd or disability treatment plan; and[d] or for a child with pdd, the eligible practitioner is a consultant physician in the practice of his or her field of psychiatry or paediatrics; for a child with disability, the eligible practitioner is a specialist, consultant physician or general practitioner: and[e] the occupational therapist attending the child is registered with the department of human services as meeting the credentialing requirements for provision of these services; and[f] the child is not an admitted patient of a hospital; and[g] the service is provided to the child individually and in person; and[h] the service lasts at least 30 minutes in duration.these items are limited to a maximum of 20 services per patient, consisting of any combination of items 82015, 82020, 82025 and 82035 | Occupational therapy |
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| 82030 | Audiology, optometry, orthoptic or physiotherapy health service provided to a child, aged under 13 years, by an eligible audiologist, optometrist, orthoptist or physiotherapist where:[a] the child is referred by an eligible practitioner for the purpose of assisting the practitioner with their diagnosis of the child; or[b] the child is referred by an eligible practitioner for the purpose of contributing to the child s pervasive developmental disorder[pdd] or disability treatment plan, developed by the practitioner; and[c] for a child with pdd, the eligible practitioner is a consultant physician in the practice of his or her field of psychiatry or paediatrics; or for a child with disability, the eligible practitioner is a specialist, consultant physician or general practitioner: and [d] the audiologist, optometrist, orthoptist or physiotherapist attending the child is registered with the department of human services as meeting the credentialing requirements for provision of these services; and[e] the child is not an admitted patient of a hospital; and[f] the service is provided to the child individually and in person; and[g] the service lasts at least 50 minutes in duration.these items are limited to a maximum of four services per patient, consisting of any combination of the following items - 82000, 82005, 82010 and 82030 | Audiology, optometry, orthoptic or physiotherapy |
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| 82035 | Audiology, optometry, orthoptic or physiotherapyaudiology, optometry, orthoptic or physiotherapy health service provided to a child, aged under 15 years, for treatment of a pervasive developmental disorder [pdd] or eligible disability by an eligible audiologist, optometrist, orthoptist or physiotherapist where:[a] the child has been diagnosed with pdd or eligible disability; and [b] the child has received a pdd or disability treatment plan [while aged under 13 years] as prepared by an eligible practitioner; and[c] the child has been referred by an eligible practitioner for the provision of services that are | Audiology, optometry, orthoptic or physiotherapy |
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consistent with the pdd or disability treatment plan; and[d] for a child with pdd, the eligible practitioner is a consultant physician in the practice of his or her field of psychiatry or paediatrics; or for a child with disability, the eligible practitioner is a specialist, consultant physician or general practitioner: and [e] the audiologist, optometrist, orthoptist or physiotherapist attending the child is registered with the department of human services as meeting the credentialing requirements for provision of these services; and[f] the child is not an admitted patient of a hospital; and[g] the service is provided to the child individually and in person; and[h] the service lasts at least 30 minutes in duration.these items are limited to a maximum of 20 services per patient, consisting of any combination of items - 82015, 82020, 82025 and 82035

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Specialty **Respiratory**

Sub-classification: **Diagnostic testing**

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| 11503 | Measurement of the:[a] mechanical or gas exchange function of the respiratory system; or [b] respiratory muscle function; Measurement of gas exchange or [c] ventilatory control mechanisms.various measurement parameters may be used including: [a] pressures; [b] volumes;function/respiratory function [c] flow; [d] gas concentrations in inspired or expired air; [e] alveolar gas or blood; [f] electrical activity of muscles. the tests being performed under the supervision of a specialist or consultant physician or in the respiratory laboratory of a hospital. each occasion at which 1 or more such tests are performed, not being a service associated with a service to which item 22018 applies. | |
| 11506 | Measurement of respiratory function involving a permanently recorded tracing performed before and after inhalation of bronchodilator — each occasion at which 1 or more such tests are performed | Measurement of respiratory function |
| 11509 | Measurement of respiratory function involving a permanently recorded tracing and written report, performed before and after inhalation of bronchodilator, with continuous technician attendance in a laboratory equipped to perform complex respiratory function tests [the tests being performed under the supervision of a specialist or consultant physician or in the respiratory laboratory of a hospital] — each occasion at which 1 or more such tests are performed | Measurement of respiratory function |
| 11512 | Continuous measurement of the relationship between flow and volume during expiration or inspiration involving a permanently recorded tracing and written report, performed before and after inhalation of bronchodilator, with continuous technician attendance in a laboratory equipped to perform complex lung function tests [the tests being performed under the supervision of a specialist or consultant physician or in the respiratory laboratory of a hospital] — each occasion at which 1 or more such tests are performed | Measurement of respiratory function |

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| Specialty SAMU list | Sub-classification: SAMU pre-hospitalisation | |
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| S0001 | Abdominal injuries SAMU pre-hospitalisation | Abdominal injuries SAMU pre-hospitalisation |
| S0002 | Acute abdomen SAMU pre-hospitalisation | Acute abdomen SAMU pre-hospitalisation |
| S0003 | Aaesthesia SAMU pre-hospitalisation | Aaesthesia SAMU pre-hospitalisation |
| S0004 | Bleeding on pregnancy SAMU pre-hospitalisation | Bleeding on pregnancy SAMU pre-hospitalisation |
| S0005 | Contusions SAMU pre-hospitalisation | Contusions SAMU pre-hospitalisation |
| S0006 | Convulsions SAMU pre-hospitalisation | Convulsions SAMU pre-hospitalisation |
| S0007 | Dehydration SAMU pre-hospitalisation | Dehydration SAMU pre-hospitalisation |
| S0008 | Diabetes` SAMU pre-hospitalisation | Diabetes` SAMU pre-hospitalisation |
| S0009 | Dislocation SAMU pre-hospitalisation | Dislocation SAMU pre-hospitalisation |
| S0010 | Drug poisoning SAMU pre-hospitalisation | Drug poisoning SAMU pre-hospitalisation |
| S0011 | Epilepsy SAMU pre-hospitalisation | Epilepsy SAMU pre-hospitalisation |
| S0012 | Fracture of Femur SAMU pre-hospitalisation | Fracture of Femur SAMU pre-hospitalisation |
| S0013 | Genital Haemorrhage SAMU pre-hospitalisation | Genital Haemorrhage SAMU pre-hospitalisation |
| S0014 | Haemothorax SAMU pre-hospitalisation | Haemothorax SAMU pre-hospitalisation |
| S0015 | Loss of consciousness SAMU pre-hospitalisation | Loss of consciousness SAMU pre-hospitalisation |
| S0016 | Minor head trauma SAMU pre-hospitalisation | Minor head trauma SAMU pre-hospitalisation |
| S0017 | Neonatal jaundice SAMU pre-hospitalisation | Neonatal jaundice SAMU pre-hospitalisation |

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| S0018 | Open fracture femur SAMU pre-hospitalisation | Open fracture femur SAMU pre-hospitalisation |
| S0019 | Oro-dental trauma SAMU pre-hospitalisation | Oro-dental trauma SAMU pre-hospitalisation |
| S0020 | Parturient in labor SAMU pre-hospitalisation | Parturient in labor SAMU pre-hospitalisation |
| S0021 | Post accident headache SAMU pre-hospitalisation | Post accident headache SAMU pre-hospitalisation |
| S0022 | Post-abortion care SAMU pre-hospitalisation | Post-abortion care SAMU pre-hospitalisation |
| S0023 | Post-partum care SAMU pre-hospitalisation | Post-partum care SAMU pre-hospitalisation |
| S0024 | Pregnancy disorders SAMU pre-hospitalisation | Pregnancy disorders SAMU pre-hospitalisation |
| S0025 | Psychosis SAMU pre-hospitalisation | Psychosis SAMU pre-hospitalisation |
| S0026 | Respiratory distress SAMU pre-hospitalisation | Respiratory distress SAMU pre-hospitalisation |
| S0027 | Retained placenta SAMU pre-hospitalisation | Retained placenta SAMU pre-hospitalisation |
| S0028 | Severe head trauma SAMU pre-hospitalisation | Severe head trauma SAMU pre-hospitalisation |
| S0029 | Stroke SAMU pre-hospitalisation | Stroke SAMU pre-hospitalisation |

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Specialty **SEROLOGY**

Sub-classification: **Widal**

L53956- Widal test [Salmonella typhi]

Widal test [Salmonella typhi]

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Specialty Special Investigations

Sub-classification: **E.E.G**

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| 12213 | Overnight paediatric investigation for a period of at least 8 hours duration for a patient aged between 12 and 18 years, if: [a] recordings of EEG [with a minimum of 4 EEG leads or, in selected investigations, of 6 EEG leads], EOG, submental or diaphragm EMG [or both], respiratory movement of rib and abdomen [whether movement of rib is recorded separately from, or together with, movement of abdomen], airflow, measurement of carbon dioxide [either end-tidal or transcutaneous], oxygen saturation and ECG are performed; and [b] a technician or registered nurse with sleep technology training is in continuous attendance under the supervision of a qualified sleep medicine practitioner; and [c] the patient is referred by a medical practitioner; and [d] the necessity for the investigation is determined by a qualified sleep medicine practitioner prior to the investigation; and [e] polygraphic records are analysed [for assessment of sleep stage, and maturation of sleep indices, arousals, respiratory events and assessment of clinically significant alterations in heart rate and body movement] with manual scoring, or manual correction of computerised scoring in epochs of not more than 1 minute, and stored for interpretation and preparation of report; and [f] interpretation and report are provided by a qualified sleep medicine practitioner based on reviewing the direct original recording of polygraphic data from the patient. For each particular patient — applicable only in relation to each of the first 3 occasions the investigation is performed in any 12 month period | Electro-encephelo gram [EEG] |
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Specialty Special Investigations

Sub-classification: **E.M.G**

Electromyography [EMG]

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| Specialty | Surgery | Sub-classification: | |
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| 35596 | Fistula between genital and urinary or alimentary tracts, repair of, not being a service to which item 37029, 37333 or 37336 applies [Anaes.] [Assist.] | Sub-classification: null | Repair of recto vesico vaginal fistula |
| N1085 | Stitches removal | | Stitches removal |
| Specialty | Surgery | Sub-classification: | |
| 44331 | Amputation at shoulder [Anaes.] [Assist.] | | Amputation at shoulder |
| Specialty | Surgery | Sub-classification: Appendicectomy | |
| 30645 | Appendicectomy, not being a service to which item 30574 applies, on a person under 10 years of age [Anaes.] [Assist.] | | Appendectomy under 10 years of age |
| Specialty | Surgery | Sub-classification: Cardiovascular | |
| 32508 | Varicose veins, complete dissection at the sapheno-femoral or sapheno-popliteal junction -1 leg - with or without either ligation or stripping, or both, of the long or short saphenous veins, for the first time on the same leg, including excision or injection of either tributaries or incompetent perforating veins, or both [Anaes.] [Assist.] | | VEINOUS STRIPPING |
| 32511 | Varicose veins, complete dissection at the sapheno-femoral and sapheno-popliteal junction -1 leg - with or without either ligation or stripping, or both, of the long or short saphenous veins, for the first time on the same leg, including excision or injection of either tributaries or incompetent perforating veins, or both [Anaes.] [Assist.] | | SAPHENECTOMY |
| 32514 | Varicose veins, ligation of the long or short saphenous vein on the same leg, with or without stripping, by re-operation for recurrent veins in the same territory - 1 leg - including excision or injection of either tributaries or incompetent perforating veins, or both [Anaes.] [Assist.] | | VEINOUS STRIPPING |
| 32708 | Aortic bypass for occlusive disease using a straight non-bifurcated graft [Anaes.] [Assist.] | | AORTIC STENOSIS REPAIR |
| 32710 | Aortic bypass for occlusive disease using a bifurcated graft with 1 or both anastomoses to the iliac arteries [Anaes.] [Assist.] | | Aortic Bypass |
| 32711 | Aortic bypass for occlusive disease using a bifurcated graft with 1 or both anastomoses to the common femoral or profunda femoris arteries [Anaes.] [Assist.] | | Aortic Bypass |
| 32760 | Vein, harvesting of, from leg or arm for bypass or replacement graft when not performed on the limb which is the subject of the bypass or graft - each vein [Anaes.] [Assist.] | | Vein Harvesting |

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| 33548 | Artery, vein or bypass graft, patch grafting to by vein or synthetic material where patch is 3cm long or greater [Anaes.] [Assist.] | ARTERY, VEIN OR BYPASS GRAFT |
| 34130 | Surgically created arterio-venous fistula of an extremity, closure of [Anaes.] [Assist.] | AV FISTULA CREATION |
| 34500 | Arteriovenous shunt, external, insertion of [Anaes.] [Assist.] | ARTERIOVENOUS SHUNT, EXTERNAL, insertion of |
| 34503 | Arteriovenous anastomosis of upper or lower limb, in conjunction with another venous or arterial operation [Anaes.] [Assist.] | ARTERIOVENOUS ANASTOMOSIS OF UPPER OR LOWER LIMB |
| 34506 | Arteriovenous shunt, external, removal of [Anaes.] [Assist.] | ARTERIOVENOUS SHUNT, EXTERNAL, removal of |
| 34509 | Arteriovenous anastomosis of upper or lower limb, not in conjunction with another venous or arterial operation [Anaes.] [Assist.] | ARTERIOVENOUS ANASTOMOSIS OF UPPER OR LOWER LIMB |
| 38272 | Atrial septal defect closure, with septal occluder or other similar device, by transcatheter approach [Anaes.] [Assist.] | ATRIAL SEPTUM DEFECT REPAIR |
| 38273 | Patent ductus arteriosus, transcatheter closure of, including cardiac catheterisation and any imaging associated with the service [Anaes.] [Assist.] | PATENT DUCTUS ARTERIOSUS LIGATION |
| 38274 | Ventricular septal defect, transcatheter closure of, with imaging and cardiac catheterisation [Anaes.] [Assist.] | VENTRICULAR SEPTAL DEFECT REPAIR |
| 38350 | Single chamber permanent transvenous electrode, insertion, removal or replacement of, including cardiac electrophysiological services where used for pacemaker implantation [Anaes.] | Pacemaker Electrode removal or replacement |
| 38356 | Dual chamber permanent transvenous electrodes, insertion, removal or replacement of, including cardiac electrophysiological services where used for pacemaker implantation [Anaes.] | PACEMAKER IMPLANTATION |
| 38358 | Extraction of chronically implanted transvenous pacing or defibrillator lead or leads, by percutaneous method where the leads have been in situ for greater than six months and require removal with locking stylets, snares and/or extraction sheaths in a facility where cardiac surgery is available, in association with item 61109 or 60509 [Anaes.] [Assist.] | Pacemaker Electrode removal or replacement |
| 38470 | Permanent myocardial electrode, insertion of, by thoracotomy or sternotomy [Anaes.] [Assist.] | Pacemaker Electrode insertion |
| 38480 | Valve repair, 1 leaflet [Anaes.] [Assist.] | TRICUSPID VALVE REPAIR |
| 38481 | Valve repair, 2 or more leaflets [Anaes.] [Assist.] | TRICUSPID VALVE REPAIR |
| 38483 | Aortic valve leaflet or leaflets, decalcification of, not being a service to which item 38475, 38477, 38480, 38481, 38488 or 38489 applies [Anaes.] [Assist.] | AORTIC VALVE REPAIR |

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| 38485 | Mitral annulus, reconstruction of, after decalcification, when performed in association with valve surgery [Anaes.] [Assist.] | MITRAL VALVE REPAIR |
| 38487 | Mitral valve, open valvotomy of [Anaes.] [Assist.] | Valvotomy |
| 38488 | Valve replacement with bioprosthesis or mechanical prosthesis [Anaes.] [Assist.] | TRICUSPID VALVE REPLACEMENT |
| 38489 | Valve replacement with allograft [subcoronary or cylindrical implant], or unstented xenograft [Anaes.] [Assist.] | Valve Replacement |
| 38490 | Sub-valvular structures, reconstruction and re-implantation of, associated with mitral and tricuspid valve replacement [Anaes.] [Assist.] | MITRAL VALVE REPLACEMENT |
| 38553 | Ascending thoracic aorta, repair or replacement of, with aortic valve replacement or repair, without implantation of coronary arteries [Anaes.] [Assist.] | AORTIC VALVE REPLACEMENT |
| 38637 | Patent diseased coronary artery bypass vein graft or grafts, dissection, disconnection and oversewing of [Anaes.] [Assist.] | ARTERY PROSTHETIC GRAFTING [PATCH] |
| 38700 | Patent ductus arteriosus, shunt, collateral or other single large vessel, division or ligation of, without cardiopulmonary bypass, for congenital heart disease [Anaes.] [Assist.] | TETRALLOGY OF FALLOTS REPAIR |
| 38703 | Patent ductus arteriosus, shunt, collateral or other single large vessel, division or ligation of, with cardiopulmonary bypass, PATENT DUCTUS ARTERIOSUS, shunt for congenital heart disease [Anaes.] [Assist.] | |
| 38706 | Aorta, anastomosis or repair of, without cardiopulmonary bypass, for congenital heart disease [Anaes.] [Assist.] | PATENT DUCTUS ARTERIOSUS LIGATION |
| 38709 | Aorta, anastomosis or repair of, with cardiopulmonary bypass, for congenital heart disease [Anaes.] [Assist.] | AORTA, anastomosis or repair of, with cardiopulmonary bypass |
| 38712 | Aortic interruption, repair of, for congenital heart disease [Anaes.] [Assist.] | PATENT DUCTUS ARTERIOSUS LIGATION |
| 38715 | Main pulmonary artery, banding, debanding or repair of, without cardiopulmonary bypass, for congenital heart disease [Anaes.] [Assist.] | AORTIC COARCTATION REPAIR |
| 38718 | Main pulmonary artery, banding, debanding or repair of, with cardiopulmonary bypass, for congenital heart disease [Anaes.] [Assist.] | PATCH BAFFLE CLOSURE OF VENTRICULAR SEPTAL DEFECT |
| 38721 | Vena cava, anastomosis or repair of, without cardiopulmonary bypass, for congenital heart disease [Anaes.] [Assist.] | PATENT DUCTUS ARTERIOSUS LIGATION |
| 38724 | Vena cava, anastomosis or repair of, with cardiopulmonary bypass, for congenital heart disease [Anaes.] [Assist.] | AORTIC COARCTATION REPAIR |
| 38727 | Intrathoracic vessels, anastomosis or repair of, without cardiopulmonary bypass, not being a service to which item 38700, 38703, 38706, 38709, 38712, 38715, 38718, 38721 or 38724 applies, for congenital heart disease [Anaes.] [Assist.] | INTRATHORACIC VESSELS, anastomosis or repair of |

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| 38730 | Intrathoracic vessels, anastomosis or repair of, with cardiopulmonary bypass, not being a service to which item 38700, 38703, 38706, 38709, 38712, 38715, 38718, 38721 or 38724 applies, for congenital heart disease [Anaes.] [Assist.] | BT SHUNT LIGATION FOR TOF |
| 38733 | Systemic pulmonary or cavo-pulmonary shunt, creation of, without cardiopulmonary bypass, for congenital heart disease [Anaes.] [Assist.] | SYSTEMIC PULMONARY or CAVO-PULMONARY SHUNT, creation of, |
| 38736 | Systemic pulmonary or cavo-pulmonary shunt, creation of, with cardiopulmonary bypass, for congenital heart disease [Anaes.] [Assist.] | SYSTEMIC PULMONARY or CAVO-PULMONARY SHUNT, creation of |
| 38739 | Atrial septectomy, with or without cardiopulmonary bypass, for congenital heart disease [Anaes.] [Assist.] | ATRIAL SEPTECTOMY |
| 38742 | Atrial septal defect, closure by open exposure direct suture or patch, for congenital heart disease [Anaes.] [Assist.] | ATRIAL SEPTUM DEFECT REPAIR |
| 38745 | Intra-atrial baffle, insertion of, for congenital heart disease [Anaes.] [Assist.] | PATCH BAFFLE CLOSURE OF VENTRICULAR SEPTAL DEFECT |
| 38748 | Ventricular septectomy, for congenital heart disease [Anaes.] [Assist.] | VENTRICULAR SEPTAL DEFECT REPAIR |
| 38751 | Ventricular septal defect, closure by direct suture or patch [Anaes.] [Assist.] | VENTRICULAR SEPTAL DEFECT REPAIR |
| 38754 | Intra-ventricular baffle or conduit, insertion of, for congenital heart disease [Anaes.] [Assist.] | INTRAVENTRICULAR BAFFLE OR CONDUIT, insertion |
| 38757 | Extracardiac conduit, insertion of, for congenital heart disease [Anaes.] [Assist.] | EXTRACARDIAC CONDUIT, insertion |
| 38760 | Extracardiac conduit, replacement of, for congenital heart disease [Anaes.] [Assist.] | EXTRACARDIAC CONDUIT, replacement |
| 38763 | Ventricular myectomy, for relief of ventricular obstruction, right or left, for congenital heart disease [Anaes.] [Assist.] | VENTRICULAR MYECTOMY |
| 38766 | Ventricular augmentation, right or left, for congenital heart disease [Anaes.] [Assist.] | VENTRICULAR AUGMENTATION |

Specialty Surgery

Sub-classification: Cheloidectomie

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| 31225 | tumours [other than viral verrucae [common warts] and seborrheic keratoses], cysts, ulcers or scars [other than scars removed during the surgical approach at an operation], removal of more than 10 lesions, if: [a] the size of each lesion is not more than 10 mm in diameter; and [b] each removal is from cutaneous or subcutaneous tissue or mucous membrane by surgical excision [other than by shave excision]; and [c] each site of excision is closed by suture; and [d] all of the specimens excised are sent for histological examination [Anaes.] | Scar revision |
|-------|--|---------------|

Specialty Surgery

Sub-classification: Injection

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| | | |
|--------------------------|---|---|
| N1004 | Injection intra-articular [joint] Injection IV | Injection intra-articular [joint] Injection IV |
| Specialty Surgery | | Sub-classification: Injection IM |
| | Injection IM | Injection IM |
| Specialty Surgery | | Sub-classification: Neurosurgery |
| 39000 | Lumbar puncture [Anaes.] | Lumbar Puncture |
| 39009 | Subdural haemorrhage, tap for, each tap [Anaes.] | ACUTE SUBDURAL HAEMATOMA EVACUATION [TRAUMA] |
| 39012 | Burr-hole, single, preparatory to ventricular puncture or for inspection purpose - not being a service to which another item applies [Anaes.] | BURRHOLE + VENTRICULOSTOMY |
| 39600 | Intracranial haemorrhage, burr-hole craniotomy for - including burr-holes [Anaes.] [Assist.] | CRANIOTOMY FOR DRAINAGE OF SUBDURAL EMPYEMA |
| 39603 | Intracranial haemorrhage, osteoplastic craniotomy or extensive craniectomy and removal of haematoma [Anaes.] [Assist.] | CRANIOTOMY FOR EPIDURAL HEMATOMA INTRACEREBRAL HAEMATOMA EVACUATION [TRAUMA] SUBOCCIPITAL CRANIECTOMY + REPAIR |
| 39662 | Tumour or vascular lesion of foramen magnum, radical excision of, via transcondylar or far lateral suboccipital approach [Anaes.] [Assist.] | SUBOCCIPITAL CRANIECTOMY + TUMOR REMOVAL |
| 39709 | Craniotomy for removal of glioma, metastatic carcinoma or any other tumour in cerebrum, cerebellum or brain stem - not being a service to which another item in this Sub-group applies [Anaes.] [Assist.] | CRANIOTOMY FOR BRAIN TUMOR [CONVEXTY TUMOR] |
| 39712 | Craniotomy for removal of meningioma, pinealoma, cranio-pharyngioma, intraventricular tumour or any other intracranial tumour, not being a service to which another item in this Sub-group applies [Anaes.] [Assist.] | CRANIOTOMY & BASE OF SKULL DRILLING FOR OLFATORY GROOVE MENINGIOMA |
| 39806 | Aneurysm, or arteriovenous malformation, intracranial proximal artery clipping of [Anaes.] [Assist.] | ANEURYSM CLIPPING |
| 39906 | Osteomyelitis of skull or removal of infected bone flap, craniectomy for [Anaes.] [Assist.] | SUBOCCIPITAL CRANIECTOMY |

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| | | |
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| 40000 | Ventriculo-cisternostomy [Torkildsen`s operation] [Anaes.] [Assist.] | HYDROCELECTOMY [UNILATERAL] |
| 40003 | Cranial or cisternal shunt diversion, insertion of [Anaes.] [Assist.] | VENTRICULAR PERITONIUM SHUNT INSERTION |
| 40006 | Lumbar shunt diversion, insertion of [Anaes.] [Assist.] | VENTRICULAR PERITONIUM SHUNT INSERTION |
| 40009 | Cranial, cisternal or lumbar shunt, revision or removal of [Anaes.] [Assist.] | VENTRICULAR PERITONIUM SHUNT REVISION |
| 40012 | Third ventriculostomy [open or endoscopic] with or without endoscopic septum pellucidotomy [Anaes.] [Assist.] | THIRD VENTRICULOSTOMY [open or endoscopic] with or without endoscopic septum pellucidotom |
| 40018 | Lumbar cerebrospinal fluid drain, insertion of [Anaes.] | LUMBAR CEREBROSPINAL FLUID DRAIN, insertion of |
| 40100 | Meningocele, excision and closure of [Anaes.] [Assist.] | MENINGOCELE REPAIR LUMBAR SACRAL |
| 40300 | Intervertebral disc or discs, partial or total laminectomy for removal of [Anaes.] [Assist.] | POSTERIOR LUMBER DECOMPRESSION |
| 40309 | Extradural tumour or abscess, partial or total laminectomy for [Anaes.] [Assist.] | LAMINECTOMY FOR DRAINAGE OF SPINAL EPIDURAL ABCESS |
| 40321 | Posterior spinal fusion, not being a service to which items 40324 and 40327 apply [Anaes.] [Assist.] | LUMBAR POSTERIOR FUSION |
| 40324 | Partial or total laminectomy followed by posterior fusion, performed by neurosurgeon and orthopaedic surgeon operating together laminectomy, including aftercare [Anaes.] [Assist.] | LUMBAR POSTERIOR FUSION |
| 40327 | Partial or total laminectomy followed by posterior fusion, performed by neurosurgeon and orthopaedic surgeon operating together posterior fusion, including aftercare [Assist.] | LUMBAR POSTERIOR FUSION |
| 40331 | Cervical decompression of spinal cord with or without involvement of nerve roots, without fusion, 1 level, by any approach, not being a service to which item 40330 applies [Anaes.] [Assist.] | ANTERIOR CERVICAL DECOMPRESSION |
| 40332 | Cervical decompression of spinal cord with or without involvement of nerve roots, including anterior fusion, 1 level, not being a service to which item 40330 applies [Anaes.] [Assist.] | ANTERIOR CERVICAL DECOMPRESSION |
| 40334 | Cervical decompression of spinal cord with or without involvement of nerve roots, without fusion, more than 1 level, by any approach, not being a service to which item 40330 applies [Anaes.] [Assist.] | ANTERIOR CERVICAL DECOMPRESSION |
| 40335 | Cervical decompression of spinal cord with or without involvement of nerve roots, including anterior fusion, more than 1 level, by any approach, not being a service to which item 40330 applies [Anaes.] [Assist.] | ANTERIOR CERVICAL DECOMPRESSION |

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| 40345 | Thoracic decompression of spinal cord with or without involvement of nerve roots, via pedicle or costotransversectomy [Anaes.] [Assist.] | ANTERIOR THORACIC DECOMPRESSION |
| 40348 | Thoracic decompression of spinal cord via thoracotomy with vertebrectomy, not including stabilisation procedure [Anaes.] [Assist.] | ANTERIOR THORACIC DECOMPRESSION |
| 40351 | Thoraco-lumbar or high lumbar anterior decompression of spinal cord, not including stabilisation procedure [Anaes.] [Assist.] | POSTERIOR THORACO-LUMBER DECOMPRESSION |
| 40600 | Cranioplasty, reconstructive [Anaes.] [Assist.] | CRANIOPLASTY |

Specialty Surgery

Sub-classification: **Orthopedics**

| | | |
|-------|---|----------------------------------|
| 30075 | DIAGNOSTIC BIOPSY OF LYMPH GLAND, MUSCLE OR OTHER DEEP TISSUE OR ORGAN, as an independent procedure,if the biopsy specimen is sent for pathological examination [Anaes.] | MUCSLE BIOPSY |
| 40331 | Cervical decompression of spinal cord with or without involvement of nerve roots, without fusion, 1 level, by any approach, not being a service to which item 40330 applies [Anaes.] [Assist.] | POSTERIOR CERVICAL DECOMPRESSION |
| 40332 | Cervical decompression of spinal cord with or without involvement of nerve roots, including anterior fusion, 1 level, not being a service to which item 40330 applies [Anaes.] [Assist.] | POSTERIOR CERVICAL DECOMPRESSION |
| 40345 | Thoracic decompression of spinal cord with or without involvement of nerve roots, via pedicle or costotransversectomy [Anaes.] [Assist.] | POSTERIOR THORACIC DECOMPRESSION |
| 40348 | Thoracic decompression of spinal cord via thoracotomy with vertebrectomy, not including stabilisation procedure [Anaes.] [Assist.] | POSTERIOR THORACIC DECOMPRESSION |
| 43512 | Operation on scapula, sternum, clavicle, rib, ulna, radius, metacarpus, carpus, phalanx, tibia, fibula, metatarsus, tarsus, mandible or maxilla [other than alveolar margins] [for chronic osteomyelitis] 1 bone or any combination of adjoining bones [Anaes.] [Assist.] | LAUTENBACH PROCEDURE |
| 43515 | Operation on humerus or femur [for chronic osteomyelitis] 1 bone [Anaes.] [Assist.] | Operation ofn Humerus or Femur |
| 44325 | Hand, midcarpal or transmetacarpal, amputation of [Anaes.] [Assist.] | AMPUTATION of the hand |
| 44328 | Hand, forearm or through arm, amputation of [Anaes.] [Assist.] | Hand or forarm amputation |
| 44361 | Foot at ankle [Syme, Pirogoff types], amputation of [Anaes.] [Assist.] | Amputation of the foot |
| 44367 | Amputation through thigh, at knee or below knee [Anaes.] [Assist.] | AMPUTATION ABOVE KNEE |

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| 44370 | Amputation at hip [Anaes.] [Assist.] | AMPUTATION at hip |
| 45865 | Arthrocentesis, irrigation of temporomandibular joint after insertion of 2 cannuli into the appropriate joint space[s] [Anaes.] [Assist.] | ARTHROCENTESIS |
| 47003 | Clavicle, treatment of dislocation of, by closed reduction [Anaes.] | ORIF ACROMIO-CLAVICULAR DISLOCATION |
| 47304 | Metacarpal, treatment of fracture of, by closed reduction, requiring anaesthesia, not provided on the same occasion as a service described in item 47301, 47307, 47310, 47313, 47316 or 47319 [Anaes.] | CLOSED REDUCTION PLUS PLASTER OF PARIS [POP] |
| 47310 | Phalanx or metacarpal, treatment of fracture of, by open reduction with fixation [Anaes.] [Assist.] | ORIF METACARPAL, MULTIPLE FRACTURES |
| 47362 | Radius or ulna, or radius and ulna, distal end of, treatment of fracture of, by closed reduction, requiring general or major regional anaesthesia, but excluding local infiltration, other than a service associated with a service to which item 47361, 47364, 47367, 47370 or 47373 applies [Anaes.] | CLOSED REDUCTION PLUS PLASTER OF PARIS [POP] |
| 47381 | Radius or ulna, shaft of, treatment of fracture of, by closed reduction undertaken in the operating theatre of a hospital [Anaes.] | CLOSED REDUCTION PLUS PLASTER OF PARIS [POP] |
| 47426 | Humerus, proximal, treatment of fracture of, by closed reduction, undertaken in the operating theatre of a hospital [Anaes.] | CLOSED REDUCTION PLUS PLASTER OF PARIS [POP] |
| 47516 | Femur, treatment of fracture of, by closed reduction or traction [Anaes.] [Assist.] | CLOSED REDUCTION PLUS PLASTER OF PARIS [POP] |
| 47528 | Femur, treatment of fracture of, by internal fixation or external fixation [Anaes.] [Assist.] | ORIF , FEMUR NECK |
| 47531 | Femur, treatment of fracture of shaft, by intramedullary fixation and cross fixation [Anaes.] [Assist.] | ORIF SUPRACONDYLAR FRACTURE LEFT FEMUR |
| 47534 | Femur, condylar region of, treatment of intra-articular [T-shaped condylar] fracture of, requiring internal fixation, with or without internal fixation of 1 or more osteochondral fragments [Anaes.] [Assist.] | ORIF FEMUR [IMN] |
| 47537 | Femur, condylar region of, treatment of fracture of, requiring internal fixation of 1 or more osteochondral fragments, not being a service associated with a service to which item 47534 applies [Anaes.] [Assist.] | SEQUESTRECTOMY FEMUR |
| 47543 | Tibia, plateau of, treatment of medial or lateral fracture of, not being a service to which item 47546 or 47549 applies [Anaes.] | RECONSTRUCTION OF TIBIAL PLATEAU |
| 47546 | Tibia, plateau of, treatment of medial or lateral fracture of, by closed reduction [Anaes.] | CLOSED REDUCTION PLUS PLASTER OF PARIS [POP] RECONSTRUCTION OF TIBIAL PILON |

Rwanda Medical Procedure Code Database

RMP Code Detailed Nomenclature

Mapped to local nomenclature

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| 47549 | Tibia, plateau of, treatment of medial or lateral fracture of, by open reduction [Anaes.] [Assist.] | PLATE REMOVAL TIBIA |
| 47552 | Tibia, plateau of, treatment of both medial and lateral fractures of, not being a service to which item 47555 or 47558 applies [Anaes.] [Assist.] | IMN REMOVAL RT TIBIA |
| 47555 | Tibia, plateau of, treatment of both medial and lateral fractures of, by closed reduction [Anaes.] | EXTERNAL FIXATOR OF LEFT TIBIA FRACTURE |
| 47564 | Tibia, shaft of, treatment of fracture of, by closed reduction, with or without treatment of fibular fracture [Anaes.] | CLOSED REDUCTION PLUS PLASTER OF PARIS [POP] |
| 47588 | Knee joint, treatment of fracture of, by internal fixation of intra-articular fractures of femoral condylar or tibial articular surfaces and requiring repair or reconstruction of 1 or more ligaments [Anaes.] [Assist.] | KNEE: QUADRICEPS PLASTY |
| 47591 | Knee joint, treatment of fracture of, by internal fixation of intra-articular fractures of femoral condylar and tibial articular surfaces and requiring repair or reconstruction of 1 or more ligaments [Anaes.] [Assist.] | ANTERIOR CRUCIATE LIGAMENT[ACL] RECONSTRUCTION |
| 47594 | Ankle joint, treatment of fracture of, not being a service to which item 47597 applies [Anaes.] | ORIF FRACTURE-DISLOCATION OF ANKLE |
| 47597 | Ankle joint, treatment of fracture of, by closed reduction [Anaes.] | CLOSED REDUCTION PLUS PLASTER OF PARIS [POP] ORIF FOR RT BIMALLEORAR FRACTURE |
| 47600 | Ankle joint, treatment of fracture of, by internal fixation of 1 of malleolus, fibula or diastasis [Anaes.] [Assist.] | ANKLE JOINT RECONSTRUCTION |
| 47603 | Ankle joint, treatment of fracture of, by internal fixation of more than 1 of malleolus, fibula or diastasis [Anaes.] [Assist.] | ANKLE JOINT RECONSTRUCTION |
| 47609 | Calcaneum or talus, treatment of fracture of, by closed reduction, with or without dislocation [Anaes.] [Assist.] | CLOSED REDUCTION PLUS PLASTER OF PARIS [POP] |
| 47621 | Tarso-metatarsal, treatment of intra-articular fracture of, by closed reduction, with or without dislocation [Anaes.] [Assist.] | CLOSED REDUCTION PLUS PLASTER OF PARIS [POP] |
| 47636 | Metatarsal, 1 of, treatment of fracture of, by closed reduction [Anaes.] | CLOSED REDUCTION PLUS PLASTER OF PARIS [POP] |
| 47645 | Metatarsals, 2 of, treatment of fracture of, by closed reduction [Anaes.] | CLOSED REDUCTION PLUS PLASTER OF PARIS [POP] |
| 47654 | Metatarsals, 3 or more of, treatment of fracture of, by closed reduction [Anaes.] [Assist.] | CLOSED REDUCTION PLUS PLASTER OF PARIS [POP] |
| 47663 | Phalanx of great toe, treatment of fracture of, by closed reduction [Anaes.] | CLOSED REDUCTION PLUS PLASTER OF |

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RMP Code Detailed Nomenclature

Mapped to local nomenclature

| | | PARIS [POP] |
|-------|--|---|
| 47921 | Orthopaedic pin or wire, insertion of, as an independent procedure [Anaes.] | CLOSED REDUCTION+K.WIRE FIXATION |
| 47924 | Buried wire, pin or screw, 1 or more of, which were inserted for internal fixation purposes, removal of requiring incision and suture, not being a service to which item 47927 or 47930 applies - per bone [Anaes.] | REMOVAL EXTERNAL FIXATOR |
| 47927 | Buried wire, pin or screw, 1 or more of, which were inserted for internal fixation purposes, removal of, in the operating theatre of a hospital - per bone [Anaes.] | REMOVAL EXTERNAL FIXATOR |
| 47930 | Plate, rod or nail and associated wires, pins or screws, 1 or more of, all of which were inserted for internal fixation purposes, removal of, not being a service associated with a service to which item 47924 or 47927 applies - per bone [Anaes.] [Assist.] | PLATE REMOVAL PROXIMAL RADIUS |
| 47948 | External fixation, removal of, in the operating theatre of a hospital [Anaes.] | PLATE REMOVAL PROXIMAL RADIUS |
| 47951 | External fixation, removal of, in conjunction with operations involving internal fixation or bone grafting or both [Anaes.] | REMOVAL OF ANKLE METAL WORK |
| 48406 | Fibula, radius, ulna, clavicle, scapula [other than acromion], rib, tarsus or carpus, osteotomy or osteectomy of, excluding services to which items 47933 or 47936 apply [Anaes.] [Assist.] | OSTEOTOMY OF RADIUS |
| 48418 | Tibia, osteotomy or osteectomy of, excluding services to which items 47933 or 47936 apply [Anaes.] [Assist.] | EXTERNAL FIXATOR OF LEFT TIBIA FRACTURE |
| 48421 | Tibia, osteotomy or osteectomy of, with internal fixation, and excluding services to which items 47933 or 47936 apply [Anaes.] [Assist.] | EXTERNAL FIXATOR OF LEFT TIBIA FRACTURE |
| 48424 | Femur or pelvis, osteotomy or osteectomy of, other than a service associated with surgery for femoroacetabular impingement, or to which item 47933 or 47936 applies [H] [Anaes.] [Assist.] | Osteotomy of femur or pelvis |
| 48427 | Femur or pelvis, osteotomy or osteectomy of, with internal fixation, and excluding services to which items 47933 or 47936 apply [Anaes.] [Assist.] | RECONSTRUCTION OF FEMORAL CONDYLE |
| 48500 | Femur, epiphysiodesis of [Anaes.] [Assist.] | IMN REMOVAL RT FEMUR |
| 48503 | Tibia and fibula, epiphysiodesis of [Anaes.] [Assist.] | EXTERNAL FIXATOR OF LEFT TIBIA FRACTURE |
| 48506 | Femur, tibia and fibula, epiphysiodesis of [Anaes.] [Assist.] | EXTERNAL FIXATOR OF LEFT TIBIA FRACTURE |
| 48654 | Spinal fusion [posterior interbody], with partial or total laminectomy, 1 level [Anaes.] [Assist.] | FIXATION AND FUSION CERVICAL/POSTERIOR |

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| | | |
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| 48657 | Spinal fusion [posterior interbody], with partial or total laminectomy, more than 1 level [Anaes.] [Assist.] | FIXATION AND FUSION THORACO-LUMBAR |
| 48660 | Spinal fusion [anterior interbody] to cervical, thoracic or lumbar regions - 1 level [Anaes.] [Assist.] | FIXATION AND FUSION CERVICAL/ANTERIOR |
| 48669 | Spinal fusion [anterior interbody] to cervical, thoracic or lumbar regions - more than 1 level [Anaes.] [Assist.] | FIXATION AND FUSION THORAC ANTERIOR |
| 48930 | Shoulder, stabilisation procedure for recurrent anterior or posterior dislocation [Anaes.] [Assist.] | RECONSTRUCTION OF RECURRENT SHOULDER DISLOCATION |
| 49509 | Knee, total synovectomy or arthrodesis with synovectomy if performed [Anaes.] [Assist.] | Knee total synovectomy or arthrodesis |
| 49512 | Knee, arthrodesis of, with synovectomy if performed, with removal of prosthesis [Anaes.] [Assist.] | ARTHRODESIS KNEE |
| 49517 | Knee, hemiarthroplasty of [Anaes.] [Assist.] | Knee hemiarthroplasty |
| 49518 | Knee, total replacement arthroplasty of [Anaes.] [Assist.] | KNEE: TOTAL REPLACEMENT |
| 49519 | Knee, total replacement arthroplasty of, including associated minor grafting, if performed - bilateral [Anaes.] [Assist.] | Knee replacement |
| 49521 | Knee, total replacement arthroplasty of, requiring major bone grafting to femur or tibia, including obtaining of graft [Anaes.] [Assist.] | Knee replacement |
| 49524 | Knee, total replacement arthroplasty of, requiring major bone grafting to femur and tibia, including obtaining of graft [Anaes.] [Assist.] | Knee replacement |
| 49527 | Knee, total replacement arthroplasty of, revision procedure, including removal of prosthesis [Anaes.] [Assist.] | Knee replacement |
| 49530 | Knee, total replacement arthroplasty of, revision procedure, requiring bone grafting to femur or tibia, including obtaining of graft and including removal of prosthesis [Anaes.] [Assist.] | REVISION OF FEMORAL COMPONENT |
| 49533 | Knee, total replacement arthroplasty of, revision procedure, requiring bone grafting to both femur and tibia, including obtaining of graft and including removal of prosthesis [Anaes.] [Assist.] | REVISION OF THE STEM FOR THR |
| 49545 | Knee, revision arthrodesis of, with synovectomy if performed [Anaes.] [Assist.] | Knee revision arthrodesis |
| 49557 | Knee, diagnostic arthroscopy of [including biopsy, simple trimming of meniscal margin or plica] - not being a service associated with autologous chondrocyte implantation or matrix-induced autologous chondrocyte implantation or any other arthroscopic procedure of the knee region [Anaes.] [Assist.] | ARTHROSCOPY + CHONDROPLASTY |
| 49558 | Knee, arthroscopic surgery of, involving 1 or more of: debridement, osteoplasty or chondroplasty - not associated with any other arthroscopic procedure of the knee region [Anaes.] [Assist.] | ARTHROSCOPY + CHONDROPLASTY |

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| 49560 | Knee, arthroscopic surgery of, involving 1 or more of: partial or total meniscectomy, removal of loose body or lateral release not being a service associated with any other arthroscopic procedure of the knee region [Anaes.] [Assist.] | Arthroscopic surgery of knee |
| 49561 | Knee, arthroscopic surgery of, involving 1 or more of: partial or total meniscectomy, removal of loose body or lateral release; where the procedure includes associated debridement, osteoplasty or chondroplasty not associated with any other arthroscopic procedure of the knee region [Anaes.] [Assist.] | Arthroscopic surgery of knee |
| 49562 | Knee, arthroscopic surgery of, involving 1 or more of: partial or total meniscectomy, removal of loose body or lateral release; where the procedure includes chondroplasty requiring multiple drilling or carbon fibre [or similar] implant and associated debridement or osteoplasty not associated with any other arthroscopic procedure of the knee region [Anaes.] [Assist.] | Arthroscopic surgery of knee |
| 49563 | knee, arthroscopic surgery of, involving 1 or more of: meniscus repair; osteochondral graft; or chondral graft [excluding autologous chondrocyte implantation or matrix-induced autologous chondrocyte implantation] –not associated with any other arthroscopic procedure of the knee region [Anaes.] [Assist.] | ARTHROSCOPY KNEE+MENISCECTOMY OR REPAIR |
| 49815 | Foot, triple arthrodesis of, with synovectomy if performed [Anaes.] [Assist.] | ARTHRODESIS STABILIZATION OF FOOT [TRIPLE ARTHRODESIS] |
| 50206 | Bone tumour, lesional or marginal excision of, combined with any 1 of: liquid nitrogen freezing, autograft, allograft or cementation [Anaes.] [Assist.] | TUMORS: NODULAR SYNOVITIS |
| 50209 | Bone tumour, lesional or marginal excision of, combined with any 2 or more of: liquid nitrogen freezing, autograft, allograft or cementation [Anaes.] [Assist.] | TUMORS: NODULAR SYNOVITIS |
| 50227 | Malignant bone tumour, enbloc resection of, with massive anatomic specific allograft or autograft, with or without prosthetic replacement [Anaes.] [Assist.] | TUMORS: NODULAR SYNOVITIS |
| 50500 | Radius or ulna, distal end of, with open growth plate, treatment of fracture of, by closed reduction [Anaes.] | CLOSED REDUCTION PLUS PLASTER OF PARIS [POP] |
| 50572 | Humerus, with open growth plate, supracondylar or condylar, treatment of fracture of, by reduction with or without internal fixation by open or percutaneous means, undertaken in the operating theatre of a hospital [Anaes.] [Assist.] | ORIF SUPRA CONDYLAR OF THE HUMERUS |

Specialty Surgery

Sub-classification: **Ovariectomie**

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| 35641 | Endometriosis level 4 or 5, laparoscopic resection of, involving any two of the following procedures, resection of the pelvic side wall including dissection of endometriosis or scar tissue from the ureter, resection of the Pouch of Douglas, resection of an ovarian endometrioma greater than 2 cms in diameter, dissection of bowel from uterus from the level of the endocervical junction or above: where the operating time exceeds 90 minutes [Anaes.] [Assist.] | Wedge resection of ovaries |
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Specialty Surgery

Sub-classification: **Pansement simple**

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| | |
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| 30055 | Wounds, dressing of, under general anaesthesia, with or without removal of sutures, not being a service associated with a Wound dressing [simple] service to which another item in this Group applies [Anaes.] |
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Specialty **Surgery**

Sub-classification: **Thoractic surgery**

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| 30306 | Total hemithyroidectomy [Anaes.] [Assist.] | THYROID LOBECTOMY |
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| 30308 | Bilateral subtotal thyroidectomy [Anaes.] [Assist.] | TOTAL THYROIDECTOMY |
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| 30309 | Thyroidectomy, subtotal for thyrotoxicosis [Anaes.] [Assist.] | OPEN ADRENALECTOMY |
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| 30310 | Thyroid, unilateral subtotal thyroidectomy or equivalent partial thyroidectomy [Anaes.] [Assist.] | Partial Thyroidectomy |
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| 38448 | Mediastinum, cervical exploration of, with or without biopsy [Anaes.] [Assist.] | DRAINAGE OF THE MEDIASTINUM ABSCCESS |
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Specialty **Surgery**

Sub-classification: **tubage gastrique**

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| N1067 | Nasogastric tube insertion | Nasogastric tube insertion |
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Specialty **Surgery - Major**

Sub-classification: **Correction ptosis**

45623 Ptosis of eyelid [unilateral], correction of [Anaes.] [Assist.]

Ptosis repair

Specialty **Surgery - Major**

Sub-classification: **Fistulisation glaucome**

42746 glaucoma, filtering operation for, where conservative therapies have failed, are likely to fail, or are contraindicated [Anaes.] Glaucoma filtering Surgery [Assist.]

Specialty **Surgery - Major**

Sub-classification: **Vitrectomie**

42725 Vitrectomy via pars plana sclerotomy, including one or more of the following:[a] removal of vitreous; [b] division of vitreous Vitrectomy bands; [c] removal of epiretinal membranes; [d] capsulotomy [Anaes.] [Assist.]

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Specialty **Surgery - Minor**

Sub-classification: **Ablation fils**

30055 Wounds, dressing of, under general anaesthesia, with or without removal of sutures, not being a service associated with a Sutures removal service to which another item in this Group applies [Anaes.]

Specialty **Surgery - Minor**

Sub-classification: **Extraction corps etranger**

30061 Superficial foreign body, removal of, [including from cornea or sclera] as an independent procedure [Anaes.]

Foreign body removal - from eye

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| Specialty Telemedicine | Sub-classification: | |
|-------------------------------|---|---|
| T2000 | Telemedicine Consultation [phone or video] after hours/weekend standard < 20 minutes | Telemedicine Consultation [phone or video] after hours/weekend standard < 20 minutes |
| T2010 | Telemedicine Consultation [phone or video] after hours/weekend standard >= 20 minutes | Telemedicine Consultation [phone or video] after hours/weekend standard >= 20 minutes |
| T2015 | Telemedicine Consultation [phone or video] long >= 20 minutes | Telemedicine Consultation [phone or video] long >= 20 minutes |
| T2020 | Telemedicine Consultation [phone or video] standard <20 minutes | Telemedicine Consultation [phone or video] standard <20 minutes |
| T2025 | Telemedicine interpretation of diagnostic tests by specialist [e.g. radiology, MRI] | Remote interpretation of diagnostic tests by specialist [e.g. radiology, MRI] |

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Specialty **Urology**

Sub-classification:

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| 18375 | Botulinum Toxin Type A Purified Neurotoxin Complex [Botox], intravesical injection of, with cystoscopy, for the treatment of urinary incontinence, including all such injections on any one day, if: [a] the urinary incontinence is due to neurogenic detrusor overactivity as demonstrated by urodynamic study of a patient with: [i] multiple sclerosis; or [ii] spinal cord injury; or [iii] spina bifida and who is at least 18 years of age; and [b] the patient has urinary incontinence that is inadequately controlled by anti-cholinergic therapy, as manifested by having experienced at least 14 episodes of urinary incontinence per week before commencement of treatment with botulinum toxin type A; and [c] the patient is willing and able to self-catheterise; and [d] the requirements relating to botulinum toxin type A under the pharmaceutical benefits scheme are complied with; and [e] treatment is not provided on the same occasion as a service described in item 104, 105, 110, 116, 119, 11900 or 11919. For each patient - applicable not more than once except if the patient achieves at least a 50% reduction in urinary incontinence episodes from baseline at any time during the period of 6 to 12 weeks after first treatment. [Anaes.] | INTRAVESICAL INJECTION [BOTOX, SILICON, ETC] |
| 30189 | warts or molluscum contagiosum [one or more], removal of, by any method [other than by chemical means], where undertaken in the operating theatre of a hospital, not being a service associated with a service to which another item in this group applies [H] [Anaes.] | CONDYLOMA EXCISION/ELECTROCOAGULATION |
| 30330 | Lymph glands of groin, radical excision of [Anaes.] [Assist.] | LYMPHADENECTOMY |
| 30631 | Hydrocele, removal of, other than a service associated with a service to which item 30641, 30642 or 30644 applies [Anaes.] | HYDROCELECTOMY |
| 30635 | Varicocele, surgical correction of, other than a service associated with a service to which item 30641, 30642 or 30644 applies—one procedure [Anaes.] [Assist.] | VARICOCELECTOMY |
| 30642 | Orchidectomy, radical, unilateral, with or without insertion of testicular prosthesis, other than a service associated with a service to which item 30631, 30635, 30641, 30643 or 30644 applies [Anaes.] [Assist.] | BILATERAL TESTIS BIOPSY ORCHIDECTOMY [BILATERAL] |
| 30644 | Exploration of spermatic cord, inguinal approach, with or without testicular biopsy and with or without excision of spermatic cord and testis on a person 10 years of age or over [Anaes.] [Assist.] | BILATERAL TESTIS BIOPSY |
| 30654 | Circumcision of the penis [other than a service to which item 30658 applies] | CIRCUMCISION |
| 36500 | Adrenal gland, excision of partial or total [Anaes.] [Assist.] | ADRENALECTOMY |
| 36502 | Pelvic lymphadenectomy, open or laparoscopic, or both, unilateral or bilateral [Anaes.] [Assist.] | LYMPHADENECTOMY PELVIC |
| 36503 | Renal transplant, not being a service to which item 36506 or 36509 applies [Anaes.] [Assist.] | RENAL TRANSPLANT |

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| 36506 | Renal transplant, performed by vascular surgeon and urologist operating together vascular anastomosis, including aftercare [Anaes.] [Assist.] | RENAL TRANSPLANT |
| 36509 | Renal transplant, performed by vascular surgeon and urologist operating together ureterovesical anastomosis, including aftercare [Assist.] | RENAL TRANSPLANT |
| 36516 | Nephrectomy, complete [Anaes.] [Assist.] | NEPHRECTOMY[SIMPLE] |
| 36519 | Nephrectomy, complete, complicated by previous surgery on the same kidney [Anaes.] [Assist.] | NEPHRECTOMY |
| 36522 | Nephrectomy, partial [Anaes.] [Assist.] | NEPHRECTOMY |
| 36525 | Nephrectomy, partial, complicated by previous surgery on the same kidney [Anaes.] [Assist.] | NEPHRECTOMY |
| 36526 | Nephrectomy, radical with en bloc dissection of lymph nodes, with or without adrenalectomy, for a tumour less than 10cms in diameter, where performed if malignancy is clinically suspected but not confirmed by histopathological examination [Anaes.] [Assist.] | RADICAL NEPHROCTOMY |
| 36527 | Nephrectomy, radical with en bloc dissection of lymph nodes, with or without adrenalectomy, for a tumour 10cms or more in diameter, or complicated by previous open or laparoscopic surgery on the same kidney, where performed if malignancy is clinically suspected but not confirmed by histopathological examination [Anaes.] [Assist.] | RADICAL NEPHROCTOMY |
| 36528 | nephrectomy, radical with en bloc dissection of lymph nodes, with or without adrenalectomy, for a tumour less than 10 cms in diameter [Anaes.] [Assist.] | RADICAL NEPHROCTOMY |
| 36529 | Nephrectomy, radical with en bloc dissection of lymph nodes, with or without adrenalectomy, for a tumour 10 cms or more in diameter, or complicated by previous open or laparoscopic surgery on the same kidney [Anaes.] [Assist.] | RADICAL NEPHROCTOMY |
| 36531 | Nephroureterectomy, complete, including associated bladder repair and any associated endoscopic procedure [Anaes.] [Assist.] | NEPHROURETERECTOMY |
| 36532 | Nephro-ureterectomy, for tumour, with or without en bloc dissection of lymph nodes, including associated bladder repair and any associated endoscopic procedures [Anaes.] [Assist.] | NEPHROURETERECTOMY |
| 36533 | Nephro-ureterectomy, for tumour, with or without en bloc dissection of lymph nodes, including associated bladder repair and any associated endoscopic procedures, complicated by previous open or laparoscopic surgery on the same kidney or ureter [Anaes.] [Assist.] | NEPHROURETERECTOMY |
| 36537 | Kidney or perinephric area, exploration of, with or without drainage of, by open exposure, not being a service to which another item in this Sub-group applies [Anaes.] [Assist.] | OPEN PERINEPHRIC EXPLORATION |
| 36540 | Nephrolithotomy or pyelolithotomy, or both, through the same skin incision, for 1 or 2 stones [Anaes.] [Assist.] | NEPHROLITHOTOMY |

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| RMP Code | Detailed Nomenclature | Local Nomenclature |
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| | | Pyelolithotomy |
| 36543 | Nephrolithotomy or pyelolithotomy, or both, extended, for staghorn stone or 3 or more stones, including 1 or more of the following: nephrostomy, pyelostomy, pedicle control with or without freezing, calyorrhaphy or pyeloplasty [Anaes.] [Assist.] | NEPHROLITHOTOMY/PYELOLITHOTOMY |
| 36546 | Extracorporeal shock wave lithotripsy [ESWL] to urinary tract and posttreatment care for 3 days, including pretreatment consultations, unilateral [Anaes.] | URETEROSCOPIC LASER LITHOTRIPSY |
| 36549 | Ureterolithotomy [Anaes.] [Assist.] | URETERO-PYELOLITHOTOMY OPEN |
| 36552 | Nephrostomy or pyelostomy, open, as an independent procedure [Anaes.] [Assist.] | NEPHROSTOMY [OPEN] |
| 36558 | Renal cyst or cysts, excision or unroofing of [Anaes.] [Assist.] | KIDNEY CYST RESECTION |
| 36561 | Renal biopsy [closed] [Anaes.] | RENAL BIOPSY PERCUTANEOUS |
| 36564 | Pyeloplasty, [plastic reconstruction of the pelvi-ureteric junction] by open exposure, laparoscopy or laparoscopic assisted techniques [Anaes.] [Assist.] | PYELOPLASTY |
| 36567 | Pyeloplasty in a kidney that is congenitally abnormal in addition to the presence of PUJ obstruction, or in a solitary kidney, by open exposure [Anaes.] [Assist.] | PYELOPLASTY |
| 36570 | Pyeloplasty, complicated by previous surgery on the same kidney, by open exposure [Anaes.] [Assist.] | PYELOPLASTY |
| 36573 | Divided ureter, repair of [Anaes.] [Assist.] | URETEROPLASTY |
| 36576 | Kidney, exposure and exploration of, including repair or nephrectomy, for trauma, not being a service associated with any other procedure performed on the kidney, renal pelvis or renal pedicle [Anaes.] [Assist.] | OPEN EXPLORATION RENAL TRAUMA |
| 36585 | Ureter, transplantation of, into skin [Anaes.] [Assist.] | URETEROSTOMY |
| 36588 | Ureter, reimplantation into bladder [Anaes.] [Assist.] | URETERONEOCYSTOSTOMY URETEROPLASTY |
| 36591 | Ureter, reimplantation into bladder with psoas hitch or Boari flap or both [Anaes.] [Assist.] | URETERONEOCYSTOSTOMY PSOAS HITCH/BOARI FLAP URETEROPLASTY |
| 36594 | Ureter, transplantation of, into intestine [Anaes.] [Assist.] | URETEROENTEROSTOMY |

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| | | URETEROPLASTY |
| 36597 | Ureter, transplantation of, into another ureter [Anaes.] [Assist.] | URETEROPLASTY URETEROURETEROSTOMY |
| 36600 | Ureter, transplantation of, into isolated intestinal segment, unilateral [Anaes.] [Assist.] | URETEROPLASTY ILEAL CONDUIT |
| 36603 | Ureters, transplantation of, into isolated intestinal segment, bilateral [Anaes.] [Assist.] | URETEROPLASTY ILEAL CONDUIT |
| 36604 | Ureteric stent, passage of through percutaneous nephrostomy tube, using interventional imaging techniques [Anaes.] | URETERIC STENT [BILATERAL] |
| 36606 | Intestinal urinary reservoir, continent, formation of, including formation of nonreturn valves and implantation of ureters [1 or both] into reservoir [Anaes.] [Assist.] | CONTINENT INTESTINAL URINARY RESERVOIR |
| 36607 | Ureteric stent insertion of, with balloon dilatation of: [a] the pelvicalyceal system; or [b] ureter; or [c] the pelvicalyceal system and ureter; through a nephrostomy tube using interventional imaging techniques [Anaes.] | URETERIC STENT ANTEGRADE |
| 36609 | Intestinal urinary conduit or ureterostomy, revision of [Anaes.] [Assist.] | ILEAL CONDUIT |
| 36612 | Ureter, exploration of, with or without drainage of, as an independent procedure [Anaes.] [Assist.] | URETER EXPLORATION |
| 36615 | Ureterolysis, with or without repositioning of the ureter, for obstruction of the ureter, evident either radiologically or by proximal ureteric dilatation at operation, secondary to retroperitoneal fibrosis, or similar condition [Anaes.] [Assist.] | Ureterolysis |
| 36618 | Reduction ureteroplasty [Anaes.] [Assist.] | PYEOSCOPY RETROGRADE EXPLORATION |
| 36621 | Closure of cutaneous ureterostomy [Anaes.] [Assist.] | URETEROSTOMY CLOSURE |
| 36624 | Nephrostomy, percutaneous, using interventional imaging techniques [Anaes.] [Assist.] | NEPHROSTOMY PERCUTANEOUS |
| 36630 | Nephroscopy, being a service to which item 36627 applies, where, after a substantial portion of the procedure has been performed, it is necessary to discontinue the operation due to bleeding [Anaes.] [Assist.] | NEPHROLITHOTOMY PERCUTANEOUS |
| 36633 | Nephroscopy, percutaneous, with incision of any 1 or more of; renal pelvis, calyx or calyces or ureter and including antegrade insertion of ureteric stent, not being a service associated with a service to which item 36627, 36639, 36642, 36645 or 36648 applies [Anaes.] [Assist.] | NEPHROLITHOTOMY PERCUTANEOUS |
| 36636 | Nephroscopy, percutaneous, with incision of any 1 or more of; renal pelvis, calyx or calyces or ureter and including antegrade insertion of ureteric stent, being a service associated with a service to which item 36627, 36639, 36642, 36645 or 36648 applies [Anaes.] [Assist.] | NEPHROLITHOTOMY PERCUTANEOUS |

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| 36639 | Nephroscopy, percutaneous, with destruction and extraction of 1 or 2 stones using ultrasound or electrohydraulic shock waves or lasers [not being a service to which item 36645 or 36648 applies] [Anaes.] | NEPHROLITHOTOMY PERCUTANEOUS |
| 36645 | Nephroscopy, percutaneous, with removal or destruction of a stone greater than 3cm in any dimension, or for 3 or more stones [Anaes.] [Assist.] | NEPHROLITHOTOMY PERCUTANEOUS |
| 36649 | Nephrostomy drainage tube, exchange of - but not including imaging [Anaes.] [Assist.] | NEPHROSTOMY [OPEN] |
| 36650 | Nephrostomy tube, removal of, if the ureter has been stented with a double j ureteric stent and that stent is left in place, using interventional imaging techniques [Anaes.] | NEPHROSTOMY PERCUTANEOUS |
| 36652 | Pyeloscopy, retrograde, of one collecting system, with or without any one or more of, cystoscopy, ureteric meatotomy, ureteric dilatation, not being a service associated with a service to which item 36803, 36812 or 36824 applies [Anaes.] [Assist.] | PYELOSCOPY RETROGRADE EXPLORATION |
| 36656 | Pyeloscopy, retrograde, of one collecting system, being a service to which item 36652 applies, plus extraction of 2 or more stones in the renal pelvis or calyces or destruction of stone with ultrasound, electrohydraulic or kinetic lithotripsy, or laser in the renal pelvis or calyces, with or without extraction of fragments, not being a service associated with a service to which item 36654 applies to a procedure performed in the same collecting system [Anaes.] [Assist.] | PYELOSCOPY LITHOTRIPSY |
| 36800 | Bladder, catheterisation of, where no other procedure is performed [Anaes.] | BLADDER CATHETERIZATION |
| 36803 | Ureteroscopy, of one ureter, with or without any one or more of; cystoscopy, ureteric meatotomy or ureteric dilatation, not being a service associated with a service to which item 36652, 36654, 36656, 36806, 36809, 36812, 36824, 36848 or 36857 applies [Anaes.] [Assist.] | URETEROSCOPY |
| 36809 | Ureteroscopy, of one ureter, with or without any one or more of, cystoscopy, ureteric meatotomy or ureteric dilatation, plus destruction of stone in the ureter with ultrasound, electrohydraulic or kinetic lithotripsy, or laser, with or without extraction of fragments, not being a service associated with a service to which item 36803 or 36812 applies, or a service associated with a service to which item 36806, 36824, 36848 or 36857 applies to a procedure performed on the same ureter [Anaes.] [Assist.] | URETEROSCOPIC LASER LITHOTRIPSY |
| 36812 | Cystoscopy with urethroscopy, with or without urethral dilatation, not being a service associated with any other urological endoscopic procedure on the lower urinary tract except a service to which item 37327 applies [Anaes.] | CYSTOSCOPY UNDER GENERAL ANEASTHESIA |
| 36818 | Cystoscopy, with ureteric catheterisation including fluoroscopic imaging of the upper urinary tract, unilateral or bilateral, not being a service associated with a service to which item 36824 or 36830 applies [Anaes.] [Assist.] | RETROGRADE PYELOGRAPHY URETERIC STENT [BILATERAL] |
| 36821 | Cystoscopy with 1 or more of; ureteric dilatation, insertion of ureteric stent, or brush biopsy of ureter or of renal pelvis, unilateral, not being a service associated with a service to which item 36824 or 36830 applies [Anaes.] [Assist.] | URETERIC STENT PLACEMENT |

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| 36824 | Cystoscopy with ureteric catheterisation, unilateral or bilateral, not being a service associated with a service to which item 36818 or 36821 applies [Anaes.] | URETERIC CATHETERIZATION |
| 36825 | Cystoscopy, with endoscopic incision of pelviureteric junction or ureteric stricture, including removal or replacement of ureteric stent, not being a service associated with a service to which item 36818, 36821, 36824, 36830 or 36833 applies [Anaes.] [Assist.] | PELVIURETERIC JUNCTION ENDOSCOPIC INCISION URETERIC STENT REMOVAL |
| 36827 | Cystoscopy, with controlled hydrodilatation of the bladder [Anaes.] | CYSTOSCOPY WITH HYDRODILATATION |
| 36830 | Cystoscopy, with ureteric meatotomy [Anaes.] | URETERIC MEATOTOMY |
| 36833 | Cystoscopy with removal of ureteric stent or other foreign body [Anaes.] [Assist.] | URETERIC STENT REMOVAL |
| 36836 | Cystoscopy, with biopsy of bladder, not being a service associated with a service to which item 36812, 36830, 36840, 36845, 36848, 36854, 37203, 37206 or 37215 applies [Anaes.] | BLADDER BIOPSY |
| 36840 | Cystoscopy, with resection, diathermy or visual laser destruction of bladder tumour or other lesion of the bladder, not being a service to which item 36845 applies [Anaes.] | TRANS-URETHRAL RESECTION OF BLADDER TUMOR [ONE] |
| 36842 | Cystoscopy, with lavage of blood clots from bladder including any associated diathermy of prostate or bladder and not being a service associated with a service to which item 36812, 36827 to 36863, 37203 or 37206 apply [Anaes.] [Assist.] | BLADDER CLOTS ENDOSCOPIC REMOVAL CYSTOSCOPY FOR CLOTS REMOVAL |
| 36845 | Cystoscopy, with diathermy, resection or visual laser destruction of multiple tumours in more than 2 quadrants of the bladder or solitary tumour greater than 2cm in diameter [Anaes.] | TRANS-URETHRAL RESECTION OF LARGE BLADDER TUMOR |
| 36848 | Cystoscopy with resection of ureterocele [Anaes.] | URETEROCELE INCISION |
| 36854 | Cystoscopy with endoscopic incision or resection of external sphincter, bladder neck or both [Anaes.] | BLADDER NECK INCISION |
| 36857 | Endoscopic manipulation or extraction of ureteric calculus [Anaes.] | URETEROSCOPIC LITHOTRIPSY |
| 36860 | Endoscopic examination of intestinal conduit or reservoir [Anaes.] | ENDOSCOPIC EXAMINATION OF ILEAL CONDUIT |
| 36863 | Litholapaxy, with or without cystoscopy [Anaes.] [Assist.] | CYSTOLITHOLAPAXY |
| 37000 | Bladder, partial excision of [Anaes.] [Assist.] | CYSTECTOMY PARTIAL |

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| 37004 | Bladder, repair of rupture [Anaes.] [Assist.] | BLADDER REPAIR |
| 37008 | Cystostomy or cystotomy, suprapubic, not being a service to which item 37011 applies and not being a service associated with other open bladder procedure [Anaes.] | CYSTOSTOMY [OPEN] |
| 37011 | Suprapubic stab cystotomy, not being a service associated with a service to which items 37200 to 37221 apply [Anaes.] | CYSTOSTOMY [PUNCTURE] SUPRAPUBIC CATHETERIZATION |
| 37014 | Bladder, total excision of [Anaes.] [Assist.] | CYSTECTOMY RADICAL |
| 37020 | Bladder diverticulum, excision or obliteration of [Anaes.] [Assist.] | BLADDER DIVERTICULUM RESECTION |
| 37023 | Vesical fistula, cutaneous, operation for [Anaes.] | VESOURETHRAL FISTULA REPAIR |
| 37026 | Cutaneous vesicostomy, establishment of [Anaes.] [Assist.] | VESICOSTOMY |
| 37029 | Vesicovaginal fistula, closure of by abdominal approach [Anaes.] [Assist.] | VESICO-VAGINAL FISTULA ABDOMINAL |
| 37038 | Vesicointestinal fistula, closure of, excluding bowel resection [Anaes.] [Assist.] | VESICOINTESTINAL FISTULA REPAIR |
| 37040 | Bladder stress incontinence, sling procedure for, using a non-adjustable synthetic male sling system, with or without mesh, other than a service associated with a service to which item 30405, 35599 or 37042 applies [Anaes.] [Assist.] | VESICO-URETHROPEXY FOR STRESS INCONTINENCE |
| 37041 | Bladder aspiration, by needle | BLADDER NEEDLE ASPIRATION |
| 37042 | Bladder stress incontinence, sling procedure for, using autologous fascial sling, with or without mesh, including harvesting of sling, not being a service associated with a service to which item 30405 or 35599 applies [Anaes.] [Assist.] | VESICO-URETHROPEXY FOR STRESS INCONTINENCE |
| 37043 | Bladder stress incontinence, Stamey or similar type needle colposuspension, with or without mesh, not being a service associated with a service to which item 30405 or 35599 applies [Anaes.] [Assist.] | VESICO-URETHROPEXY FOR STRESS INCONTINENCE |
| 37044 | Bladder stress incontinence, suprapubic procedure for, eg Burch colposuspension, with or without mesh, not being a service associated with a service to which item 30405 or 35599 applies [Anaes.] [Assist.] | VESICO-URETHROPEXY FOR STRESS INCONTINENCE |
| 37045 | Continent catheterisation bladder stomas [eg. mitrofanoff], formation of [Anaes.] [Assist.] | CONTINENT BLADDER STOMA |
| 37047 | Bladder enlargement using intestine [Anaes.] [Assist.] | BLADDER NECK RECONSTRUCTION CYSTOPLASTY AUGMENTATION |

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| 37050 | Bladder exstrophy closure, not involving sphincter reconstruction [Anaes.] [Assist.] | BLADDER EXTROPHY CLOSURE |
| 37053 | Bladder transection and re-anastomosis to trigone [Anaes.] [Assist.] | BLADDER NECK RECONSTRUCTION |
| 37200 | Prostatectomy, open [Anaes.] [Assist.] | PROSTATECTOMY FOR BENIGN PROSTATE HYPERTROPHY OPEN |
| 37203 | Prostatectomy [endoscopic, using diathermy or cold punch], with or without cystoscopy and with or without urethroscopy, and including services to which item 36854, 37201, 37202, 37207, 37208, 37245, 37303, 37321 or 37324 applies [Anaes.] | PROSTATECTOMY ENDOCOPIC RESECTION TRANS-URETHRAL RESECTION OF THE PROSTATE |
| 37209 | Prostate, and/or seminal vesicle/ampulla of vas, unilateral or bilateral, total excision of, not being a service associated with a service to which item number 37210 or 37211 applies [Anaes.] [Assist.] | SEMINAL VASECTOMY[BILATERAL OR BILATERAL] |
| 37210 | Prostatectomy, radical, involving total excision of the prostate, sparing of nerves around the bladder and bladder neck reconstruction, not being a service associated with a service to which item 35551, 36502 or 37375 applies [Anaes.] [Assist.] | PROSTATECTOMY [RADICAL] |
| 37211 | Prostatectomy, radical, involving total excision of the prostate, sparing of nerves around the bladder and bladder neck reconstruction, with pelvic lymphadenectomy, not being a service associated with a service to which item 35551, 36502 or 37375 applies [Anaes.] [Assist.] | PROSTATECTOMY [RADICAL] |
| 37212 | Prostate, open perineal biopsy or open drainage of abscess [Anaes.] [Assist.] | DRAINAGE OF PROSTATIC ABSCESS [PERINEAL] |
| 37215 | prostate, biopsy of, endoscopic, with or without cystoscopy [Anaes.] [Assist.] | PROSTATE BIOPSY [ANY APPROACH] |
| 37219 | Prostate, needle biopsy of, using prostatic ultrasound techniques and obtaining 1 or more prostatic specimens, being a service associated with a service to which item 55600 or 55603 applies [Anaes.] [Assist.] | PROSTATE BIOPSY TRUS |
| 37221 | Prostatic abscess, endoscopic drainage of [Anaes.] [Assist.] | PROSTATIC ABCESS DRAINAGE ENDOCOPIC |
| 37223 | Prostatic coil, insertion of, under ultrasound control [Anaes.] | PROSTATIC ABCESS DRAINAGE ENDOCOPIC |
| 37245 | Prostate, endoscopic enucleation of, using high powered holmium:yag laser and an end-firing, non-contact fibre, with or without tissue morcellation, cystoscopy or urethroscopy, for the treatment of benign prostatic hyperplasia, and other than a service associated with a service to which item 36854, 37201, 37202, 37203, 37206, 37207, 37208, 37303, 37321, or 37324 applies. [Anaes.] | PLASMA VAPORIZATION OF THE PROSTATE PROSTATE ENDOCOPIC ENUCLEATION |

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| 37300 | Urethral sounds, passage of, as an independent procedure [Anaes.] | URETHRAL DILATATION SOUNDS |
| 37303 | Urethral stricture, dilatation of [Anaes.] | URETHRAL DILATATION |
| 37306 | Urethra, repair of rupture of distal section [Anaes.] [Assist.] | URETHRORRAPHY: ANTERIOR |
| 37309 | Urethra, repair of rupture of prostatic or membranous segment [Anaes.] [Assist.] | URETHRORRAPHY: ANTERIOR |
| 37315 | Urethroscopy, as an independent procedure [Anaes.] | CYSTOSCOPY |
| 37318 | Urethroscopy, with any 1 or more of - biopsy, diathermy, visual laser destruction of stone or removal of foreign body or stone [Anaes.] [Assist.] | URETHROSCOPY |
| 37321 | Urethral meatotomy, external [Anaes.] | MEATOPLASTY URETHRAL MEATOTOMY |
| 37324 | Urethrotomy or urethrostomy, internal or external [Anaes.] | URETHROTOMY/URETHROSTOMY |
| 37327 | Urethrotomy, optical, for urethral stricture [Anaes.] [Assist.] | INTERNAL URETHROTOMY |
| 37330 | Urethrectomy, partial or complete, for removal of tumour [Anaes.] [Assist.] | URETHRECTOMY |
| 37333 | Urethrovaginal fistula, closure of [Anaes.] [Assist.] | VESICO-VAGINAL FISTULA |
| 37336 | Urethrorectal fistula, closure of [Anaes.] [Assist.] | URETHRORECTAL FISTULA |
| 37342 | Urethroplasty single stage operation [Anaes.] [Assist.] | URETHROPLASTY |
| 37343 | Urethroplasty, single stage operation, transpubic approach via separate incisions above and below the symphysis pubis, excluding laparotomy, symphysectomy and suprapubic cystotomy, with or without re-routing of the urethra around the crura [Anaes.] [Assist.] | URETHROPLASTY |
| 37345 | Urethroplasty 2 stage operation first stage [Anaes.] [Assist.] | URETHROPLASTY |
| 37348 | Urethroplasty 2 stage operation second stage [Anaes.] [Assist.] | URETHROPLASTY |
| 37351 | Urethroplasty, not being a service to which another item in this Group applies [Anaes.] [Assist.] | URETHROPLASTY |

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| 37354 | Hypospadias, meatotomy and hemircumcision [Anaes.] [Assist.] | HYPOSPADIAS REPAIR |
| 37369 | Urethra, excision of prolapse of [Anaes.] | URETHRA PROLASPE EXCISION |
| 37372 | Urethral diverticulum, excision of [Anaes.] [Assist.] | URETHRAL DIVERTICULECTOMY |
| 37375 | Urethral sphincter, reconstruction by bladder tubularisation technique or similar procedure [Anaes.] [Assist.] | URETHRA SPHINCTER RECONSTRUCTION |
| 37381 | Artificial urinary sphincter, insertion of cuff, perineal approach [Anaes.] [Assist.] | ARTIFICIAL URINARY SPHINCTER |
| 37384 | Artificial urinary sphincter, insertion of cuff, abdominal approach [Anaes.] [Assist.] | ARTIFICIAL URINARY SPHINCTER |
| 37387 | Artificial urinary sphincter, insertion of pressure regulating balloon and pump [Anaes.] [Assist.] | ARTIFICIAL URINARY SPHINCTER |
| 37390 | Artificial urinary sphincter, revision or removal of, with or without replacement [Anaes.] [Assist.] | ARTIFICIAL URINARY SPHINCTER |
| 37393 | Priapism, decompression by glanular stab caverno-spongiosum shunt or penile aspiration with or without lavage [Anaes.] | PRIAPISM OPERATION |
| 37396 | Priapism, shunt operation for, not being a service to which item 37393 applies [Anaes.] [Assist.] | PRIAPISM OPERATION |
| 37402 | Penis, partial amputation of [Anaes.] [Assist.] | AMPUTATION OF PENIS [PARTIAL] |
| 37405 | Penis, complete or radical amputation of [Anaes.] [Assist.] | PENECTOMY TOTAL |
| 37408 | Penis, repair of laceration of cavernous tissue, or fracture involving cavernous tissue [Anaes.] [Assist.] | PENILE TRAUMA REPAIR |
| 37411 | Penis, repair of avulsion [Anaes.] [Assist.] | PENILE TRAUMA REPAIR |
| 37415 | Penis, injection of, for the investigation and treatment of impotence - 2 services only in a period of 36 consecutive months | PENILE INJECTION |
| 37417 | Penis, correction of chordee, with or without excision of fibrous plaque or plaques and with or without grafting [Anaes.] [Assist.] | LAPEYRONIE DISEASE REPAIR |
| 37418 | Penis, correction of chordee, with or without excision of fibrous plaque or plaques and with or without grafting, involving mobilization of the urethra [Anaes.] [Assist.] | LAPEYRONIE DISEASE REPAIR |
| 37420 | Penis, surgery to inhibit rapid penile drainage causing impotence, by ligation of veins deep to Buck`s fascia including 1 or more deep cavernosal veins, with or without pharmacological erection test [Anaes.] [Assist.] | PENILE VENOUS LIGATION |

Rwanda Medical Procedure Code Database

RMP Code Detailed Nomenclature

Mapped to local nomenclature

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| 37426 | Penis, artificial erection device, insertion of, into 1 or both corpora [Anaes.] [Assist.] | PENILE PROTHESIS |
| 37432 | Penis, artificial erection device, complete or partial revision or removal of components, with or without replacement [Anaes.] [Assist.] | PENILE PUMP FOR ERECTILE DYSFUNCTION |
| 37435 | Penis, frenuloplasty as an independent procedure [Anaes.] | PENILE FRENULOPLASTY |
| 37438 | Scrotum, partial excision of [Anaes.] [Assist.] | SCROTUM EXCISION |
| 37444 | Ureterolithotomy complicated by previous surgery at the same site of the same ureter [Anaes.] [Assist.] | URETEROLITHOTOMY OPEN |
| 37601 | Spermatocele or epididymal cyst, excision of, 1 or more of, on 1 side [Anaes.] | EPIDIDYMAL CYST EXCISION |
| 37604 | Exploration of scrotal contents, with or without fixation and with or without biopsy, unilateral, not being a service associated with sperm harvesting for ivf [Anaes.] | DETORSION FOR TORSION OF THE TESTIS + CONTROLATERAL TESTIS FIXATION |
| 37605 | Transcutaneous sperm retrieval, unilateral, from either the testis or the epididymis, for the purposes of intracytoplasmic sperm injection, for male factor infertility, excluding a service to which item 13218 applies. [Anaes.] | SPERM RETRIEVAL TRANSCUTANEOUS |
| 37606 | Open surgical sperm retrieval, unilateral, including the exploration of scrotal contents, with our without biopsy, for the purposes of intracytoplasmic sperm injection, for male factor infertility, performed in a hospital, excluding a service to which item 13218 or 37604 applies. [Anaes.] | SPERM RETRIEVAL OPEN |
| 37610 | Retroperitoneal lymph node dissection, unilateral, not being a service associated with a service to which item 36528 applies, following previous similar retroperitoneal dissection, retroperitoneal irradiation or chemotherapy [Anaes.] [Assist.] | LYMPHADENECTOMY RETROPERITONEAL |
| 37613 | Epididymectomy [Anaes.] | EPIDIDYMECTOMY UNILATERAL |
| 37619 | Vasovasostomy or vasoepididymostomy, unilateral, not being a service associated with sperm harvesting for IVF [Anaes.] [Assist.] | VASO-VASOSTOMY: UNILATERAL |
| 37623 | Vasotomy or vasectomy, unilateral or bilateral note: Strict legal requirements apply in relation to sterilisation procedures on minors. Medicare benefits are not payable for services not rendered in accordance with relevant Commonwealth and State and Territory law. Observe the explanatory note before submitting a claim. [Anaes.] | VASECTOMY VASECTOMY BILATERAL |
| 37800 | Patent urachus, excision of, on a person 10 years of age or over. [Anaes.] [Assist.] | URACHUS EXCISION |
| 37801 | Patent urachus, excision of, when performed on a person under 10 years of age [Anaes.] [Assist.] | URACHUS EXCISION |
| 37804 | Undescended testis, orchidopexy for, not being a service to which item 37807 applies, on a person under 10 years of age | BILATERAL ORCHIDOPEXY |

Rwanda Medical Procedure Code Database

RMP Code Detailed Nomenclature

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| | [Anaes.] [Assist.] | |
|-------|---|---|
| | | ORCHIDOPEXY FOR UNDESCENDED TESTIS INGUINAL |
| 37806 | Undescended testis in inguinal canal close to deep inguinal ring or within abdominal cavity, orchidopexy for, on a person 10 years of age or over [Anaes.] [Assist.] | ORCHIDOPEXY FOR UNDESCENDED TESTIS INGUINAL |
| 37807 | Undescended testis in inguinal canal close to deep inguinal ring or within abdominal cavity, orchidopexy for, on a person under 10 years of age [Anaes.] [Assist.] | ORCHIDOPEXY FOR UNDESCENDED TESTIS INGUINAL |
| 37809 | Undescended testis, revision orchidopexy for, on a person 10 years of age or over. [Anaes.] [Assist.] | ORCHIDOPEXY FOR UNDESCENDED TESTIS INGUINAL |
| 37810 | Undescended testis, revision orchidopexy for, on a person under 10 years of age [Anaes.] [Assist.] | ORCHIDOPEXY FOR UNDESCENDED TESTIS INGUINAL |
| 37812 | Impalpable testis, exploration of groin for, not being a service associated with a service to which items 37803, 37806 and 37809 applies, on a person 10 years of age or over. [Anaes.] [Assist.] | ORCHIDOPEXY FOR UNDESCENDED TESTIS |
| 37813 | Impalpable testis, exploration of groin for, not being a service associated with a service to which items 37804, 37807 and 37810 applies, on a person under 10 years of age [Anaes.] [Assist.] | ORCHIDOPEXY FOR UNDESCENDED TESTIS |
| 37815 | Hypospadias, examination under anaesthesia with erection test on a person 10 years of age or over. [Anaes.] | HYPOSPADIAS REPAIR |
| 37816 | Hypospadias, examination under anaesthesia with erection test, on a person under 10 years of age [Anaes.] | HYPOSPADIAS REPAIR |
| 37818 | Hypospadias, glanuloplasty incorporating meatal advancement, on a person 10 years of age or over [Anaes.] [Assist.] | HYPOSPADIAS REPAIR |
| 37819 | Hypospadias, glanuloplasty incorporating meatal advancement, on a person under 10 years of age [Anaes.] [Assist.] | HYPOSPADIAS REPAIR |
| 37821 | Hypospadias, distal, 1 stage repair, on a person 10 years of age or over. [Anaes.] [Assist.] | HYPOSPADIAS REPAIR |
| 37822 | Hypospadias, distal, 1 stage repair, on a person under 10 years of age [Anaes.] [Assist.] | HYPOSPADIAS REPAIR |
| 37824 | Hypospadias, proximal, 1 stage repair on a person 10 years of age or over. [Anaes.] [Assist.] | HYPOSPADIAS REPAIR |
| 37825 | Hypospadias, proximal, 1 stage repair, on a person under 10 years of age [Anaes.] [Assist.] | HYPOSPADIAS REPAIR |
| 37827 | Hypospadias, staged repair, first stage, on a person 10 years of age or over. [Anaes.] [Assist.] | HYPOSPADIAS REPAIR |
| 37828 | Hypospadias, staged repair, first stage, on a person under 10 years of age [Anaes.] [Assist.] | HYPOSPADIAS REPAIR |

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RMP Code Detailed Nomenclature

Mapped to local nomenclature

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| 37830 | Hypospadias, staged repair, second stage, on a person 10 years of age or over [Anaes.] [Assist.] | HYPOSPADIAS REPAIR |
| 37831 | Hypospadias, staged repair, second stage, on a person under 10 years of age. [Anaes.] [Assist.] | HYPOSPADIAS REPAIR |
| 37833 | Hypospadias, repair of post-operative urethral fistula, on a person 10 years of age or over. [Anaes.] [Assist.] | HYPOSPADIAS REPAIR URETHROCUTANEOUS FISTULA REPAIR |
| 37834 | Hypospadias, repair of post-operative urethral fistula, on a person under 10 years of age [Anaes.] [Assist.] | HYPOSPADIAS REPAIR VESICO-VAGINAL FISTULA [COMPLICATED] |
| 37836 | Epispadias, staged repair, first stage [Anaes.] [Assist.] | EPISPADIAS REPAIR |
| 37839 | Epispadias, staged repair, second stage [Anaes.] [Assist.] | EPISPADIAS REPAIR |
| 37842 | Exstrophy of bladder or epispadias, secondary repair with bladder neck tightening, with or without ureteric reimplantation [Anaes.] [Assist.] | BLADDER EXTROPHY NECK RECONSTRUCTION |
| 37845 | Ambiguous genitalia with urogenital sinus, reduction clitoroplasty, with or without endoscopy [Anaes.] [Assist.] | CLITOROPLASTY |
| 37848 | Ambiguous genitalia with urogenital sinus, reduction clitoroplasty, with endoscopy and vaginoplasty [Anaes.] [Assist.] | CLITOROPLASTY |
| 37854 | Urethral valve, destruction of, including cystoscopy and urethroscopy [Anaes.] [Assist.] | POSTERIOR URETHRAL VALVE RESECTION POSTERIOR URETHRAL VALVES FULGURATION |
| 43981 | Nephroblastoma, neuroblastoma or other malignant tumour, laparotomy [exploratory], including associated biopsies, where no other intra-abdominal procedure is performed [Anaes.] [Assist.] | NEPHRECTOMY |
| 43984 | Nephroblastoma, radical nephrectomy for [Anaes.] [Assist.] | NEPHRECTOMY |

Specialty Urology

Sub-classification: GU Physiological Studies

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| 11900 | Urine flow study including peak urine flow measurement, not being a service associated with a service to which item 11919 applies | URODYNAMIC STUDY |
| 11903 | Cystometrography, not being a service associated with a service to which any of items 11012 to 11027, 11912, 11915, 11919, 11921 and 36800 or an item in group I3 of the Diagnostic Imaging Services Table applies | URODYNAMIC STUDY |

Rwanda Medical Procedure Code Database

RMP Code Detailed Nomenclature

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| 11906 | Urethral pressure profilometry, not being a service associated with a service to which any of items 11012 to 11027, 11909, URODYNAMIC STUDY 11919, 11921 and 36800 or an item in group I3 of the Diagnostic Imaging Services Table applies | |
| 11912 | Cystometrography with simultaneous measurement of rectal pressure, not being a service associated with a service to which any of items 11012 to 11027, 11903, 11915, 11919, 11921 and 36800 or an item in group I3 of the Diagnostic Imaging Services Table applies [Anaes.] | URODYNAMIC STUDY |
| 11915 | Cystometrography with simultaneous measurement of urethral sphincter electromyography, not being a service associated with a service to which any of items 11012 to 11027, 11903, 11909, 11912, 11919, 11921 and 36800 or an item in group I3 of the Diagnostic Imaging Services Table applies [Anaes.] | URODYNAMIC STUDY |
| 11917 | Cystometrography in conjunction with ultrasound of 1 or more components of the urinary tract, with measurement of any 1 or more of urine flow rate, urethral pressure profile, rectal pressure, urethral sphincter electromyography; including all imaging associated with cystometrography, not being a service associated with a service to which any of items 11012 to 11027, 11900 to 11915, 11919, 11921 and 36800 applies [Anaes.] | URODYNAMIC STUDY |
| 11919 | Cystometrography in conjunction with contrast micturating cystourethrography, with measurement of any 1 or more of urine flow rate, urethral pressure profile, rectal pressure, urethral sphincter electromyography; including all imaging associated with cystometrography, not being a service associated with a service to which any of items 11012 to 11027, 11900 to 11917, 11921 and 36800 applies [Anaes.] | URODYNAMIC STUDY |
| 11921 | Bladder washout test for localisation of urinary infection — not including bacterial counts for organisms in specimens | BLADDER WASHOUT |