



New Medicare Benefits Schedule (MBS) Items 30642: Radical Orchidectomy

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What does the new procedure involve?

MBS item 30642 covers unilateral, radical orchidectomy, or the surgical removal of testicle and spermatic cord with or without the insertion of testicular prosthesis. The item can be claimed twice if bilateral orchidectomy is clinically indicated. The service is generally performed as part of treatment for testicular cancer.

Before the addition of this item, the service was performed using a range of urological and surgical MBS items, most commonly items 30644 (exploration of the spermatic cord) or 30641 (orchidectomy, simple or subcapsular). The new item's schedule fee is the same as for item 30644.

What are the patient eligibility requirements?

There are no patient restrictions.

Fee: \$521.25; **MBS benefit:** 75% = \$390.95

This item can be claimed with items from Group T9 Assistance at Operations and Group T10 Relative Value Guide for Anaesthesia.

Where can the procedure take place?

The procedure can be performed only in hospital.

Relevant organisations

- Australian College of Rural and Remote Medicine
- Australian Medical Association
- The Royal Australasian College of Surgeons
- Urological Society of Australia and New Zealand

Find out more

For details of the 1 May 2017 MBS changes, please refer to [Health Insurance Legislation Amendment \(2017 Measures No. 1\) Regulations 2017](#) (click on the 'Explanatory Statement' tab) or visit [MBS Online](#). See the [Medical Services Advisory Committee's website](#) for more information about the committee's recommendation to list the service.