Dazzle Dental Center (25% Discount) مركز دازل للاسنان (خصم 25%) Sr. **DIAGNOSTIC PROCEDURES** CODE No. **Dental Visit** D0140 1 2 **Comprehensive Oral Evaluation** D0150 3 **Detailed & Extensive Esthetic Evaluation (with diagnostic casts)** D0160 4 **Evaluation of the Temporomandibular Joints** D0180 5 **Complete Series of Radiographic Images** D0210 6 Intraoral Periapical Radiographic Image - First image D0220 7 Intraoral Periapical Radiographic Image - Each additional image D0230 8 **Intraoral Occlusal Radiographic Image** D0240 9 **Bitewing - Single radiographic image** D0270 **Bitewings - Two radiographic images** D0272 10 11 Bitewings - Four radiographic images D0274 12 **Panoramic Radiographic Image** D0330 13 **Cephalometric Radiographic Image** D0340 14 Cone-Beam Computed Tomography Scan - Part of the jaw D0364 15 Cone Beam Computed Tomography Scan - Whole jaw D0365

16	Diagnostic Casts	D0470
Sr. No.	DIAGNOSTIC PROCEDURES	CODE
1	Dental Prophylaxis - Adult	D1110
2	Dental Prophylaxis - Child	D1120
3	Topical Application of Fluoride Varnish	D1206
4	Topical Application of Fluoride - excluding varinch	D1208
5	Sealant - Per tooth	D1351
6	Preventive Resin Restoration	D1352
7	Space Maintainer - Fixed - Unilateral	D1510
8	Space Maintainer - Fixed - Bilateral	D1515
9	Space Maintainer - Removable - Unilateral	D1520
10	Space Maintainer - Removable - Bilateral	D1525
11	Re-Cementation of Space Maintainer	D1550
Sr. No.	DIAGNOSTIC PROCEDURES	CODE
1	Etching and Bonding - Per tooth	D2130
2	Amalgam Restoration - One surface	D2140
3	Amalgam Restoration - Two surfaces	D2150
4	Amalgam Restoration - Three surfaces	D2160

5 Amalgam Restoration - Four or more surfaces 6 Composite Resin Restoration - One surface - Anterior 7 Composite Resin Restoration - Two surfaces - Anterior 8 Composite Resin Restoration - Three surfaces - Anterior 9 Composite Resin Restoration - Four or more surfaces - Anterior 10 Composite Resin Restoration - One surface - Posterior 11 Composite Resin Restoration - Two surfaces - Posterior 12 Composite Resin Restoration - Two surfaces - Posterior 13 Composite Resin Restoration - Three surfaces - Posterior 14 Protective Restoration 15 Core Buildup (Including any pins when required) 16 Pin Retention - Per pin 17 Cast Post and Core 18 Prefabricated Post and Core 19 Each Additional Prefabricated Post - Same tooth 19 DAGNOSTIC PROCEDURES 10 Composite Restoration Crown - Primary tooth 10 D2929 2 Composite Restoration for Children - One surface D2330			
7 Composite Resin Restoration - Two surfaces - Anterior D2331 8 Composite Resin Restoration - Three surfaces - Anterior D2332 9 Composite Resin Restoration - Four or more surfaces - Anterior D2335 10 Composite Resin Restoration - One surface - Posterior D2391 11 Composite Resin Restoration - Two surfaces - Posterior D2392 12 Composite Resin Restoration - Three surfaces - Posterior D2393 13 Composite Resin Restoration - Four or more surfaces - Posterior D2394 14 Protective Restoration D2940 15 Core Buildup (Including any pins when required) D2950 16 Pin Retention - Per pin D2951 17 Cast Post and Core D2952 18 Prefabricated Post and Core D2954 19 Each Additional Prefabricated Post - Same tooth D2957 Sr. DIAGNOSTIC PROCEDURES CODE 1 Prefabricated Porcelain/Ceramic Crown - Primary tooth D2929	5	Amalgam Restoration - Four or more surfaces	D2161
8 Composite Resin Restoration - Three surfaces - Anterior D2332 9 Composite Resin Restoration - Four or more surfaces - Anterior D2335 10 Composite Resin Restoration - One surface - Posterior D2391 11 Composite Resin Restoration - Two surfaces - Posterior D2392 12 Composite Resin Restoration - Three surfaces - Posterior D2393 13 Composite Resin Restoration - Four or more surfaces - Posterior D2394 14 Protective Restoration D2940 15 Core Buildup (Including any pins when required) D2950 16 Pin Retention - Per pin D2951 17 Cast Post and Core D2952 18 Prefabricated Post and Core D2954 19 Each Additional Prefabricated Post - Same tooth D2957 Sr. DIAGNOSTIC PROCEDURES CODE 1 Prefabricated Porcelain/Ceramic Crown - Primary tooth D2929	6	Composite Resin Restoration - One surface - Anterior	D2330
Composite Resin Restoration - Four or more surfaces - Anterior Composite Resin Restoration - One surface - Posterior Composite Resin Restoration - Two surfaces - Posterior Composite Resin Restoration - Two surfaces - Posterior Composite Resin Restoration - Three surfaces - Posterior Composite Resin Restoration - Four or more surfaces - Posterior Protective Restoration Core Buildup (Including any pins when required) Core Buildup (Including any pins when required) Pin Retention - Per pin Cast Post and Core Perfabricated Post and Core Prefabricated Post and Core Description Prefabricated Post and Core Description Prefabricated Post - Same tooth Description Prefabricated Porcelain/Ceramic Crown - Primary tooth Description Description	7	Composite Resin Restoration - Two surfaces - Anterior	D2331
10 Composite Resin Restoration - One surface - Posterior D2391 11 Composite Resin Restoration - Two surfaces - Posterior D2392 12 Composite Resin Restoration - Three surfaces - Posterior D2393 13 Composite Resin Restoration - Four or more surfaces - Posterior D2394 14 Protective Restoration D2940 15 Core Buildup (Including any pins when required) D2950 16 Pin Retention - Per pin D2951 17 Cast Post and Core D2952 18 Prefabricated Post and Core D2954 19 Each Additional Prefabricated Post - Same tooth D2957 Sr. No. DIAGNOSTIC PROCEDURES CODE 1 Prefabricated Porcelain/Ceramic Crown - Primary tooth D2929	8	Composite Resin Restoration - Three surfaces - Anterior	D2332
11 Composite Resin Restoration - Two surfaces - Posterior D2392 12 Composite Resin Restoration - Three surfaces - Posterior D2393 13 Composite Resin Restoration - Four or more surfaces - Posterior D2394 14 Protective Restoration D2940 15 Core Buildup (Including any pins when required) D2950 16 Pin Retention - Per pin D2951 17 Cast Post and Core D2952 18 Prefabricated Post and Core D2954 19 Each Additional Prefabricated Post - Same tooth D2957 Sr. DIAGNOSTIC PROCEDURES CODE 1 Prefabricated Porcelain/Ceramic Crown - Primary tooth D2929	9	Composite Resin Restoration - Four or more surfaces - Anterior	D2335
Composite Resin Restoration - Three surfaces - Posterior D2393 Composite Resin Restoration - Four or more surfaces - Posterior D2394 Protective Restoration D2940 Core Buildup (Including any pins when required) Pin Retention - Per pin D2951 Cast Post and Core D2952 Prefabricated Post and Core D2954 Prefabricated Post and Core D2955 CODE Prefabricated Post - Same tooth D2957 CODE Prefabricated Porcelain/Ceramic Crown - Primary tooth D2929	10	Composite Resin Restoration - One surface - Posterior	D2391
13 Composite Resin Restoration - Four or more surfaces - Posterior D2394 14 Protective Restoration D2940 15 Core Buildup (Including any pins when required) D2950 16 Pin Retention - Per pin D2951 17 Cast Post and Core D2952 18 Prefabricated Post and Core D2954 19 Each Additional Prefabricated Post - Same tooth D2957 Sr. No. DIAGNOSTIC PROCEDURES CODE 1 Prefabricated Porcelain/Ceramic Crown - Primary tooth D2929	11	Composite Resin Restoration - Two surfaces - Posterior	D2392
14 Protective Restoration D2940 15 Core Buildup (Including any pins when required) D2950 16 Pin Retention - Per pin D2951 17 Cast Post and Core D2952 18 Prefabricated Post and Core D2954 19 Each Additional Prefabricated Post - Same tooth D2957 Sr. No. DIAGNOSTIC PROCEDURES CODE 1 Prefabricated Porcelain/Ceramic Crown - Primary tooth D2929	12	Composite Resin Restoration - Three surfaces - Posterior	D2393
15 Core Buildup (Including any pins when required) 16 Pin Retention - Per pin 17 Cast Post and Core 18 Prefabricated Post and Core 19 Each Additional Prefabricated Post - Same tooth D2957 Sr. No. DIAGNOSTIC PROCEDURES CODE 1 Prefabricated Porcelain/Ceramic Crown - Primary tooth D2929	13	Composite Resin Restoration - Four or more surfaces - Posterior	D2394
16 Pin Retention - Per pin D2951 17 Cast Post and Core D2952 18 Prefabricated Post and Core D2954 19 Each Additional Prefabricated Post - Same tooth D2957 Sr. DIAGNOSTIC PROCEDURES CODE 1 Prefabricated Porcelain/Ceramic Crown - Primary tooth D2929	14	Protective Restoration	D2940
17 Cast Post and Core D2952 18 Prefabricated Post and Core D2954 19 Each Additional Prefabricated Post - Same tooth D2957 Sr. DIAGNOSTIC PROCEDURES CODE 1 Prefabricated Porcelain/Ceramic Crown - Primary tooth D2929	15	Core Buildup (Including any pins when required)	D2950
18 Prefabricated Post and Core D2954 19 Each Additional Prefabricated Post - Same tooth D2957 Sr. DIAGNOSTIC PROCEDURES 1 Prefabricated Porcelain/Ceramic Crown - Primary tooth D2929	16	Pin Retention - Per pin	D2951
19 Each Additional Prefabricated Post - Same tooth D2957 Sr. No. DIAGNOSTIC PROCEDURES CODE 1 Prefabricated Porcelain/Ceramic Crown - Primary tooth D2929	17	Cast Post and Core	D2952
Sr. DIAGNOSTIC PROCEDURES 1 Prefabricated Porcelain/Ceramic Crown - Primary tooth D2929	18	Prefabricated Post and Core	D2954
No. DIAGNOSTIC PROCEDURES CODE 1 Prefabricated Porcelain/Ceramic Crown - Primary tooth D2929	19	Each Additional Prefabricated Post - Same tooth	D2957
		DIAGNOSTIC PROCEDURES	CODE
2 Composite Restoration for Children - One surface D2330	1	Prefabricated Porcelain/Ceramic Crown - Primary tooth	D2929
	2	Composite Restoration for Children - One surface	D2330

3	Composite Resin Restoration for Children - Two surfaces	D2331
4	Composite Resin Restoration for Children - Three surfaces	D2332
5	Composite Resin Crown (Strip Crown)	D2390
6	Prefabricated Stainless Steel Crown - Primary tooth	D2930
7	Prefabricated Stainless Steel Crown - Permanent tooth	D2931
8	Therapeutic Pulpotomy	D3220
9	Pulpal Debridement - Primary and permanent teeth	D3221
10	Pulpal Therapy (Resorbable Filling) - Anterior primary tooth	D3230
11	Pulpal Therapy (Resorbable Filling) - Posterior primary tooth	D3240
12	Pediatric Fixed Dental Prosthesis	D6985
Sr. No.	DIAGNOSTIC PROCEDURES	CODE
1	Pulp Cap - Direct (Excluding final restoration)	D3110
2	Pulp Cap - Indirect (Excluding final restoration)	D3120
3	Pulpal Debridement	D3221
4	Endodontic Therapy - Anterior (Excluding final restoration)	D3310
5	Endodontic Therapy - Premolar (Excluding final restoration)	D3320
6	Endodontic Therapy - Molar (Excluding final restoration)	D3330
7	Internal Root Repair of Perforation Defects	D3333

8	Retreatment of Previous Endodontic Therapy - Anterior	D3346
9	Retreatment of Previous Endodontic Therapy - Premolar	D3347
10	Retreatment of Previous Endodontic Therapy - Molar	D3348
11	Apexification/Recalcification - Initial visit	D3351
12	Apexification/Recalcification - Interim medication replacement	D3352
13	Apexification/Recalcification - Final visit	D3353
14	Apicoectomy/Periradicular Surgery - Anterior	D3410
15	Apicoectomy/Periradicular Surgery - Premolar (First Root)	D3421
16	Apicoectomy/Periradicular Surgery - Molar (First Root)	D3425
17	Apicoectomy/Periradicular Surgery (Each additional root)	D3426
18	Complicated Endodontic Therapy - Premolar	D3910
19	Complicated Endodontic Therapy - Molar	D3920
20	Endodontic Therapy - Necrotic pulp	D3999
Sr. No.	DIAGNOSTIC PROCEDURES	CODE
1	Gingivectomy - Per quadrant (Four or more contiguous teeth or tooth bounded spaces)	D4210
2	Gingivectomy - Per quadrant (One to three contiguous teeth or tooth bounded spaces)	D4211
3	Gingival Flap Procedure or Gingivoplasty - Per quadrant (Four or more contiguous teeth or tooth bounded spaces)	D4240
4	Gingival Flap Procedure or Gingivoplasty - (1-3 contiguous teeth or tooth bounded spaces)	D4241

5 Apically Positioned Flap 6 Clinical Crown Lengthening - Hard Tissue 7 Osseous Surgery - Quad 8 Osseous Surgery - 1-3 teeth 9 Bone Replacement Graft - First site in quadrant 10 Bone Replacement Graft - Each additional site in quadrant 11 Biologic Materials for Soft and Osseous Tissue Regeneration 12 Guided Tissue Regeneration (Including bone graft) 13 Distal or Proximal Wedge Procedure 14 Free Soft Tissue Graft Procedure 15 Provisional Splinting - Per tooth 16 Periodontal Scaling and Root Planing - Per quadrant 17 Periodontal Maintenance 18 Surgical revision per tooth 18 Surgical revision per tooth 20 Maxillary Complete Denture 2 Mandibular Complete Denture D5130 Immediate Maxillary Complete Denture D5130			
7 Osseous Surgery - Quad D4260 8 Osseous Surgery - 1-3 teeth D4261 9 Bone Replacement Graft - First site in quadrant D4263 10 Bone Replacement Graft - Each additional site in quadrant D4264 11 Biologic Materials for Soft and Osseous Tissue Regeneration D4265 12 Guided Tissue Regeneration (Including bone graft) D4266 13 Distal or Proximal Wedge Procedure D4274 14 Free Soft Tissue Graft Procedure D4277 15 Provisional Splinting - Per tooth D4321 16 Periodontal Scaling and Root Planing - Per quadrant D4341 17 Periodontal Maintenance D4910 18 Surgical revision per tooth D4268 Sr. DIAGNOSTIC PROCEDURES CODE 1 Maxillary Complete Denture D5110 2 Mandibular Complete Denture	5	Apically Positioned Flap	D4245
Bone Replacement Graft - First site in quadrant D4263 D8000 Bone Replacement Graft - First site in quadrant D4264 Biologic Materials for Soft and Osseous Tissue Regeneration Biologic Materials for Soft and Osseous Tissue Regeneration D4265 Guided Tissue Regeneration (Including bone graft) D4266 Distal or Proximal Wedge Procedure D4274 Free Soft Tissue Graft Procedure D4277 Free Soft Tissue Graft Procedure D4277 Provisional Splinting - Per tooth D4321 Periodontal Scaling and Root Planing - Per quadrant Periodontal Maintenance D4910 Surgical revision per tooth D4268 Sr. DIAGNOSTIC PROCEDURES CODE Maxillary Complete Denture D5110 Maxillary Complete Denture	6	Clinical Crown Lengthening - Hard Tissue	D4249
9 Bone Replacement Graft - First site in quadrant D4263 10 Bone Replacement Graft - Each additional site in quadrant D4264 11 Biologic Materials for Soft and Osseous Tissue Regeneration D4265 12 Guided Tissue Regeneration (Including bone graft) D4266 13 Distal or Proximal Wedge Procedure D4274 14 Free Soft Tissue Graft Procedure D4277 15 Provisional Splinting - Per tooth D4321 16 Periodontal Scaling and Root Planing - Per quadrant D4341 17 Periodontal Maintenance D4910 18 Surgical revision per tooth D4268 Sr. No. DIAGNOSTIC PROCEDURES CODE 1 Maxillary Complete Denture D5110 2 Mandibular Complete Denture	7	Osseous Surgery - Quad	D4260
10 Bone Replacement Graft - Each additional site in quadrant D4264 11 Biologic Materials for Soft and Osseous Tissue Regeneration D4265 12 Guided Tissue Regeneration (Including bone graft) D4266 13 Distal or Proximal Wedge Procedure D4274 14 Free Soft Tissue Graft Procedure D4277 15 Provisional Splinting - Per tooth D4321 16 Periodontal Scaling and Root Planing - Per quadrant D4341 17 Periodontal Maintenance D4910 18 Surgical revision per tooth D4268 Sr. DIAGNOSTIC PROCEDURES CODE 1 Maxillary Complete Denture D5110 2 Mandibular Complete Denture	8	Osseous Surgery - 1-3 teeth	D4261
11 Biologic Materials for Soft and Osseous Tissue Regeneration D4265 12 Guided Tissue Regeneration (Including bone graft) D4266 13 Distal or Proximal Wedge Procedure D4274 14 Free Soft Tissue Graft Procedure D4277 15 Provisional Splinting - Per tooth D4321 16 Periodontal Scaling and Root Planing - Per quadrant D4341 17 Periodontal Maintenance D4910 18 Surgical revision per tooth D4268 Sr. DIAGNOSTIC PROCEDURES CODE 1 Maxillary Complete Denture D5110 2 Mandibular Complete Denture	9	Bone Replacement Graft - First site in quadrant	D4263
12 Guided Tissue Regeneration (Including bone graft) 13 Distal or Proximal Wedge Procedure 14 Free Soft Tissue Graft Procedure 15 Provisional Splinting - Per tooth 16 Periodontal Scaling and Root Planing - Per quadrant 17 Periodontal Maintenance 18 Surgical revision per tooth 20 Maxillary Complete Denture D5120 Mandibular Complete Denture	10	Bone Replacement Graft - Each additional site in quadrant	D4264
13 Distal or Proximal Wedge Procedure D4274 14 Free Soft Tissue Graft Procedure D4277 15 Provisional Splinting - Per tooth D4321 16 Periodontal Scaling and Root Planing - Per quadrant D4341 17 Periodontal Maintenance D4910 18 Surgical revision per tooth D4268 Sr. DIAGNOSTIC PROCEDURES CODE 1 Maxillary Complete Denture D5110 2 Mandibular Complete Denture D5120	11	Biologic Materials for Soft and Osseous Tissue Regeneration	D4265
14 Free Soft Tissue Graft Procedure D4277 15 Provisional Splinting - Per tooth D4321 16 Periodontal Scaling and Root Planing - Per quadrant D4341 17 Periodontal Maintenance D4910 18 Surgical revision per tooth D4268 Sr. DIAGNOSTIC PROCEDURES CODE 1 Maxillary Complete Denture D5110 2 Mandibular Complete Denture D5120	12	Guided Tissue Regeneration (Including bone graft)	D4266
15 Provisional Splinting - Per tooth D4321 16 Periodontal Scaling and Root Planing - Per quadrant D4341 17 Periodontal Maintenance D4910 18 Surgical revision per tooth D4268 Sr. DIAGNOSTIC PROCEDURES CODE 1 Maxillary Complete Denture D5110 2 Mandibular Complete Denture D5120	13	Distal or Proximal Wedge Procedure	D4274
16 Periodontal Scaling and Root Planing - Per quadrant D4341 17 Periodontal Maintenance D4910 18 Surgical revision per tooth D4268 Sr. DIAGNOSTIC PROCEDURES CODE 1 Maxillary Complete Denture D5110 2 Mandibular Complete Denture D5120	14	Free Soft Tissue Graft Procedure	D4277
17 Periodontal Maintenance D4910 18 Surgical revision per tooth D4268 Sr. DIAGNOSTIC PROCEDURES CODE 1 Maxillary Complete Denture D5110 2 Mandibular Complete Denture D5120	15	Provisional Splinting - Per tooth	D4321
Sr. DIAGNOSTIC PROCEDURES 1 Maxillary Complete Denture D5110 Mandibular Complete Denture	16	Periodontal Scaling and Root Planing - Per quadrant	D4341
Sr. DIAGNOSTIC PROCEDURES 1 Maxillary Complete Denture D5110 2 Mandibular Complete Denture D5120	17	Periodontal Maintenance	D4910
No. DIAGNOSTIC PROCEDURES CODE Maxillary Complete Denture D5110 Mandibular Complete Denture D5120	18	Surgical revision per tooth	D4268
2 Mandibular Complete Denture D5120		DIAGNOSTIC PROCEDURES	CODE
	1	Maxillary Complete Denture	D5110
3 Immediate Maxillary Complete Denture D5130	2	Mandibular Complete Denture	D5120
	3	Immediate Maxillary Complete Denture	D5130

5 Maxillary Removable Partial Denture - Resin base (Including any conventional clasps, rests and teeth) 6 Mandibular Removable Partial Denture - Resin base (Including any conventional clasps, rests and teeth) 7 Maxillary Removable Partial Denture - Cast metal framework with resin bases (Including any conventional clasps, rests and teeth) 8 Mandibular Removable Partial Denture - Cast metal framework with resin bases (Including any conventional clasps, rests and teeth) 9 Maxillary Removable Partial Denture - Flexible base (Valplast*) 10 Mandibular Removable Partial Denture - Flexible base (Valplast*) 11 Adjust Maxillary Removable Partial Denture 12 Adjust Mandibular Removable Partial Denture 13 Repair Resin Denture Base 14 Replace Broken Denture Teeth - Per tooth 15 Rebase Maxillary Removable Partial Denture 16 Rebase Maxillary Removable Partial Denture 17 Reline Maxillary Complete Denture (Chairside) 18 Reline Mandibular Complete Denture (Chairside) 19 Reline Maxillary Removable Partial Denture (Chairside) 20 Reline Mandibular Removable Partial Denture (Chairside) 20 Reline Mandibular Removable Partial Denture (Chairside) 25 De State of the Stat			
Social Comments Social Com	4	Immediate Mandibular Complete Denture	D5140
Gamma Classes, rests and teeth D521	5	•	D5211
Mandibular Removable Partial Denture - Cast metal framework with resin bases (Including any conventional clasps, rests and teeth) Mandibular Removable Partial Denture - Cast metal framework with resin bases (Including any conventional clasps, rests and teeth) Maxillary Removable Partial Denture - Flexible base (Valplast*) Mandibular Removable Partial Denture - Flexible base (Valplast*) Adjust Maxillary Removable Partial Denture Adjust Mandibular Removable Partial Denture Adjust Mandibular Removable Partial Denture Repair Resin Denture Base D563 Replace Broken Denture Teeth - Per tooth Rebase Maxillary Removable Partial Denture Rebase Maxillary Removable Partial Denture Rebase Mandibular Removable Partial Denture Reline Maxillary Complete Denture (Chairside) Reline Mandibular Complete Denture (Chairside) Reline Maxillary Removable Partial Denture (Chairside) Reline Mandibular Removable Partial Denture (Chairside) Reline Mandibular Removable Partial Denture (Chairside)	6		D5212
B bases (Including any conventional clasps, rests and teeth) D521	7	·	D5213
10 Mandibular Removable Partial Denture - Flexible base (Valplast °) D522 11 Adjust Maxillary Removable Partial Denture D542 12 Adjust Mandibular Removable Partial Denture D542 13 Repair Resin Denture Base D563 14 Replace Broken Denture Teeth - Per tooth D564 15 Rebase Maxillary Removable Partial Denture D572 16 Rebase Mandibular Removable Partial Denture D573 17 Reline Maxillary Complete Denture (Chairside) D573 18 Reline Mandibular Complete Denture (Chairside) D573 19 Reline Maxillary Removable Partial Denture (Chairside) D574 20 Reline Mandibular Removable Partial Denture (Chairside) D574	8		D5214
11 Adjust Maxillary Removable Partial Denture D542 12 Adjust Mandibular Removable Partial Denture D542 13 Repair Resin Denture Base D563 14 Replace Broken Denture Teeth - Per tooth D564 15 Rebase Maxillary Removable Partial Denture D572 16 Rebase Mandibular Removable Partial Denture D573 17 Reline Maxillary Complete Denture (Chairside) D573 18 Reline Mandibular Complete Denture (Chairside) D573 19 Reline Maxillary Removable Partial Denture (Chairside) D574 20 Reline Mandibular Removable Partial Denture (Chairside) D574	9	Maxillary Removable Partial Denture - Flexible base (Valplast®)	D5225
12 Adjust Mandibular Removable Partial Denture D542 13 Repair Resin Denture Base D563 14 Replace Broken Denture Teeth - Per tooth D564 15 Rebase Maxillary Removable Partial Denture D572 16 Rebase Mandibular Removable Partial Denture D573 17 Reline Maxillary Complete Denture (Chairside) D573 18 Reline Mandibular Complete Denture (Chairside) D573 19 Reline Maxillary Removable Partial Denture (Chairside) D574 20 Reline Mandibular Removable Partial Denture (Chairside) D574	10	Mandibular Removable Partial Denture - Flexible base (Valplast [®])	D5226
13 Repair Resin Denture Base D561 14 Replace Broken Denture Teeth - Per tooth D564 15 Rebase Maxillary Removable Partial Denture D572 16 Rebase Mandibular Removable Partial Denture D573 17 Reline Maxillary Complete Denture (Chairside) D573 18 Reline Mandibular Complete Denture (Chairside) D573 19 Reline Maxillary Removable Partial Denture (Chairside) D574 20 Reline Mandibular Removable Partial Denture (Chairside) D574	11	Adjust Maxillary Removable Partial Denture	D5421
14 Replace Broken Denture Teeth - Per tooth D564 15 Rebase Maxillary Removable Partial Denture D572 16 Rebase Mandibular Removable Partial Denture D572 17 Reline Maxillary Complete Denture (Chairside) D573 18 Reline Mandibular Complete Denture (Chairside) D573 19 Reline Maxillary Removable Partial Denture (Chairside) D574 20 Reline Mandibular Removable Partial Denture (Chairside) D574	12	Adjust Mandibular Removable Partial Denture	D5422
15 Rebase Maxillary Removable Partial Denture D572 16 Rebase Mandibular Removable Partial Denture D572 17 Reline Maxillary Complete Denture (Chairside) D573 18 Reline Mandibular Complete Denture (Chairside) D573 19 Reline Maxillary Removable Partial Denture (Chairside) D574 20 Reline Mandibular Removable Partial Denture (Chairside) D574	13	Repair Resin Denture Base	D5610
16 Rebase Mandibular Removable Partial Denture D572 17 Reline Maxillary Complete Denture (Chairside) D573 18 Reline Mandibular Complete Denture (Chairside) D573 19 Reline Maxillary Removable Partial Denture (Chairside) D574 20 Reline Mandibular Removable Partial Denture (Chairside) D574	14	Replace Broken Denture Teeth - Per tooth	D5640
17 Reline Maxillary Complete Denture (Chairside) D573 18 Reline Mandibular Complete Denture (Chairside) D573 19 Reline Maxillary Removable Partial Denture (Chairside) D574 20 Reline Mandibular Removable Partial Denture (Chairside) D574	15	Rebase Maxillary Removable Partial Denture	D5720
18 Reline Mandibular Complete Denture (Chairside) D573 19 Reline Maxillary Removable Partial Denture (Chairside) D574 20 Reline Mandibular Removable Partial Denture (Chairside) D574	16	Rebase Mandibular Removable Partial Denture	D5721
19 Reline Maxillary Removable Partial Denture (Chairside) D574 20 Reline Mandibular Removable Partial Denture (Chairside) D574	17	Reline Maxillary Complete Denture (Chairside)	D5730
20 Reline Mandibular Removable Partial Denture (Chairside) D574	18	Reline Mandibular Complete Denture (Chairside)	D5731
	19	Reline Maxillary Removable Partial Denture (Chairside)	D5740
21 Reline Maxillary Complete Denture (Laboratory) D575	20	Reline Mandibular Removable Partial Denture (Chairside)	D5741
	21	Reline Maxillary Complete Denture (Laboratory)	D5750

22	Reline Mandibular Complete Denture (Laboratory)	D5751
23	Reline Maxillary Removable Partial Denture (Laboratory)	D5760
24	Reline Mandibular Removable Partial Denture (Laboratory)	D5761
25	Tissue Conditioning - Maxillary	D5850
26	Tissue Conditioning - Mandibular	D5851
27	Precision Attachment	D5862
28	Maxillary Complete Overdenture	D5863
29	Maxillary Removable Partial Overdenture	D5864
30	Mandibular Complete Overdenture	D5865
31	Mandibular Removable Partial Overdenture	D5866
32	Modification of Removable Prosthesis Following Implant Surgery	D5875
Sr. No.	DIAGNOSTIC PROCEDURES	CODE
1	Surgical Placement of Implant Body: Endosteal Implant	D6010
2	Second Stage Implant Surgery	D6011
3	Implant Overdenture	D6053
4	Custom Fabricated Zirconia Abutment (Including Placement)	D6056
5	Custom Fabricated Metal Abutment (Including placement)	D6057
6	Abutment Supported Porcelain/Ceramic Crown	D6058

7	Implant/Abutment Supported Fixed Denture (Hybrid Prosthesis) For Completely Edentulous Arch (Including implant abutments and not implant fixtures) Per arch	D6078
8	Radiographic/Surgical Template	D6190
Sr. No.	DIAGNOSTIC PROCEDURES	CODE
1	Porcelain/Ceramic Inlay - Two surfaces	D6600
2	Porcelain/Ceramic Inlay - Three or more surfaces	D6601
3	Porcelain/Ceramic Onlay - Two surfaces	D6608
4	Porcelain/Ceramic Onlay - Three or more surfaces	D6609
5	Crown - Porcelain / Ceramic	D6740
7	Crown -Poorcelain Fused to Metal	D6750
8	Crown - Full Cast Metal	D6790
9	Provisional Crown (Chairside)	D6793
10	Provisional Crown (CAD/CAM)	D6794
11	Recement Crown or Fixed Dental Prosthesis	D6930
12	Recement Fixed Dental Prosthesis	D6931
13	Resin Laminate Veneer (Chairside)	D6960
14	Resin Laminate Veneer (Laboratory)	D6961
15	Porcelain Laminate Veneer	D6962

16	Lumineers [®] - Per tooth	D6963
17	Removal of Crown or Fixed Dental Prosthesis	D6980
Sr. No.	DIAGNOSTIC PROCEDURES	CODE
1	Extraction of an Erupted Tooth/Exposed Root	D7140
2	Surgical Extraction of an Erupted Tooth	D7210
3	Surgical Extraction of an Impacted Tooth - Soft tissue	D7220
4	Surgical Extraction of an Impacted Tooth - Partial bony	D7230
5	Surgical Extraction of an Impacted Tooth - Completely bony	D7240
6	Surgical Extraction of an Impacted Tooth - Completely bony with unusual surgical complications	D7241
7	Surgical Extraction of Residual Tooth Roots (Cutting procedure)	D7250
8	Surgical Access of an Unerupted Tooth	D7280
9	Placement of a Device to Facilitate Eruption of Impacted Tooth	D7283
10	Biopsy of Oral Tissue - Hard (Bone, tooth)	D7285
11	Biopsy of Oral Tissue - Soft	D7286
12	Cyst Removal	D7450
13	Incision and Drainage of Abscess - Intraoral soft tissue	D7510
14	Incision and Drainage of Abscess - Intraoral soft tissue (Complicated)	D7511
15	Ridge Augmentation (Including expansion)	D7950

16	Sinus Augmentation via a Lateral Open Approach	D7951
17	Sinus Augmentation via a Vertical Approach	D7952
18	Frenulectomy	D7960
Sr. No.	DIAGNOSTIC PROCEDURES	CODE
1	Orthodontic Records	D8010
2	Limited Orthodontic Treatment of the Transitional Dentition	D8020
3	Limited Orthodontic Treatment of the Adult Dentition	D8040
4	Interceptive Orthodontic Treatment of the Primary Dentition	D8050
5	Interceptive Orthodontic Treatment of the transitional Dentition	D8060
6	Comprehensive Orthodontic Treatment of the Adult Dentition	D8090
7	Activator, Twin Block, Herbst Appliance	D8130
8	Rapid Palatal Expansion (RPE)	D8110
9	Transpalatal Bar	D8120
10	2D Minor Lingual Orthodontic Treatment	D8210
11	3D Major Lingual Orthodontic Treatment	D8220
12	Head Gear (As part of whole orthodontic treatment)	D8360
13	Micro Screw Anchorage - Per screw	D8370
14	Pre-Orthodontic Treatment Visit	D8660

15	Periodic Orthodontic Treatment Visit (As part of contract)	D8670
16	Orthodontic Retention (Including removal of appliance, construction and placement of retainer)	D8680
17	Repair of Orthodontic Appliance	D8691
18	Replacement of lost or broken retainer	D8692
19	Invisalign [®]	D8750
20	Essix Retainer	D8751
21	Ceramic Brackets - Per arch	D8999
22	Case Presentation - Detailed and Extensive Treatment Planning	D9450
Sr. No.	DIAGNOSTIC PROCEDURES	CODE
1	Palliative (emergency) treatment of dental pain - minor procedure	D9110
2	Application of desensiting medicament	D9911
3	Dry Socket Treatment - Per visit	D9930
4	Protective Occlusal Device (Occlusal/Night Guard)	D9940
5	Fabrication of Athletic Protective Device (Mouthguard)	D9941
6	Hard Protective Occlusal Device (Occlusal/Night Guard)	D9942
7	Diagnostic Waxing - Per tooth	D9950
8	Occlusal Adjustment - Limited	D9951
9	Occlusal Adjustment - Complete	D9952

10	In-Office External Bleaching (Zoom! [°])	D9972
11	In-Office External Bleaching (Opalescence [®])	D9972
12	In-Office External Bleaching (Sapphire [®])	D9972
13	Internal Bleaching - Per tooth	D9974
14	At-Home External Bleaching	D9975
Sr. No.	OTHER	CODE
1	Coronectomy	D7251
2	Alveoloplasty -One to Three Teeth or Teeth Spaces	D7320
3	Alveoloplasty -Four or More Teeth or Teeth Spaces	D7321
4	Biologic Materials for Soft and Osseous Tissue Regeneration (Allograft,0.5cc)	D4265A
5	Biologic Materials for Soft and Osseous Tissue Regeneration(Allograft,1.0cc)	D4265B
6	Biologic Materials for Soft and Osseous Tissue Regeneration(Allograft, 2.0cc)	D4265C
7	Biologic Materials for Soft and Osseous Tissue Regeneration(Xenograft,0.5cc)	D4265D
8	Biologic Materials for Soft and Osseous Tissue Regeneration(Xenograft,1.0cc)	D4265E
9	Biologic Materials for Soft and Osseous Tissue Regeneration(Collagen membrane,15x20)	D4265F
10	Biologic Materials for Soft and Osseous Tissue Regeneration(Collagen membrane,30x20)	D4265G
11	Biologic Materials for Soft and Osseous Tissue Regeneration(Collagen membrane,30x40)	D4265H
12	Biologic Materials for Soft and Osseous Tissue Regeneration(Tacking screw)	D42651

13	Biologic Materials for Soft and Osseous Tissue Regeneration(Bone fixation screw)	D4265J
14	Bone Scraper	D4265K
15	Surgical Removal of implant	D6100
16	Bone graft for periimplantitis	D6103
17	Bone graft when placing an implant	D6104
18	Connective tissue graft harvest and inset	D4273
19	Gingival Graft Harvest and Inset	D4277
20	Harvest of Autogenous Bone-Ramus Block	D7295
21	Socket Preservation Procedure	D7953
22	Ridge Augmentation (Including expansion)	D7950
23	Sinus Augmentation via a Lateral Open Approach	D7951
24	Sinus Augmentation via a Vertical Approach	D7952
25	Digitally fabricated surgical guide	D6190B
26	Fixed Retainer	D8752
27	Hawly Retainer	D8753

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