

## Private Healthcare Facilities Ordinance

Schedule 3

S3-2

Cap. 633

**Schedule 3**

[ss. 2, 15, 103 &amp; 123]

**Classes of Specialized Services**

Column 1 Class of specialized services	Column 2 Particular medical procedures	Column 3 Exceptions to medical procedures described in column 2
1. Surgical procedure	<p>(a) Creation of surgical wound to allow access to major body cavity or viscus, including access to central large joints</p> <p>(b) Removal of tissue or fluid, or both, of a total volume of 500 mL or above</p> <p>(c) Removal of tissue or fluid, or both, of any volume from deep seated organ in children under the age of 12 years</p> <p>(d) Removal of tissue or fluid, or both, of any volume from thoracic cavity</p>	<p>(i) Needle injection</p> <p>(ii) Creation of surgical wound to allow access to peripheral joints distal to knee and elbow</p> <p>Suprapubic tap</p> <p>Diagnostic pleural tapping</p>

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Column 1 Class of specialized services	Column 2 Particular medical procedures	Column 3 Exceptions to medical procedures described in column 2
	(e) Insertion of prosthesis or implant	<ul style="list-style-type: none"> <li data-bbox="1002 645 1385 831">(i) Insertion of prosthesis in ear, nose and throat cavity</li> <li data-bbox="1002 857 1406 999">(ii) Insertion of dental prosthesis and implant</li> <li data-bbox="1002 1025 1406 1115">(iii) Insertion of facial implant</li> <li data-bbox="1002 1142 1406 1283">(iv) Insertion of extra- ocular prosthesis and implant</li> <li data-bbox="1002 1310 1406 1451">(v) Insertion of intrauterine or vaginal prosthesis</li> <li data-bbox="1002 1478 1445 1619">(vi) Insertion of bulking agent of urethra</li> <li data-bbox="1002 1646 1390 1787">(vii) Insertion of prostatic urethral stent</li> <li data-bbox="1002 1814 1326 1955">(viii) Insertion of urethral sling</li> <li data-bbox="1002 1848 1445 1939">(ix) Insertion of testicular prosthesis</li> </ul>

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Column 1 Class of specialized services	Column 2 Particular medical procedures	Column 3 Exceptions to medical procedures described in column 2
	(f) Core biopsy	(i) Core biopsy of superficial tissue excluding thyroid or salivary glands  (ii) Core biopsy of superficial and peripheral muscle
	(g) Biopsy of deep-seated organ	
	(h) Lumbar puncture	
	(i) Transplant of any cell, tissue or organ, including autograft, allograft, xenograft, processed tissue or blood products (including platelet-rich plasma) and skin flap (including face lift)	(i) Skin graft less than 1% of total body surface area  (ii) Transplant of conjunctival autograft  (iii) Transplant procedure which primarily involves dento-alveolar region
	(j) Termination of pregnancy	
	(k) Dilation and curettage	

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Column 1 Class of specialized services	Column 2 Particular medical procedures	Column 3 Exceptions to medical procedures described in column 2
2. Endoscopic procedure	<ul style="list-style-type: none"> <li>(l) Circumcision with use of skin sutures in paediatric patients</li> <li>(a) Endoscopic procedure requiring image guidance</li> <li>(b) Endoscopic procedure involving invasion of sterile cavity or gastrointestinal tract</li> <li>(c) Therapeutic endoscopic procedure</li> </ul>	<p>Cystoscopy, and cystoscopic removal of ureteric catheter or stent, but not including other therapeutic cystoscopic procedure</p> <p>Minor therapeutic procedure such as removal of foreign body</p>
3. Dental procedure	<p>Maxillofacial surgical procedure that extends beyond dento-alveolar process, including but not limited to—</p> <ul style="list-style-type: none"> <li>(a) Maxillary osteotomies and mandibular osteotomies (including angle reduction)</li> </ul>	<ul style="list-style-type: none"> <li>(i) Temporomandibular arthrocentesis</li> <li>(ii) Temporomandibular arthroscopy</li> </ul>

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Column 1 Class of specialized services	Column 2 Particular medical procedures	Column 3 Exceptions to medical procedures described in column 2
	<ul style="list-style-type: none"> <li>(b) Open reduction and fixation of complex maxillofacial fracture</li> <li>(c) Surgical treatment of diagnosed malignancies</li> <li>(d) Surgical treatment of complex haemangioma</li> <li>(e) Surgery involving major salivary glands</li> <li>(f) Open surgery of temporomandibular joint</li> <li>(g) Harvesting of autogenous bone from outside oral cavity</li> <li>(h) Primary cleft lip and palate surgery</li> </ul>	

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Column 1 Class of specialized services	Column 2 Particular medical procedures	Column 3 Exceptions to medical procedures described in column 2
4. Chemo-therapy	Administration of chemotherapy (cytotoxic) through parenteral routes regardless of therapeutic indication	
5. Haemo-dialysis	Haemodialysis	
6. Inter-ventional radiology and lithotripsy	(a) Extracorporeal shock wave lithotripsy (ESWL) requiring image guidance (b) Image-guided core biopsy	(i) Image-guided core biopsy of superficial tissues excluding thyroid or salivary glands (ii) Image-guided core biopsy of superficial and peripheral muscle
7. Anaesthetic procedure	(a) General anaesthesia (b) Neuroaxial blocks (including spinal, epidural and caudal)	

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Column 1 Class of specialized services	Column 2 Particular medical procedures	Column 3 Exceptions to medical procedures described in column 2
	<ul style="list-style-type: none"> <li>(c) Major plexus block (including cervical, brachial, lumbar and sacral)</li> <li>(d) Intravenous regional anaesthesia</li> <li>(e) Intercostal nerve block</li> <li>(f) Major nerve block— <ul style="list-style-type: none"> <li>(i) Glossopharyngeal nerve, vagus nerve or their terminal branches (including superior, inferior and recurrent laryngeal nerves);</li> <li>(ii) Sciatic and femoral nerves;</li> <li>(iii) Posterior tibial nerve, pudendal nerve or para- cervical block</li> </ul> </li> </ul>	

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Column 1 Class of specialized services	Column 2 Particular medical procedures	Column 3 Exceptions to medical procedures described in column 2
	<ul style="list-style-type: none"> <li>(g) Use of sedative or analgesic drugs with reasonable expectation that it will, in the manner used, result in deep sedation for a significant percentage of a group of patients</li> <li>(h) Tumescant anaesthesia</li> </ul>	
8. Radiotherapy	<ul style="list-style-type: none"> <li>(a) External beam radiotherapy</li> <li>(b) Brachytherapy</li> <li>(c) Radionuclide therapy</li> </ul>	