

College of Dental Surgeons of Saskatchewan

2024 ABBREVIATED FEE GUIDE

(Refer to complete Guide for items not listed below or for detailed code descriptions.)

		Code	Sug. Fee
DIAGNOSTIC			
Complete Oral Exam	- primary dentition	01101	65.00
	- mixed dentition	01102	97.00
	- permanent dentition	01103	128.00
Standard Oral Examination (or Recall)		01202	42.00
Specific Oral Examination		01204	51.00
Emergency Oral Examination		01205	62.00
Radiographs	- complete series	02102	172.00
	- single image	02111	27.00
	- two images	02112	36.00
	- three images	02113	46.00
	- four images	02114	56.00
Panoramic image	- single image	02601	85.00
PREVENTIVE			
Polishing	- one unit of time	11101	42.00
Scaling	- one unit of time	11111	52.00
Fluoride Treatment	- varnish	12113	31.00
Sealants	- single tooth	13401	33.00
	- each additional tooth in same quadrant	13409	27.00
Space Maintainer, Band Type	- fixed, unilateral	15101	157.00 + LAB
	- fixed, bilateral	15103	261.00 + LAB
Occlusal Adjustment / Equilibration		16511	123.00 /U
RESTORATION			
Caries Control	- first tooth	20111	131.00
	- each additional tooth in same quadrant	20119	131.00
AMALGAM RESTORATIONS (non bonded)			
Primary Teeth	- one surface	21111	153.00
	- two surfaces	21112	207.00
	- three surfaces	21113	248.00
	- four surfaces	21114	297.00
	- five surfaces or maximum surfaces per tooth	21115	357.00
Permanent Anterior & Bicuspid Teeth	- one surface	21211	180.00
	- two surfaces	21212	243.00
	- three surfaces	21213	292.00
	- four surfaces	21214	350.00
	- five surfaces or maximum surfaces per tooth	21215	420.00
Permanent Molar Teeth	- one surface	21221	196.00
	- two surfaces	21222	265.00
	- three surfaces	21223	318.00
	- four surfaces	21224	381.00
	- five surfaces or maximum surfaces per tooth	21225	458.00
Retentive Pins	- one pin	21401	33.00
	- two pins	21402	52.00
	- three pins	21403	70.00
TOOTH COLOURED RESTORATIONS (bonded technique)			
Permanent Anteriors	- one surface	23111	164.00
	- two surfaces	23112	221.00
	- three surfaces	23113	265.00
	- four surfaces	23114	318.00
	- five surfaces or maximum surfaces per tooth	23115	382.00
Permanent Bicuspids	- one surface	23311	190.00
	- two surfaces	23312	256.00
	- three surfaces	23313	307.00
	- four surfaces	23314	369.00
	- five surfaces or maximum surfaces per tooth	23315	442.00

Permanent Molar Teeth	- one surface		23321	206.00
	- two surfaces		23322	279.00
	- three surfaces		23323	335.00
	- four surfaces		23324	401.00
	- five surfaces or maximum surfaces per tooth		23325	482.00
TOOTH COLOURED RESTORATIONS, VENEER APPLICATIONS				
Non-Prefabricated, Direct Buildup - Bonded			23122	307.00
CROWNS (single restorations)				
Porcelain / Ceramic / Polymer Glass Fused to Metal Base			27211	992.00 + LAB
Cast Metal			27301	992.00 + LAB
Prefabricated Metal Crown	- primary anterior		22201	234.00
	- primary posterior		22211	234.00
Posts, Cast Metal (including core) as a Separate Procedure, Single Section			25711	508.00 + LAB
Posts, Prefabricated Retentive, One Post			25731	243.00 + EXP
Posts, Prefabricated, with Non-bonded Core for Crown Restoration				
	- with composite core + pins, where applicable		25754	I.C. + EXP
ENDODONTICS				
Pulpotomy (separate emergency procedure)				
	- permanent anterior and bicuspid teeth, excl. final restoration		32221	166.00
Root Canals, Permanent Teeth / Retained Primary Teeth (uncomplicated)				
	- one canal		33111	658.00
	- two canals		33121	896.00
	- three canals		33131	1121.00
	- four canals or more		33141	1294.00
PERIODONTICS				
Root Planing			43421	52.00 /U
PROSTHODONTICS - REMOVABLE				
Dentures, Complete, Standard		- Maxillary	51101	1100.00 + LAB
		- Mandibular	51102	1198.00 + LAB
Partial Dentures - Cast Frame / Connector				
		- Maxillary	53201	1136.00 + LAB
		- Mandibular	53202	1136.00 + LAB
Minor Denture Adjustments			54201	105.00 /U+LAB
Relining Dentures (complete)		- direct reline		
		- Maxillary	56211	273.00
		- Mandibular	56212	273.00
	- processed reline	- Maxillary	56231	322.00 + LAB
		- Mandibular	56232	322.00 + LAB
ORAL SURGERY				
Surgical Removal of:				
- Erupted teeth	- single tooth, uncomplicated		71101	173.00
	- each additional in same quadrant		71109	138.00
	- complicated, requiring surgical flap		71201	293.00
- Impacted teeth	- soft tissue coverage		72111	307.00
	- partial bone coverage		72211	423.00
	- complete bone coverage		72221	563.00

Important: The abbreviated suggested guide provides some common dental procedures and suggested fees. This may not cover your specific treatment needs or the actual cost of your care. Dentists determine their own treatment fees for the services they provide. Talk to your dentist for more details on your treatment options and any associated costs.