

**TO BE COMPLETED BY THE DENTIST**

COD	SERVICE
<b>PREVENTION</b>	
A231	Dental records and preparation of study models
A232	Endoral x-ray for each dental arch
A233	Endoral radiography (for 2 teeth, max. 3 teeth per arch)
<b>RADIOLOGY</b>	
A234	Dentalscan 1 dental arch
A235	Dentalscan 2 dental arch
A236	Salivary gland examination
A237	Electromyography test
A238	Kinesiographyc test
A239	Dental orthopantomography and ortopanoramic
A240	Contrast swashbuckling with contrast medium
A241	Teleradiography
<b>CONSERVATIVE</b>	
A242	First class filling
A243	Second class filling
A244	Third class filling
A245	Fourth class filling
A246	Fifth class filling
<b>PARADONTOLOGY</b>	
A247	Radicular amputation (excluded access flap)
A248	Gingival surgery (incl. every type of flap and suture)
A249	Mucogingival surgery or fornix lowering (including every type of flap and suture)
A250	Bone surgery, complete treatment for each quadrant (incl. every type of flap and suture)
A251	Gingivectomy (for each quadrant as single service)
A252	Autogenous graft (multiple sites including access flap)
A253	Graft of biocompatible material
A254	Dental ligatures extra coronal (4 teeth)
A255	Dental ligatures intra coronal (4 teeth)
A256	Flap (free or pedunculated) for mucogingival defects's correction
A279	Byte-plane

COD	SERVICE
<b>ENDODONTICS</b>	
A257	1-canal endodontic therapy (including endoral x-ray)
A258	2-canal endodontic therapy (including endoral x-ray)
A259	3-canal endodontic therapy (including endoral x-ray)
A260	4-canal endodontic therapy (including endoral x-ray)
A261	Reconstruction with archor or element pin
<b>SURGERY</b>	
A262	Apicoectomy (including root canal treatment)
A263	Disinclusion of retained teeth
A264	Extraction under sedation for tooth (without anaesthetics.)
A265	Extraction of tooth or root
A266	Extraction of tooth or root with complete bone inclusion
A267	Surgical dressing (max. 3 sessions)
<b>PROSTHETICS</b>	
A268	Skeleton apparatus (LNP or LP structure, incl. elements for dental arch)
A269	Final complete removable resin or ceramic denture for dental arch
A270	Final partial removable denture (incl. hooks and elements)
A271	Relining of removable denture
A272	Removable denture repair (every type)
A273	Removable denture repair with the addition of an element (every type)
A274	Single precision/semiprecision attachment (LNP/LP/metal/prefab. structure)
<b>IMPLANTOLOGY</b>	
A275	Osteointegrated implant for element (as single service)
A276	Maxillary sinus lift surgery (for each hemi-arch, complete treatment and not repeatable)
A277	Minimally implantology including precision attachment for each element (as single service)
<b>GENERIC</b>	
A278	Visit

**Dental numbering system**

RIGHT UPPER ARCH I QUADRANT							
18	17	16	15	14	13	12	11
48	47	46	45	44	43	42	41
RIGHT LOWER ARCH IV QUADRANT							

LEFT UPPER ARCH II QUADRANT							
21	22	23	24	25	26	27	28
31	32	33	34	35	36	37	38
LEFT LOWER ARCH III QUADRANT							

**List of services**

Code	Amount	Tooth/teeth	Arch	Notes

Completion date: \_\_\_\_\_

Dentist's stamp and signature: \_\_\_\_\_