

MUNICÍPIO DE FRANCA				
SECRETARIA MUNICIPAL DE SAÚDE				
Credenciamento 05/2022 - Relação de Procedimentos que sofrerão mudança de valor com referência a Tabela SUS Paulista				
Cod SIGTAP	Tipo Proc. SUS	Procedimentos	\$ Tab SUS MS	\$ Tab Paulista
201010410	Hospitalar	BIÓPSIA DE PRÓSTATA VIA TRANSRETAL	R\$ 202,81	R\$ 608,43
201010410	Ambulatorial	BIÓPSIA DE PRÓSTATA VIA TRANSRETAL	R\$ 202,81	R\$ 405,62
201010470	Ambulatorial	BIÓPSIA DE TIREOIDE OU PARATIREOIDE - PAAF	R\$ 23,73	R\$ 47,46
205010016	Ambulatorial	ECOCARDIOGRAFIA DE ESTRESSE	R\$ 165,00	R\$ 330,00
205010024	Ambulatorial	ECOCARDIOGRAFIA TRANSESOFOGICA	R\$ 165,00	R\$ 330,00
205010032	Ambulatorial	ECOCARDIOGRAFIA TRANSTORACICA	R\$ 67,86	R\$ 135,72
205010040	Ambulatorial	ULTRASSONOGRAMA DOPPLER COLORIDO DE VASOS	R\$ 39,60	R\$ 79,20
205020038	Ambulatorial	ULTRASSONOGRAMA DE ABDÔMEN SUPERIOR	R\$ 24,20	R\$ 48,40
205020046	Ambulatorial	ULTRASSONOGRAMA DE ABDOMEN TOTAL	R\$ 37,95	R\$ 75,90
205020054	Ambulatorial	ULTRASSONOGRAMA DE APARELHO URINÁRIO	R\$ 24,20	R\$ 48,40
205020062	Ambulatorial	ULTRASSONOGRAMA DE ARTICULACAO	R\$ 24,20	R\$ 48,40
205020070	Ambulatorial	ULTRASSONOGRAMA DE BOLSA ESCROTAL	R\$ 24,20	R\$ 48,40
205020089	Ambulatorial	ULTRASSONOGRAMA DE GLOBO OCULAR / ORBITA (MONOCULAR)	R\$ 24,20	R\$ 48,40
205020097	Ambulatorial	ULTRASSONOGRAMA MAMARIA BILATERAL	R\$ 24,20	R\$ 48,40
205020100	Ambulatorial	ULTRASSONOGRAMA DE PROSTATA POR VIA ABDOMINAL	R\$ 24,20	R\$ 48,40
205020119	Ambulatorial	ULTRASSONOGRAMA DE PROSTATA (VIA TRANSRETAL)	R\$ 24,20	R\$ 48,40
205020127	Ambulatorial	ULTRASSONOGRAMA DE TIREOIDE	R\$ 24,20	R\$ 48,40
205020143	Ambulatorial	ULTRASSONOGRAMA OBSTETRICA	R\$ 24,20	R\$ 48,40
205020160	Ambulatorial	ULTRASSONOGRAMA PELVICA (GINECOLOGICA)	R\$ 24,20	R\$ 48,40
205020178	Ambulatorial	ULTRASSONOGRAMA TRANSFONTANELA	R\$ 24,20	R\$ 48,40
205020186	Ambulatorial	ULTRASSONOGRAMA TRANSVAGINAL	R\$ 24,20	R\$ 48,40
206110044	Ambulatorial	TOMOGRAMA COMPUTADORIZADA DE FACE/SEIOS DA FACE/ARTICULAÇÕES TEMPORO-MANDIBULARES	R\$ 86,75	R\$ 130,13
207010013	Ambulatorial	ANGIORESSONANCIA CEREBRAL	R\$ 268,75	R\$ 403,13
208080040	Ambulatorial	LINFOCINTILOGRAFIA	R\$ 141,33	R\$ 169,60
209010029	Ambulatorial	COLONOSCOPIA (COLOSCOPIA)	R\$ 112,66	R\$ 225,32
209010037	Ambulatorial	ESOFAGOGASTRODUODENOSCOPIA	R\$ 48,16	R\$ 96,32
209010045	Ambulatorial	LAPAROSCOPIA	R\$ 40,37	R\$ 80,74
209010053	Ambulatorial	RETOSIGMOIDOSCOPIA	R\$ 23,13	R\$ 46,26
209010061	Ambulatorial	VIDEOLAPAROSCOPIA	R\$ 95,00	R\$ 190,00
209030011	Ambulatorial	HISTEROSCOPIA CIRÚRGICA	R\$ 76,50	R\$ 153,00
211020010	Ambulatorial	CATETERISMO CARDIACO	R\$ 730,04	R\$ 1.095,06
211020044	Ambulatorial	MONITORAMENTO PELO SISTEMA HOLTHER 24 HS (3 CANAIS)	R\$ 30,00	R\$ 60,00
211020052	Ambulatorial	MONITORIZACAO AMBULATORIAL DE PRESSAO ARTERIAL (M.A.P.A)	R\$ 10,07	R\$ 20,14
211020060	Ambulatorial	TESTE DE ESFORCO / TESTE ERGOMETRICO	R\$ 30,00	R\$ 60,00
211040045	Ambulatorial	HISTEROSCOPIA (DIAGNOSTICA)	R\$ 25,00	R\$ 50,00
211050067	Ambulatorial	ELETROMIOGRAMA (EMG)	R\$ 27,00	R\$ 54,00
211060186	Ambulatorial	RETINOGRAMA FLUORESCENTE BINOCULAR	R\$ 64,00	R\$ 96,00
211060267	Ambulatorial	TOPOGRAFIA COMPUTADORIZADA DE CÔRNEA	R\$ 24,24	R\$ 36,36
404010024	Hospitalar	AMIGDALECTOMIA	R\$ 306,57	R\$ 919,71
404010032	Hospitalar	AMIGDALECTOMIA COM ADENOIDECTOMIA	R\$ 337,22	R\$ 1.011,66
405010036	Hospitalar	DACRIOCISTORRINOSTOMIA	R\$ 681,87	R\$ 2.100,16
405010036	Ambulatorial	DACRIOCISTORRINOSTOMIA	R\$ 681,87	R\$ 954,62
405010052	Ambulatorial	EPIPLACAO A LASER	R\$ 45,00	R\$ 63,00
405010060	Ambulatorial	EPIPLACAO DE CILIOS	R\$ 22,93	R\$ 32,10
405010117	Hospitalar	RECONSTITUICAO DE CANAL LACRIMAL	R\$ 689,66	R\$ 2.124,15
405010168	Ambulatorial	SONDAGEM DE VIAS LACRIMAIS	R\$ 22,93	R\$ 32,10
405010192	Ambulatorial	TRATAMENTO CIRURGICO DE TRIQUIASE C/ OU S/ ENXERTO	R\$ 278,90	R\$ 390,46
405030045	Ambulatorial	FOTOCOAGULAÇÃO A LASER	R\$ 107,61	R\$ 150,65
405030053	Ambulatorial	INJECAO INTRA-VITREO	R\$ 82,28	R\$ 115,19
405030134	Hospitalar	VITRECTOMIA ANTERIOR	R\$ 381,08	R\$ 1.173,73
405030134	Ambulatorial	VITRECTOMIA ANTERIOR	R\$ 381,08	R\$ 533,51
405030142	Hospitalar	VITRECTOMIA POSTERIOR	R\$ 2.667,29	R\$ 8.215,25
405030177	Hospitalar	VITRECTOMIA POSTERIOR COM INFUSAO DE PERFLUOCARBONO/OLEO DE SILICONE/ENDOLASER	R\$ 4.701,84	R\$ 14.481,67
405030193	Hospitalar	PAN-FOTOCOAGULACAO DE RETINA A LASER	R\$ 430,46	R\$ 1.325,82
405030193	Ambulatorial	PAN-FOTOCOAGULAÇÃO DE RETINA A LASER	R\$ 430,46	R\$ 602,64
405050020	Ambulatorial	CAPSULOTOMIA A YAG LASER	R\$ 112,77	R\$ 157,88
406020566	Hospitalar	TRATAMENTO CIRURGICO DE VARIZES (BILATERAL)	R\$ 833,48	R\$ 2.625,46
406020574	Hospitalar	TRATAMENTO CIRURGICO DE VARIZES (UNILATERAL)	R\$ 692,19	R\$ 2.180,40
407010084	Hospitalar	ESOFAGOPLASTIA / GASTROPLASTIA	R\$ 794,88	R\$ 3.060,29
407010092	Hospitalar	ESOFAGORRAFIA CERVICAL	R\$ 787,65	R\$ 3.032,45
407010297	Hospitalar	TRATAMENTO CIRURGICO DE REFLUXO GASTROESOFAGICO	R\$ 766,06	R\$ 2.949,33
407030026	Hospitalar	COLECISTECTOMIA	R\$ 996,34	R\$ 4.483,53
407030034	Hospitalar	COLECISTECTOMIA VIDEOLAPAROSCOPICA	R\$ 992,45	R\$ 4.479,19
407030042	Hospitalar	COLECISTOSTOMIA	R\$ 632,50	R\$ 2.435,13
407030050	Hospitalar	COLEDOCOPLASTIA	R\$ 569,39	R\$ 2.192,15
407040048	Hospitalar	HERNIOPLASTIA DIAFRAGMATICA (VIA ABDOMINAL)	R\$ 808,13	R\$ 3.111,30
407040064	Hospitalar	HERNIOPLASTIA EPIGASTRICA	R\$ 801,73	R\$ 3.086,66
407040080	Hospitalar	HERNIOPLASTIA INCISIONAL	R\$ 539,92	R\$ 2.078,69
407040099	Hospitalar	HERNIOPLASTIA INGUINAL (BILATERAL)	R\$ 610,06	R\$ 2.348,73
407040102	Hospitalar	HERNIOPLASTIA INGUINAL / CRURAL (UNILATERAL)	R\$ 637,97	R\$ 2.456,18
407040110	Hospitalar	HERNIOPLASTIA RECIDIVANTE	R\$ 596,33	R\$ 2.295,87
407040129	Hospitalar	HERNIOPLASTIA UMBILICAL	R\$ 434,99	R\$ 1.674,71
407040226	Hospitalar	REPARACAO DE OUTRAS HERNIAS	R\$ 382,19	R\$ 1.471,43
408010142	Hospitalar	REPARO DE ROTURA DO MANGUITO ROTADOR (INCLUI PROCEDIMENTOS DESCOMPRESSIVOS)	R\$ 423,51	R\$ 1.376,41

409010170	Hospitalar	INSTALACAO ENDOSCOPICA DE CATETER DUPLO J	R\$ 218,68	R\$ 699,78
409010200	Hospitalar	NEFRECTOMIA PARCIAL	R\$ 1.205,37	R\$ 3.857,18
409010219	Hospitalar	NEFRECTOMIA TOTAL	R\$ 1.222,43	R\$ 3.911,78
409010227	Hospitalar	NEFROLITOTOMIA	R\$ 1.171,72	R\$ 3.749,50
409010235	Hospitalar	NEFROLITOTOMIA PERCUTANEA	R\$ 1.147,75	R\$ 3.672,80
409010294	Hospitalar	NEFROSTOMIA PERCUTANEA	R\$ 859,87	R\$ 2.751,58
409010316	Hospitalar	PIELOLITOTOMIA	R\$ 658,19	R\$ 2.106,21
409010324	Hospitalar	PIELOPLASTIA	R\$ 652,16	R\$ 2.086,91
409010561	Hospitalar	URETEROLITOTOMIA	R\$ 1.097,07	R\$ 3.510,62
409010570	Hospitalar	URETEROPLASTIA	R\$ 628,96	R\$ 2.012,67
409010596	Hospitalar	URETEROLITOTRIPSIA TRANSURETEROSCOPICA	R\$ 756,15	R\$ 2.419,68
409020133	Hospitalar	URETROPLASTIA AUTOGENA	R\$ 469,55	R\$ 1.502,56
409020141	Hospitalar	URETROPLASTIA HETEROGENEA	R\$ 410,75	R\$ 1.314,40
409020176	Hospitalar	URETROTOMIA INTERNA	R\$ 319,92	R\$ 1.023,74
409030023	Hospitalar	PROSTATECTOMIA SUPRAPUBICA	R\$ 1.001,71	R\$ 3.205,47
409030031	Hospitalar	PROSTATOVESICULECTOMIA RADICAL	R\$ 1.088,40	R\$ 3.482,88
409030040	Hospitalar	RESSECCAO ENDOSCOPICA DE PROSTATA	R\$ 851,58	R\$ 2.725,06
409050083	Hospitalar	POSTECTOMIA	R\$ 219,12	R\$ 701,18
409060100	Hospitalar	HISTERECTOMIA (POR VIA VAGINAL)	R\$ 658,83	R\$ 2.108,26
409060119	Hospitalar	HISTERECTOMIA C/ ANEXECTOMIA (UNI / BILATERAL)	R\$ 1.103,64	R\$ 3.531,65
409060127	Hospitalar	HISTERECTOMIA SUBTOTAL	R\$ 781,93	R\$ 2.502,18
409060135	Hospitalar	HISTERECTOMIA TOTAL	R\$ 907,93	R\$ 2.905,38
409060178	Hospitalar	HISTEROSCOPIA CIRURGICA C/ RESSECTOSCOPIO	R\$ 173,33	R\$ 554,66
409070050	Hospitalar	COLPOPERINEOPLASTIA ANTERIOR E POSTERIOR	R\$ 472,43	R\$ 1.511,78
409070068	Hospitalar	COLPOPERINEOPLASTIA POSTERIOR	R\$ 372,54	R\$ 1.192,13
409070076	Hospitalar	COLPOPERINEORRAFIA NAO OBSTETRICA	R\$ 372,54	R\$ 1.192,13
409070084	Hospitalar	COLPOPLASTIA ANTERIOR	R\$ 372,54	R\$ 1.192,13
410010073	Hospitalar	PLASTICA MAMARIA FEMININA NAO ESTETICA	R\$ 514,17	R\$ 1.645,34
410010081	Hospitalar	PLASTICA MAMARIA MASCULINA	R\$ 450,64	R\$ 1.442,05
410010090	Hospitalar	PLASTICA MAMARIA RECONSTRUTIVA POS MASTECTOMIA C/ IMPLANTE DE PROTESE	R\$ 315,92	R\$ 1.010,94