

Dazzle Dental Center (25% Discount)**مركز دازل للاسنان (خصم 25%)**

Sr. No.	DIAGNOSTIC PROCEDURES	CODE
1	Dental Visit	D0140
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
10	Bitewings - Two radiographic images	D0272
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	D2161
6	Composite Resin Restoration - One surface - Anterior	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. No.	DIAGNOSTIC PROCEDURES	CODE

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	D4245
6	Clinical Crown Lengthening - Hard Tissue	D4249
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. No.	DIAGNOSTIC PROCEDURES	CODE
1	Maxillary Complete Denture	D5110
2	Mandibular Complete Denture	D5120
3	Immediate Maxillary Complete Denture	D5130
4	Immediate Mandibular Complete Denture	D5140
5	Maxillary Removable Partial Denture - Resin base (Including any conventional clasps, rests and teeth)	D5211
6	Mandibular Removable Partial Denture - Resin base (Including any conventional clasps, rests and teeth)	D5212
7	Maxillary Removable Partial Denture - Cast metal framework with resin bases (Including any conventional clasps, rests and teeth)	D5213
8	Mandibular Removable Partial Denture - Cast metal framework with resin bases (Including any conventional clasps, rests and teeth)	D5214
9	Maxillary Removable Partial Denture - Flexible base (Valplast®)	D5225
10	Mandibular Removable Partial Denture - Flexible base (Valplast®)	D5226
11	Adjust Maxillary Removable Partial Denture	D5421
12	Adjust Mandibular Removable Partial Denture	D5422
13	Repair Resin Denture Base	D5610
14	Replace Broken Denture Teeth - Per tooth	D5640
15	Rebase Maxillary Removable Partial Denture	D5720

16	Rebase Mandibular Removable Partial Denture	D5721
17	Reline Maxillary Complete Denture (Chairside)	D5730
18	Reline Mandibular Complete Denture (Chairside)	D5731
19	Reline Maxillary Removable Partial Denture (Chairside)	D5740
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 - Porcelain 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)	D4265I
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