



**THE SOCIAL SECURITY (LABORATORY DIAGNOSTIC SERVICES)  
REGULATIONS 1981, AMENDMENT NO. 4**

---

PAUL REEVES, Governor-General

ORDER IN COUNCIL

At Wellington this 22nd day of September 1986

Present:

HIS EXCELLENCY THE GOVERNOR-GENERAL IN COUNCIL

PURSUANT to sections 116 and 132 of the Social Security Act 1964, His Excellency the Governor-General, acting by and with the advice and consent of the Executive Council, hereby makes the following regulations.

---

REGULATIONS

**1. Title, commencement, and application**—(1) These regulations may be cited as the Social Security (Laboratory Diagnostic Services) Regulations 1981, Amendment No. 4, and shall be read together with and deemed part of the Social Security (Laboratory Diagnostic Services) Regulations 1981\* (hereinafter referred to as the principal regulations).

(2) These regulations shall come into force on the 1st day of October 1986, and shall apply to laboratory diagnostic services provided on or after that date. In respect of laboratory diagnostic services provided before that date, the principal regulations shall continue to apply as if these regulations had not been made.

\*S.R. 1981/327

Amendment No. 1: S.R. 1983/84

Amendment No. 2: S.R. 1985/42

Amendment No. 3: S.R. 1985/334

**2. New scale of fees**—The principal regulations are hereby amended by revoking the Schedule (as substituted by regulation 2 of the Social Security (Laboratory Diagnostic Services) Regulations 1981, Amendment No. 3), and substituting the Schedule set out in the Schedule to these regulations.

**3. Revocation**—The Social Security (Laboratory Diagnostic Services) Regulations 1981, Amendment No. 3 are hereby consequentially revoked.

## SCHEDULE

Reg. 2

## NEW SCHEDULE TO PRINCIPAL REGULATIONS

## "SCHEDULE

Reg. 3

## SCALE OF FEES PAYABLE IN RESPECT OF LABORATORY DIAGNOSTIC SERVICES

<i>Code</i>	<i>Title</i>	<i>£</i>
<b>HAEMATOLOGY</b>		
A.1	Complete blood count (red and white cells, haemoglobin, MCV, differential leucocyte count or blood film or both) .. .. .	7.11
A.2	Blood sedimentation rate .. .. .	1.42
A.3	Platelet count .. .. .	2.59
A.4	Bleeding time .. .. .	0.71
A.5	(a) Thrombin clotting time .. .. .	1.42
	(b) Clot retraction (semi-quantitative) .. .. .	0.71
A.6	Blood prothrombin test .. .. .	4.27
A.7	(a) Red cell fragility .. .. .	2.85
	(b) Red cell autohaemolysis .. .. .	5.70
A.8	Reticulocytes, siderocytes, Heinz Bodies, etc. .. .. .	2.59
A.9	LE Cell test .. .. .	2.85
A.10	Bone marrow examination .. .. .	28.41
A.11	Coagulation factor (individual assay) .. .. .	2.85
A.12	Partial thromboplastin time or kaolin clotting time .. .. .	3.56
A.13	Red cell or white cell enzymes .. .. .	2.85
A.14	Chromosome analysis (for Philadelphia chromosome or similar abnormality) .. .. .	4.27
<b>BLOOD GROUPING</b>		
B.1	A.B.O. series .. .. .	0.71
B.2	Rhesus group .. .. .	0.71
B.3	Coombs test .. .. .	1.42
B.4	Rhesus titre .. .. .	2.85
B.5	Rhesus phenotyping .. .. .	2.85
B.6	Serum screening of antibodies—antenatal .. .. .	2.85
B.7	Donath Landsteiner test .. .. .	1.42
<b>CLINICAL CHEMISTRY</b>		
C.1	Urea .. .. .	2.59
C.2	Creatinine .. .. .	2.59

## SCHEDULE—continued

Code	Title	§
C.3	Serum glucose or glycosolated protein .. .. .	2.59
C.4	Bicarbonate or total CO <sub>2</sub> (one fee only) .. .. .	2.85
C.5	Bile pigments:	
	(a) Bilirubin total .. .. .	2.59
	(b) Bilirubin conjugated and unconjugated and total .. .. .	5.17
	(c) Bile pigments in urine .. .. .	1.29
C.6	(a) Cholesterol .. .. .	2.85
	(b) Serum triglycerides .. .. .	2.85
	(c) HDL cholesterol .. .. .	2.85
C.7	Uric acid .. .. .	2.85
C.8	Calcium .. .. .	2.85
C.9	Phosphorus .. .. .	2.85
C.10	Iron and iron binding capacity .. .. .	5.70
C.11	Ferritin .. .. .	6.47
C.12	Chloride .. .. .	2.14
C.13	Sodium .. .. .	2.85
C.14	Potassium .. .. .	2.85
C.15	Acid phosphatase .. .. .	2.85
C.16	Alkaline phosphatase .. .. .	2.85
C.17	Amylase .. .. .	2.59
C.18	Transaminase:	
	(a) AST .. .. .	2.85
	(b) ALT .. .. .	2.85
C.19	Other enzymes (as per specific request) .. .. .	2.85
C.20	(a) Total proteins (quantitative) other than urine .. .. .	1.42
	(b) Serum albumin .. .. .	1.42
	(c) 24 hour urine proteins .. .. .	1.42
C.21	Electrophoretic pattern of serum proteins or lipoproteins .. .. .	2.85
C.22	Immunoglobulins (quantitative) per fraction .. .. .	2.14
	Maximum .. .. .	6.36
C.23	Haemoglobin pigments:	
	(a) Qualitative (including Hams' acid serum test, Schumm's test) .. .. .	1.42
	(b) Quantitative (including chemical methods of estimating abnormal haemoglobins and haptoglobins) .. .. .	2.85
C.24	Magnesium .. .. .	2.85
C.25	Serum vitamin B12 .. .. .	5.70
C.26	Folate level (one fee only) .. .. .	5.70
C.27	(a) Fibrinogen (semi-quantitative) .. .. .	2.85
	(b) Fibrinogen screening .. .. .	1.42
C.28	Thyroxine (T <sub>4</sub> ) .. .. .	5.70
C.29	T <sub>3</sub> I <sup>131</sup> , resin uptake or equivalent measure of thyroid-binding protein (one fee only) .. .. .	2.85
C.30	TSH .. .. .	6.47
C.31	Free T <sub>3</sub> assay .. .. .	5.69
C.32	FSH .. .. .	5.52
C.33	LH .. .. .	5.52
C.34	Serum prolactin .. .. .	7.17

SCHEDULE—*continued*

<i>Code</i>	<i>Title</i>	<i>§</i>
C.35	Serum carotene .. .. .	2.85
C.36	Cryoglobulins (semi-quantitative) .. .. .	2.85
C.37	Lithium .. .. .	2.85
C.38	Blood or urine alcohol for diagnostic purposes (one fee only) .. .. .	5.70
C.39	Porphyryns (quantitative) .. .. .	5.70
C.40	Digoxin .. .. .	7.11
C.41	Anti-epileptic agents .. .. .	7.11
C.42	Theophylline .. .. .	6.47
C.43	Serum cortisol (maximum 2) .. .. .	5.70
C.44	Urine Cortico-steroids (one fee only) .. .. .	5.70
C.45	Bence-Jones protein in urine:	
	(a) Electrophoresis of concentrated urine .. .. .	13.15
	(b) Immuno-electrophoresis of concentrated urine to detect specific light chains (only if (a) is positive) .. .. .	32.88
C.46	Catecholamines (quantitative) .. .. .	5.70
C.47	Vanillylmandelic acid .. .. .	5.70
C.48	Chorionic gonadotrophin (including pregnancy tests):	
	(a) Screen .. .. .	5.70
	(b) Titre for tumour monitoring .. .. .	5.70
C.49	Urinary amino acid chromatography .. .. .	2.85
C.50	Hydroxy indolacetic acid .. .. .	5.70
C.51	Oestriol, plasma/urine (one fee only) .. .. .	5.70
C.52	Urinary calculus analysis .. .. .	2.85
C.53	Faeces fat:	
	(a) Qualitative .. .. .	0.71
	(b) Quantitative .. .. .	5.70
C.54	Faeces occult blood .. .. .	0.71
C.55	Faeces trypsin .. .. .	2.14

## BIOCHEMICAL FUNCTION TESTS

C.56	Urine concentration and dilution tests .. .. .	1.42
C.57	Creatinine clearance test .. .. .	5.17
C.58	Xylose absorption test .. .. .	5.70
C.59	Glucose tolerance test .. .. .	19.41

## MICROBIOLOGY

D.1	Skin/wound/pus swab .. .. .	16.82
D.2	Skin—mycology .. .. .	11.65
D.3	Throat swab .. .. .	11.65
D.4	Ear swab .. .. .	16.82
D.5	Nasal swab .. .. .	12.93
D.6	Sputum (excluding TB) .. .. .	18.12
D.7	Sputum for TB .. .. .	15.53
D.8	Other sites for TB—specify .. .. .	15.53
D.9	Gastric aspirate for TB .. .. .	15.53
D.10	Faeces or Rectal swab for enteric pathogens .. .. .	25.89
D.11	Rectal swab for STD .. .. .	18.12

## SCHEDULE—continued

Code	Title	§
D.12	Peri-anal swab .. .. .	18.12
D.13	Vaginal swab .. .. .	18.12
D.14	Cervical swab .. .. .	18.12
D.15	Urethral swab .. .. .	18.12
D.16	Blood culture .. .. .	20.70
D.17	Seminal fluid—fertility .. .. .	5.17
D.18	Seminal fluid—post vas .. .. .	3.88
D.19	Eye swab .. .. .	14.24
D.20	Aspirates .. .. .	18.12
D.21	Ova and cysts .. .. .	2.59
D.22	Other .. .. .	16.82
D.23	Film examination for malaria, filaria, or gonococci .. .. .	1.42
D.24	Concentrated film examination for filaria .. .. .	2.85

## SEROLOGY AND IMMUNOLOGY

E.1	(a) Tuberculin test .. .. .	2.14
	(b) Other skin tests for cell mediated immunity .. .. .	2.14
E.2	Skin tests (immediate hypersensitivity tests) (maximum 10) .. .. .	2.85
E.3	Auto-immune disease:	
	(a) Anti-nuclear antibody (one only) .. .. .	4.27
	(b) Titre (only if (a) is positive) .. .. .	4.27
	(c) Thyroid (maximum 2) .. .. .	2.85
	(d) Rheumatoid factors (maximum 2) .. .. .	2.85
E.4	Anti streptococcal antibodies (maximum 3) .. .. .	2.85
E.5	C-reactive protein test screen .. .. .	0.71
E.6	Paul Bunnell or equivalent .. .. .	4.27
E.7	Syphilis:	
	(a) VDRL or other reagin test (1 only) .. .. .	1.42
	(b) Specific antibody test (1 only) .. .. .	1.42
	(c) Confirmatory specific antibody test (only if (a) or (b) is positive or equivocal or there are special clinical indications) .. .. .	4.27
E.8	Hydatids antibody (maximum 2) .. .. .	2.85
E.9	Salmonella agglutination tests (maximum 5 per specimen) .. .. .	1.42
E.10	Leptospira agglutination:	
	(a) Screen Test .. .. .	5.70
	(b) Specific antibody tests (maximum 8) (only if (a) is positive) .. .. .	2.85
E.11	Toxoplasma antibodies:	
	(a) IgG antibody titre (paired sera only) .. .. . each	2.85
	(b) IgM antibody titre .. .. .	2.85
E.12	(a) Hepatitis Bs antigen .. .. .	2.85
	(b) Anti HBs .. .. .	8.59
E.13	Rubella antibodies:	
	(a) Immune Status .. .. .	3.95
	(b) Titre on paired sera .. .. . each	2.85

## SCHEDULE—continued

<i>Code</i>	<i>Title</i>	<i>£</i>
E.14	CM virus: Specific antibody titre (paired sera only) .. .. .	each 2.85
E.15	Brucella antibodies (maximum 3) .. .. .	2.85
MORBID HISTOLOGY AND CYTOLOGY		
F.1	Histological examination per case:	
	(a) Single specimen (minor) .. .. .	14.24
	(b) Two specimens (intermediate) .. .. .	28.41
	(c) Three or more specimens (major) .. .. .	42.65
	(d) Frozen section (extra) .. .. .	14.24
F.2	Cytological examination:	
	(a) Cervical smears (per case) .. .. .	5.70
	(b) Other cytological examinations .. .. .	11.39
F.3	Frozen section and/or smear during surgery (including fine needle aspirates) .. .. .	42.65
GROUP TESTS		
G.1	Liver function tests:	
	(a) Bilirubin	
	(b) Alkaline phosphatase	
	(c) AST	
	(d) ALT	
	(e) Total protein, albumin, and globulin	
	(f) GGT .. .. .	13.59
G.2	Myocardial enzymes:	
	(a) AST	
	(b) LDH	
	(c) CPK .. .. .	6.80
G.3	Electrolytes:	
	(a) Sodium	
	(b) Potassium .. .. .	5.17
G.4	Lipid tests:	
	(a) Cholesterol	
	(b) Triglycerides .. .. .	4.53
G.5	Thyroid function tests:	
	(a) Thyroxine (T <sub>4</sub> ) and T <sub>3</sub> resin uptake	
or	(b) Free thyroxine .. .. .	6.80
G.6	Antenatal group:	
	(a) Complete blood count (red and white cells, haemoglobin, MCV, differential leucocyte count)	
	(b) Antibodies	
	(c) A.B.O.	
	(d) Rh blood group	
	(e) Screening test for syphilis .. .. .	10.03
G.7	Neonatal group:	
	(a) Hb	
	(b) PCV	
	(c) Blood film	
	(d) Coombs	

SCHEDULE—*continued*

<i>Code</i>	<i>Title</i>	<i>₹</i>
	(e) Bilirubin	
	(f) A.B.O.	
	(g) Rh blood group .. .. .	8.87
G.8	Coagulation screen:	
	(a) Complete blood count	
	(b) Platelets	
	(c) Prothrombin estimation	
	(d) PTTK	
	(e) Bleeding time and thrombin clotting time ..	14.11
G.9	Blood gases:	
	(a) pH	
	(b) pO <sub>2</sub>	
	(c) pCO <sub>2</sub> .. .. .	11.65

## URINES

H.1	Microscopy, glucose and protein, culture, bacterial count, and antibacterial substances .. .. .	12.30
H.2	Urine for TB .. .. .	15.53.”

P. G. MILLEN,  
Clerk of the Executive Council.

---

## EXPLANATORY NOTE

*This note is not part of the regulations, but is intended to indicate their general effect.*

These regulations, which come into force on 1 October 1986, prescribe a new scale of fees payable under the Social Security (Laboratory Diagnostic Services) Regulations 1981 by the Department of Health for laboratory diagnostic services.

---

Issued under the authority of the Regulations Act 1936.  
Date of notification in *Gazette*: 25 September 1986.  
These regulations are administered in the Department of Health.