

# 社会保険歯科診療報酬点数早見表(1)

(平成 26 年 4 月 1 日 実施)

日本歯科医師会

<注> 下記点数のうちゴシックは所定点数，（ ）の点数は6歳未満の乳幼児又は著しく歯科診療が困難な者を診療した場合の点数。

| 歯科疾患管理料を算定した場合<br>再度の初診は治療終了後2ヶ月以降<br>《※印は施設基準届出が必要》 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 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| 外来環※                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 時間外                                    | 休日                                         | 深夜                                                                                                                                                                                         | 乳    | 乳時間外                                                                                                                                                                                                                                                                                                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                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 乳＋特導    | 特連※        | 特地             |         |                                                                                                                          |       |            |          |                                        |    |                                                                                                                                      |     |     |         |         |                                                                                                                                                  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                                                                                                                                                                                                                                                                                                                                                                                                                                         | 休日・深夜を除く<br>標準時間外                      | 日曜・祝日<br>12/29～1/3                         | 午後10時～<br>午前6時                                                                                                                                                                             | 6歳未満 | 乳幼児における時間外、休日、深夜の診療                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |      |        | 著しく治療が困難な者                                               |        | 治療環境に円滑に適應<br>できるようにする                                                                                                                                                                                                                                                                                                                                                                                                                                                |         | 特連医療<br>機関 | 特連を除く<br>歯科診療所 |         |                                                                                                                          |       |            |          |                                        |    |                                                                                                                                      |     |     |         |         |                                                                                                                                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| 初診                                                   | 歯科初診料……………234                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                        | ＋26                                        | ＋85                                                                                                                                                                                        | ＋250 | ＋480                                                                                                                                                                                                                                                                                                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                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ＋215    | ＋250       | ＋290           | ＋100    | ＋100                                                                                                                     |       |            |          |                                        |    |                                                                                                                                      |     |     |         |         |                                                                                                                                                  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| 再診                                                   | 歯科再診料 …… 45 明細＋1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                        | ＋4                                         | ＋65                                                                                                                                                                                        | ＋190 | ＋420                                                                                                                                                                                                                                                                                                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                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ＋185    |            |                |         |                                                                                                                          |       |            |          |                                        |    |                                                                                                                                      |     |     |         |         |                                                                                                                                                  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| 医学<br>管理                                             | 《※印は算定に文書による情報提供が必要な場合》                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         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|                                                      | 歯科疾患管理料※（歯管）……………110<br>（4月以内に1回以上文書提供、SPTが4月超の場合を除く）<br><br>洗口指導加算※（4歳以上13歳未満、修復終了後）……………＋40<br>（注）う蝕多発傾向者が対象<br><br>歯科衛生実地指導料1※（月1回、15分以上指導）……………80<br><br>歯科衛生実地指導料2※<br>（月1回15分以上又は合計15分以上）……………100<br>（歯科診療特別対応連携施設・地域歯科診療支援病院）<br><br>新製有床義歯管理料※（装着月1回に限る） $\left\{ \begin{array}{l} \text{困難} \cdots\cdots 230 \\ \text{上記以外} \cdots 190 \end{array} \right.$                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                        |                                            |                                                                                                                                                                                            |      | 周術期口腔機能管理計画策定料※……………300<br>（手術等に係る一連の治療中1回）<br><br>周術期口腔機能管理料（Ⅰ）※<br>手術前（1回に限り）……………280<br>手術後（3月以内、計3回まで）……………190<br><br>周術期口腔機能管理料（Ⅱ）※<br>手術前（1回に限り）……………500<br>手術後（3月以内、月2回まで）……………300<br><br>周術期口腔機能管理料（Ⅲ）※（放射線治療又は化学療法を受ける患者）<br>（月1回）……………190                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |      |        |                                                          |        | 診療情報提供料（Ⅰ）※……………250<br>歯科診療が困難な者又は歯科訪問診療料算定患者を、<br>以下に紹介した場合の加算……………＋100<br>歯科診療特別対応連携施設、地域歯科診療支援病院、<br>医科保険医療機関、指定居宅介護支援事業者<br>歯科診療特別対応連携施設又は地域歯科診療支援病院が<br>歯科診療実施保険医療機関に紹介した場合の加算……………＋100<br>診療情報提供料（Ⅱ）※……………500<br>歯科特定疾患療養管理料（月2回まで）……………150<br>共同療養指導計画加算※……………＋100<br>歯科治療総合医療管理料（月1回）……………140<br>退院時共同指導料Ⅰ※（在宅療養支援歯科診療所）（1回のみ）……………600<br>（上記以外の歯科診療所）（1回のみ）……………300<br>特別管理指導加算……………＋200<br>薬剤情報提供料※（月1回、処方内容変更の場合はその都度）……………10<br>患者の求めに応じて手帳に記載した場合……………＋3 |         |            |                |         |                                                                                                                          |       |            |          |                                        |    |                                                                                                                                      |     |     |         |         |                                                                                                                                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| 検<br>査                                               | 歯周病検査（1口腔単位）（1月以内の検査2回目以降は50/100の算定）                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                        |                                            |                                                                                                                                                                                            |      | 歯周病部分的再評価検査（歯周外科手術後1歯1回に限り）……………15                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |      |        |                                                          |        | ブリッジ平行測定（1装置につき）                                                                                                                                                                                                                                                                                                                                                                                                                                                      |         |            |                |         |                                                                                                                          |       |            |          |                                        |    |                                                                                                                                      |     |     |         |         |                                                                                                                                                  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|                                                      | <table><tr><td></td><td>1～9歯</td><td>10～19歯</td><td>20歯以上</td></tr><tr><td>歯周基本検査</td><td>50</td><td>110</td><td>200</td></tr><tr><td>歯周精密検査</td><td>100</td><td>220</td><td>400</td></tr><tr><td>混合歯列期歯周病検査</td><td>40</td><td colspan="2">（ブラークの付着状況とプロービング時の出血、歯周ポケット測定のうち1つ以上）</td></tr></table>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            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                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 110     | 200        | 歯周精密検査         | 100     | 220                                                                                                                      | 400   | 混合歯列期歯周病検査 | 40       | （ブラークの付着状況とプロービング時の出血、歯周ポケット測定のうち1つ以上） |    | 口腔内写真検査（1枚につき、1回につき5枚を限度）……………10<br><br>電氣的根管長測定検査（EMR）（1根管目）……………30<br><br>2根管目から1根管につき……………＋15<br><br>細菌簡易培養検査（S培）（1歯1回につき）……………60 |     |     |         |         | $\left\{ \begin{array}{l} \text{支台歯とボンテック数の合計が5歯以下} \cdots\cdots\cdots 50 \\ \text{支台歯とボンテック数の合計が6歯以上} \cdots\cdots\cdots 100 \end{array} \right.$<br><br>顎運動関連検査（1装置につき）……………380<br><br>$\left\{ \begin{array}{l} \text{下顎運動路描記法（MMG）、ゴシックアーチ描記法（GoA）} \\ \text{パントグラフ描記法（Ptg）、チェックバイト検査（ChB）} \end{array} \right\}$ の場合 |       |         |         |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  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|                                                      | 歯周基本検査                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          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| 歯周精密検査                                               | 100                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             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| 混合歯列期歯周病検査                                           | 40                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | （ブラークの付着状況とプロービング時の出血、歯周ポケット測定のうち1つ以上） |                                            |                                                                                                                                                                                            |      |                                                                                                                                                                                                                                                                                                     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| 画<br>像<br>診<br>断                                     | 単純撮影（Ⅰ）（フィルム料含む）（ ）の点数は症状確認<br>標準型 48(38) 咬合型 59(49) 全顎10枚法 438<br>小児型 47(37)、48(38) 咬翼型 59(49) 全顎14枚法 449<br>3歳未満の乳幼児には撮影料15/100加算                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                        |                                            |                                                                                                                                                                                            |      | 単純撮影（Ⅱ）（スタタスエックス2等）（フィルム料含む）<br>スタタスエックス2（カビネ使用）1枚……………154<br>注）フィルムの算定については、使用フィルムと<br>四ツ切フィルムとの面積比により算定する。                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |      |        |                                                          |        | パノラマ断層撮影（フィルム料含む）<br>四ツ切 312<br>オルソパントモ型（小）317（大）315<br>〔6歳未満（小）318（大）316〕                                                                                                                                                                                                                                                                                                                                                                                            |         |            |                |         | 時間外緊急院内<br>画像診断加算<br>（1日につき）<br>$\left( \begin{array}{l} \text{時間外} \\ \text{休日} \\ \text{深夜} \end{array} \right) + 110$ |       |            |          |                                        |    |                                                                                                                                      |     |     |         |         |                                                                                                                                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|                                                      | フィルム料 標準型 2.8、咬翼型 3.9、四ツ切 6.5、小児型 2.3、3.0、咬合型 3.9、カビネ 4.2、オルソパントモ型（小）11.8（大）10.1、6歳未満1.1倍                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       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|                                                      | デジタル撮影 電子画像管理加算（フィルム料なし）エックス線 10 パノラマ 95 歯CT 120 その他 60 「電」58(48) 「パ電」402(402) 「CT電」1170(1170) 「他電」213(171)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     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| 投薬<br>注射                                             | 処方料 6種以下……………42<br>7種以上……………29<br>（3歳未満＋3）                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                        | 調剤料 1回の処方につき<br>内服・浸煎・屯服……………9<br>外用……………6 | 薬剤料 $\left( \begin{array}{l} \text{内服・浸煎（1日分の薬価）} \\ \text{屯服（1回分の薬価）－15円} \\ \text{外用（1調剤の薬価）} \\ \text{注射薬剤（1回分の薬価）} \end{array} \right) \div 10\text{円} + 1\text{点}$<br>（1点未満の端数は切り上げる） |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |      |        | 処方せん 6種以下……………68<br>7種以上……………40<br>（3歳未満＋3）<br>（一般名処方＋2） |        | 注 静脈内……………30<br>射 皮内・皮下・筋肉内……………18                                                                                                                                                                                                                                                                                                                                                                                                                                    |         |            |                |         |                                                                                                                          |       |            |          |                                        |    |                                                                                                                                      |     |     |         |         |                                                                                                                                                  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| リハ<br>ビリ                                             | 歯科口腔リハビリテーション料1 $\left\{ \begin{array}{l} 1 \text{ 有床義歯} \\ \text{（装着月以外、月1回に限る）} \\ 2 \text{ 舌接触補助床} \\ \text{（月4回を限度）} \end{array} \right. \begin{array}{l} \text{困難} \cdots\cdots 120 \\ \text{上記以外} \cdots\cdots 100 \end{array}$ ……………190                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                        |                                            |                                                                                                                                                                                            |      | 歯科口腔リハビリテーション料2……………50<br>（顎関節治療用装置装着患者、月1回を限度、<br>施設基準有）                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |      |        |                                                          |        | 摂食機能療法（1日につき）……………185<br>30分以上 $\left\{ \begin{array}{l} \cdot \text{治療開始から3月以内} \quad 1\text{日単位で算定} \\ \cdot \text{4月以上、月4回を限度} \end{array} \right.$                                                                                                                                                                                                                                                                                                                |         |            |                |         |                                                                                                                          |       |            |          |                                        |    |                                                                                                                                      |     |     |         |         |                                                                                                                                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| 処<br>置                                               | う蝕処置（1歯1回につき）……………18（27）<br>咬合調整 $\left\{ \begin{array}{l} 1\sim 9\text{歯} \cdots\cdots\cdots 40 \text{（60）} \\ 10\text{歯以上} \cdots\cdots\cdots 60 \text{（90）} \end{array} \right.$<br>残根削合（1歯1回につき）……………18（27）<br>歯髄保護処置（1歯につき） $\left\{ \begin{array}{l} \text{歯髄温存療法} \cdots\cdots 150 \text{（225）} \\ \text{直PCap} \cdots\cdots\cdots 120 \text{（180）} \\ \text{間PCap} \cdots\cdots\cdots 30 \text{（45）} \end{array} \right.$<br>早期充填処置（シーラント）（乳歯又は幼若永久歯）<br>（1歯につき、歯面清掃、前処理、材料料を含む）<br>$\left\{ \begin{array}{l} \text{複合レジン系} \cdots\cdots\cdots 135 \text{（197）} \\ \text{ガラスイオノマー系} \cdots\cdots\cdots 134 \text{（196）} \end{array} \right.$<br>除去（1歯につき） $\left\{ \begin{array}{l} \text{簡単} \cdots\cdots\cdots 16 \text{（24）} \\ \text{困難} \cdots\cdots\cdots 32 \text{（48）} \\ \text{ポスト} \cdots\cdots\cdots 54 \text{（81）} \\ \text{根管内異物} \cdots\cdots\cdots 150 \text{（225）} \end{array} \right.$<br>歯の破折片除去（麻酔の費用は別算定）……………30（45）<br>有床義歯床下粘膜調整処置（1顎1回につき）……………110（165）<br>乳幼児う蝕薬物塗布処置 $\left\{ \begin{array}{l} 3\text{歯まで} \cdots\cdots\cdots 40 \text{（60）} \\ 4\text{歯以上} \cdots\cdots\cdots 50 \text{（75）} \end{array} \right.$<br>知覚過敏処置（1口腔1回につき） $\left\{ \begin{array}{l} 3\text{歯まで} \cdots 40 \text{（60）} \\ 4\text{歯以上} \cdots 50 \text{（75）} \end{array} \right.$<br>生活歯髄切断……………230（345）<br>歯根完成期以前及び乳歯……………＋40（＋60）<br>失活歯髄切断（1歯につき）……………70（105）<br>後出血処置……………470（705）<br>6歳未満……………500（750） |                                        |                                            |                                                                                                                                                                                            |      | フッ化物歯面塗布処置（1口腔につき）<br>う蝕多発傾向者（13歳未満、3月に1回）……………80（120）<br>歯周基本治療（浸麻の費用を含む）<br>スクーリング(SC) <table><tr><td></td><td>1/2顎につき</td><td>1/2顎を増すごと</td></tr><tr><td>初回時</td><td>66 (99)</td><td>＋38（＋57）</td></tr><tr><td>2回目以降</td><td>33 (50)</td><td>＋19（＋29）</td></tr></table><br>SRP及びPCur <table><tr><td></td><td>前歯</td><td>小臼歯</td><td>大臼歯</td></tr><tr><td>初回時</td><td>60 (90)</td><td>64 (96)</td><td>72 (108)</td></tr><tr><td>2回目以降</td><td>30 (45)</td><td>32 (48)</td><td>36 (54)</td></tr></table><br>歯周病安定期治療（SPT） $\left\{ \begin{array}{l} 1\sim 9\text{歯} \cdots\cdots\cdots 200 \text{（300）} \\ 10\sim 19\text{歯} \cdots\cdots\cdots 250 \text{（375）} \\ 20\text{歯以上} \cdots\cdots\cdots 350 \text{（525）} \end{array} \right.$<br>（3月に1回、歯周外科手術後の治療間隔の短縮が必要な場合は月1回可）<br>注）歯周基本治療、咬合調整、歯清、歯周疾患処置を含む<br>周術期専門的口腔衛生処置（1口腔につき）……………80（120）<br>（衛生士が実施、術前・術後に1回限り）<br>機械的歯面清掃処置（1口腔につき）……………60（90）<br>（歯科医師又は衛生士が実施、月1回に限り、SPT算定日又は歯清を算定した翌月は不可）<br>歯周疾患処置（P処）（1口腔1回につき）……………14（21）<br>（歯周疾患の急性症状時又は歯周基本治療後で歯周ポケット<br>4mm以上である時に特定薬剤を注入した場合）<br>歯周基本治療処置（1口腔につき）……………10（15）<br>（歯周基本治療後、薬剤による洗浄、月1回・P処算定月は不可）<br>歯周治療用装置（印象、装着等を含む）（人工歯、鉤等は別算定）<br>（歯周精密検査を実施した場合に算定）<br>冠形態（1歯につき）……………50（75）<br>床義歯形態（1装置につき）……………750（1125） |      |        |                                                          |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 1/2顎につき | 1/2顎を増すごと  | 初回時            | 66 (99) | ＋38（＋57）                                                                                                                 | 2回目以降 | 33 (50)    | ＋19（＋29） |                                        | 前歯 | 小臼歯                                                                                                                                  | 大臼歯 | 初回時 | 60 (90) | 64 (96) | 72 (108)                                                                                                                                                                                                                                                                                                                  | 2回目以降 | 30 (45) | 32 (48) | 36 (54) | 口腔内外科後処置（1口腔1回につき）……………22（33）<br>口腔外外科後処置（1回につき）……………22（33）<br>暫間固定（固定源となる歯は歯数に含めない）<br>歯周外科手術を伴わない場合及び<br>歯周外科手術を予定する4歳未満……………230（345）<br>（エナメルボンドシステムの場合は200点（300点））<br>歯周外科手術を伴う場合の4歯以上及び<br>外傷性歯牙脱臼等……………530（795）<br>（エナメルボンドシステムの場合は500点（750点））<br>連続鉤固定法及びレジン床固定法……………680（1020）<br>暫間固定装置修理 $\left\{ \begin{array}{l} \text{簡単なもの} \cdots\cdots\cdots 70 \text{（105）} \\ \text{困難なもの} \cdots\cdots\cdots 220 \text{（330）} \end{array} \right.$<br>暫間固定除去（1装置につき）……………30（45）<br>線副子（1顎につき）……………680（1020）<br>$\left\{ \begin{array}{l} \text{簡単なもの} \cdots\cdots\cdots 680 \text{（1020）} \\ \text{困難なもの} \cdots\cdots\cdots 1530 \text{（2295）} \\ \text{著しく困難なもの} \cdots\cdots\cdots 2030 \text{（3045）} \end{array} \right.$<br>床副子 $\left\{ \begin{array}{l} \text{（1装置につき）} \\ \text{舌接触補助床} \left\{ \begin{array}{l} \text{新製} \cdots\cdots\cdots 2120 \text{（3180）} \\ \text{旧義歯} \cdots\cdots\cdots 620 \text{（930）} \end{array} \right. \end{array} \right.$<br>床副子調整<br>睡眠時無呼吸症候群の治療法としての咬合床……………120（180）<br>（装着後1月以内に1回）<br>咬合挙上副子の場合（月1回）……………220（330）<br>歯ぎしり咬合床（アクチバートル式以外）……………1650（2475）<br>歯ぎしり咬合床（アクチバートル式）……………2150（3225）<br>注）暫間固定、副子の点数は装着料を含む。印象採得料、<br>装着材料料は別算定。 |  |  |  |  |
|                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 1/2顎につき                                | 1/2顎を増すごと                                  |                                                                                                                                                                                            |      |                                                                                                                                                                                                                                                                                                     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|                                                      | 初回時                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 66 (99)                                | ＋38（＋57）                                   |                                                                                                                                                                                            |      |                                                                                                                                                                                                                                                                                                     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|                                                      | 2回目以降                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 33 (50)                                | ＋19（＋29）                                   |                                                                                                                                                                                            |      |                                                                                                                                                                                                                                                                                                     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(不許複製)

# 社会保険歯科診療報酬点数早見表(2)

(平成 26 年 4 月 1 日 実施)

日本歯科医師会

<注> 下記点数のうちゴシックは所定点数, ( ) の点数は6歳未満の乳幼児又は著しく歯科診療が困難な者を診療した場合の点数。

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| 手<br>術                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 抜歯手術（1歯につき）<br>乳 歯 …………… 130（195）<br>前 歯 …………… 150（225）<br>臼 歯 …………… 260（390）<br>難 抜 歯 …………… 470（705）<br>（歯根肥大・骨の癒着歯等に対する<br>骨の開さく又は歯根分離術）<br>埋伏歯 ……………1050（1575）<br>（骨性の完全埋伏歯又は水平埋伏智歯に限る）<br>下顎智歯（骨性・水平埋伏） …+100（+150）                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 口腔内消炎手術<br>智歯周囲炎の歯肉弁切除等 … 120（180）<br>歯肉膿瘍等 …………… 180（270）<br>骨膜下膿瘍、口蓋膿瘍等 230（345）<br>顎炎又は顎骨骨髓炎等<br>1/3顎未満…………… 750（1125）<br>1/2顎以上……………2600（3900）<br>全 顎……………5700（8550）<br>口腔外消炎手術（骨膜下・皮下膿瘍、蜂窩織炎等）<br>2cm未満のもの …………… 180（270）<br>2cm以上5cm未満のもの 300（450）<br>5cm以上のもの …………… 750（1125）<br>歯根嚢胞摘出手術<br>歯冠大 …………… 800（1200）<br>拇指頭大 ……………1350（2025）<br>鶏卵大 ……………2040（3060）<br>歯根端切除手術（1歯につき）（歯根端閉鎖の費用を含む）<br>〔歯科CT、手術用顕微鏡を使用〕…2000（3000）<br>〔上記以外〕……………1350（2025）<br>注）歯根端切除と歯根嚢胞摘出を同時に行った<br>場合の従たる手術は50/100算定。 | 口腔内軟組織異物（人工物）除去術<br>簡単なもの …………… 30（45）<br>困難なもの<br>浅在性のもの …………… 680（1020）<br>深在性のもの ……………1290（1935）<br>歯肉、歯槽部腫瘍手術（エプーリスを含む）<br>軟組織に局限するもの …………… 600（900）<br>硬組織に及ぶもの ……………1300（1950）<br>顎関節脱臼非観血的整復術<br>（片側）…………… 410（615）<br>歯槽骨骨折非観血的整復術<br>1～2歯 …………… 680（1020）<br>3歯以上 ……………1300（1950）<br>創傷処理（口腔内縫合術）<br>長径5cm未満（小深）……………1250（1875）<br>1/2 5cm以上10cm未満（中深）…1680（2520）<br>1/2 5cm未満（小浅）…………… 470（705）<br>1/2 5cm以上10cm未満（中浅）… 850（1275） | 歯周外科手術（1歯につき）<br>歯周ポケット搔爬術 …………… 80（120）<br>新付着手術 …………… 160（240）<br>歯肉切除手術 …………… 320（480）<br>歯肉剥離搔爬手術 …………… 630（945）<br>歯周組織再生誘導手術（GTR術）（材料料は別算定）<br>1次手術（誘導膜の固定） …… 840（1260）<br>Fop及びGTR1次手術時歯根面レーザー<br>応用加算 ……………+60（+90）<br>2次手術（非吸収性膜の除去）… 380（570）<br>歯肉弁根尖側移動術 …………… 600（900）<br>歯肉弁歯冠側移動術 …………… 600（900）<br>歯肉弁側方移動術 …………… 770（1155）<br>遊離歯肉移植術 …………… 770（1155）<br>SPT開始後の歯周外科手術は30/100で算定<br>頬、口唇、舌小帯形成術 …… 560（840）<br>腐骨除去手術<br>歯槽部に局限するもの …… 600（900）<br>顎骨（片側の1/2未満）……………1300（1950）<br>顎骨（片側の1/2以上）……………3420（5130） |                          |                                     |                       |                 |           |        |           |          |                 |          |            |               |           |             |           |           |            |          |           |          |            |           |       |            |          |          |      |          |           |          |      |     |     |      |       |     |     |     |     |     |     |      |           |     |     |     |     |     |      |     |     |     |  |     |     |  |     |     |     |     |  |     |     |  |           |     |     |  |     |     |  |                      |  |     |      |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 伝達麻酔……………42（63）<br>（下顎孔・眼窩下孔）                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 浸潤麻酔 ……………30（45）<br>（手術、120点以上の処置、特に規定する処置、歯冠形成以外で算定）                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 吸入鎮静法 30分まで……………70（105）<br>30分を超えた場合は30分又はその端数を増すごとに …+10（+15）                                                                                                                                                                                                                                                                                                                                                                              | 静脈内鎮静法…120（180）                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                          |                                     |                       |                 |           |        |           |          |                 |          |            |               |           |             |           |           |            |          |           |          |            |           |       |            |          |          |      |          |           |          |      |     |     |      |       |     |     |     |     |     |     |      |           |     |     |     |     |     |      |     |     |     |  |     |     |  |     |     |     |     |  |     |     |  |           |     |     |  |     |     |  |                      |  |     |      |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 歯<br>冠                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 補綴時診断料（1口腔につき）……………100（150）<br>注）ブリッジ、有床義歯・床裏装・追歯（増歯）が対象                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                          |                                     |                       |                 |           |        |           |          |                 |          |            |               |           |             |           |           |            |          |           |          |            |           |       |            |          |          |      |          |           |          |      |     |     |      |       |     |     |     |     |     |     |      |           |     |     |     |     |     |      |     |     |     |  |     |     |  |     |     |     |     |  |     |     |  |           |     |     |  |     |     |  |                      |  |     |      |  |  |  |
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| <table><tr><td></td><td colspan="4">金 属 冠</td><td colspan="2">非 金 属 冠</td><td rowspan="2">乳 歯 金 属 冠</td></tr><tr><td></td><td>前歯1/2冠</td><td>レジン前装金属冠</td><td>白歯1/2冠・FMC</td><td>接着Brの支台接着冠</td><td>レジン・硬質レジン</td><td>CAD/CAM冠</td></tr><tr><td>生PZ</td><td>796（1194）</td><td>796（1194）</td><td>306（459）</td><td>796（1194）</td><td>306（459）</td><td>796（1194）</td><td>120（180）</td></tr><tr><td>失PZ</td><td>636（954）</td><td>636（954）</td><td>166（249）</td><td></td><td>166（249）</td><td>636（954）</td><td>114（171）</td></tr></table><br>失活歯メタルコア加算（レジン前装金属冠、全部金属冠、非金属冠）……………+30（+45）<br>テンポラリークラウン（1歯1回）（製作、装着、装着材料料の費用を含む）…………… 34（51）<br>（前歯のレジン前装金属冠、ジャケット冠及び硬質レジンジャケット冠の場合のみ）                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 金 属 冠                    |                                     |                       |                 | 非 金 属 冠   |        | 乳 歯 金 属 冠 |          | 前歯1/2冠          | レジン前装金属冠 | 白歯1/2冠・FMC | 接着Brの支台接着冠    | レジン・硬質レジン | CAD/CAM冠    | 生PZ       | 796（1194） | 796（1194）  | 306（459） | 796（1194） | 306（459） | 796（1194）  | 120（180）  | 失PZ   | 636（954）   | 636（954） | 166（249） |      | 166（249） | 636（954）  | 114（171） |      |     |     |      |       |     |     |     |     |     |     |      |           |     |     |     |     |     |      |     |     |     |  |     |     |  |     |     |     |     |  |     |     |  |           |     |     |  |     |     |  |                      |  |     |      |  |  |  |
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|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 前歯1/2冠                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | レジン前装金属冠                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 白歯1/2冠・FMC                                                                                                                                                                                                                                                                                                                                                                                                                                  | 接着Brの支台接着冠                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | レジン・硬質レジン                | CAD/CAM冠                            |                       |                 |           |        |           |          |                 |          |            |               |           |             |           |           |            |          |           |          |            |           |       |            |          |          |      |          |           |          |      |     |     |      |       |     |     |     |     |     |     |      |           |     |     |     |     |     |      |     |     |     |  |     |     |  |     |     |     |     |  |     |     |  |           |     |     |  |     |     |  |                      |  |     |      |  |  |  |
| 生PZ                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 796（1194）                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 796（1194）                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 306（459）                                                                                                                                                                                                                                                                                                                                                                                                                                    | 796（1194）                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 306（459）                 | 796（1194）                           | 120（180）              |                 |           |        |           |          |                 |          |            |               |           |             |           |           |            |          |           |          |            |           |       |            |          |          |      |          |           |          |      |     |     |      |       |     |     |     |     |     |     |      |           |     |     |     |     |     |      |     |     |     |  |     |     |  |     |     |     |     |  |     |     |  |           |     |     |  |     |     |  |                      |  |     |      |  |  |  |
| 失PZ                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 636（954）                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 636（954）                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 166（249）                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 166（249）                 | 636（954）                            | 114（171）              |                 |           |        |           |          |                 |          |            |               |           |             |           |           |            |          |           |          |            |           |       |            |          |          |      |          |           |          |      |     |     |      |       |     |     |     |     |     |     |      |           |     |     |     |     |     |      |     |     |     |  |     |     |  |     |     |     |     |  |     |     |  |           |     |     |  |     |     |  |                      |  |     |      |  |  |  |
| 窩洞形成（KP）〔単純なもの……………60（90）<br>複雑なもの……………86（129）〕<br>う蝕歯無痛の窩洞形成加算（う蝕無痛）<br>（KPと充形が対象）……………+40（+60）<br>即時充填形成（充形）……………126（189）<br>インレー修復形成（修形）……………120（180）                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                          |                                     |                       |                 |           |        |           |          |                 |          |            |               |           |             |           |           |            |          |           |          |            |           |       |            |          |          |      |          |           |          |      |     |     |      |       |     |     |     |     |     |     |      |           |     |     |     |     |     |      |     |     |     |  |     |     |  |     |     |     |     |  |     |     |  |           |     |     |  |     |     |  |                      |  |     |      |  |  |  |
| 修<br>復                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 印象採得料（1個につき）<br>支台築造（メタルコアの印象）……………26（39）<br>単 純……………30（45）<br>連 合……………62（93）<br>咬合採得料（1個につき）……………16（24）<br>装 着 料（1個につき）<br>歯冠修復……………45（68）<br>CAD/CAM冠加算……………+45（+68）<br>装着材料料<br>歯科用合着・接着材料Ⅰ〔接着性レジンセメント（レジン系）……………17<br>ガラスアイオノマー系レジンセメント（ガラスアイオノマー系）……………14〕<br>歯科用合着・接着材料Ⅱ……………12<br>（ガラスアイオノマーセメント（接着用）、<br>接着性複合レジンセメント）<br>歯科用合着・接着材料Ⅲ…………… 4<br>（歯科用燐酸亜鉛セメント、ハイボンド燐酸亜鉛セメント、<br>カルボキシレートセメント、水硬性セメント）<br>仮着用セメント（1歯につき）…………… 4                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                          |                                     |                       |                 |           |        |           |          |                 |          |            |               |           |             |           |           |            |          |           |          |            |           |       |            |          |          |      |          |           |          |      |     |     |      |       |     |     |     |     |     |     |      |           |     |     |     |     |     |      |     |     |     |  |     |     |  |     |     |     |     |  |     |     |  |           |     |     |  |     |     |  |                      |  |     |      |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 歯冠修復（材料料を含む、装着料・装着材料料は別算定）<br>（大臼歯の1/2冠は生活歯をブリッジの支台に用いる場合に限る）<br>（レジン前装金属冠は前歯に限る）                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                          |                                     |                       |                 |           |        |           |          |                 |          |            |               |           |             |           |           |            |          |           |          |            |           |       |            |          |          |      |          |           |          |      |     |     |      |       |     |     |     |     |     |     |      |           |     |     |     |     |     |      |     |     |     |  |     |     |  |     |     |     |     |  |     |     |  |           |     |     |  |     |     |  |                      |  |     |      |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <table><tr><td colspan="2">金属歯冠修復</td><td colspan="2">インレー</td><td rowspan="2">前歯1/2冠</td><td rowspan="2">白歯1/2冠</td><td rowspan="2">FMC</td><td rowspan="2">レジン前装金属冠</td></tr><tr><td colspan="2"></td><td>単純なもの</td><td>複雑なもの</td></tr><tr><td rowspan="3">乳歯</td><td>銀合金</td><td>202</td><td>308</td><td></td><td></td><td>492</td><td></td></tr><tr><td>金パラ</td><td>278</td><td>459</td><td>587</td><td>527</td><td>726</td><td>1512</td></tr><tr><td>銀合金</td><td>202</td><td>308</td><td>400</td><td>340</td><td>492</td><td>1258</td></tr><tr><td rowspan="3">前歯小臼歯</td><td>銀合金</td><td>202</td><td>308</td><td>400</td><td>340</td><td>492</td><td>1258</td></tr><tr><td>ニッケルクロム合金</td><td>194</td><td>288</td><td>376</td><td>316</td><td>462</td><td>1191</td></tr><tr><td>金パラ</td><td>320</td><td>524</td><td></td><td>612</td><td>833</td><td></td></tr><tr><td rowspan="3">大臼歯</td><td>銀合金</td><td>209</td><td>317</td><td></td><td>352</td><td>506</td><td></td></tr><tr><td>ニッケルクロム合金</td><td>194</td><td>288</td><td></td><td>318</td><td>464</td><td></td></tr><tr><td>14（ブリッジの支台として使用する場合）</td><td></td><td>883</td><td>1118</td><td></td><td></td><td></td></tr></table><br>ジャケット冠……………392+人工歯料（人工歯料の点数は本早見表(3)に掲載）<br>硬質レジンジャケット冠〔光重合…………… 969<br>加熱重合…………… 758〕<br>CAD/CAM冠（1歯につき、小臼歯に限る）……………1684（2284）<br>乳歯金属冠…………… 230（330）<br>小児保障装置（印象採得料は単純印象で算定、クラウンループ又はバンドループを装着した場合に限る）… 600（900） |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 金属歯冠修復                   |                                     | インレー                  |                 | 前歯1/2冠    | 白歯1/2冠 | FMC       | レジン前装金属冠 |                 |          | 単純なもの      | 複雑なもの         | 乳歯        | 銀合金         | 202       | 308       |            |          | 492       |          | 金パラ        | 278       | 459   | 587        | 527      | 726      | 1512 | 銀合金      | 202       | 308      | 400  | 340 | 492 | 1258 | 前歯小臼歯 | 銀合金 | 202 | 308 | 400 | 340 | 492 | 1258 | ニッケルクロム合金 | 194 | 288 | 376 | 316 | 462 | 1191 | 金パラ | 320 | 524 |  | 612 | 833 |  | 大臼歯 | 銀合金 | 209 | 317 |  | 352 | 506 |  | ニッケルクロム合金 | 194 | 288 |  | 318 | 464 |  | 14（ブリッジの支台として使用する場合） |  | 883 | 1118 |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 金属歯冠修復                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | インレー                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 前歯1/2冠                   | 白歯1/2冠                              | FMC                   | レジン前装金属冠        |           |        |           |          |                 |          |            |               |           |             |           |           |            |          |           |          |            |           |       |            |          |          |      |          |           |          |      |     |     |      |       |     |     |     |     |     |     |      |           |     |     |     |     |     |      |     |     |     |  |     |     |  |     |     |     |     |  |     |     |  |           |     |     |  |     |     |  |                      |  |     |      |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 単純なもの                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 複雑なもの                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                          |                                     |                       |                 |           |        |           |          |                 |          |            |               |           |             |           |           |            |          |           |          |            |           |       |            |          |          |      |          |           |          |      |     |     |      |       |     |     |     |     |     |     |      |           |     |     |     |     |     |      |     |     |     |  |     |     |  |     |     |     |     |  |     |     |  |           |     |     |  |     |     |  |                      |  |     |      |  |  |  |
| 乳歯                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 銀合金                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 202                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 308                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                          | 492                                 |                       |                 |           |        |           |          |                 |          |            |               |           |             |           |           |            |          |           |          |            |           |       |            |          |          |      |          |           |          |      |     |     |      |       |     |     |     |     |     |     |      |           |     |     |     |     |     |      |     |     |     |  |     |     |  |     |     |     |     |  |     |     |  |           |     |     |  |     |     |  |                      |  |     |      |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 金パラ                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 278                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 459                                                                                                                                                                                                                                                                                                                                                                                                                                         | 587                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 527                      | 726                                 | 1512                  |                 |           |        |           |          |                 |          |            |               |           |             |           |           |            |          |           |          |            |           |       |            |          |          |      |          |           |          |      |     |     |      |       |     |     |     |     |     |     |      |           |     |     |     |     |     |      |     |     |     |  |     |     |  |     |     |     |     |  |     |     |  |           |     |     |  |     |     |  |                      |  |     |      |  |  |  |
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| 前歯小臼歯                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 銀合金                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 202                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 308                                                                                                                                                                                                                                                                                                                                                                                                                                         | 400                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 340                      | 492                                 | 1258                  |                 |           |        |           |          |                 |          |            |               |           |             |           |           |            |          |           |          |            |           |       |            |          |          |      |          |           |          |      |     |     |      |       |     |     |     |     |     |     |      |           |     |     |     |     |     |      |     |     |     |  |     |     |  |     |     |     |     |  |     |     |  |           |     |     |  |     |     |  |                      |  |     |      |  |  |  |
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|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 金パラ                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 320                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 524                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 612                      | 833                                 |                       |                 |           |        |           |          |                 |          |            |               |           |             |           |           |            |          |           |          |            |           |       |            |          |          |      |          |           |          |      |     |     |      |       |     |     |     |     |     |     |      |           |     |     |     |     |     |      |     |     |     |  |     |     |  |     |     |     |     |  |     |     |  |           |     |     |  |     |     |  |                      |  |     |      |  |  |  |
| 大臼歯                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 銀合金                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 209                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 317                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 352                      | 506                                 |                       |                 |           |        |           |          |                 |          |            |               |           |             |           |           |            |          |           |          |            |           |       |            |          |          |      |          |           |          |      |     |     |      |       |     |     |     |     |     |     |      |           |     |     |     |     |     |      |     |     |     |  |     |     |  |     |     |     |     |  |     |     |  |           |     |     |  |     |     |  |                      |  |     |      |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | ニッケルクロム合金                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 194                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 288                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 318                      | 464                                 |                       |                 |           |        |           |          |                 |          |            |               |           |             |           |           |            |          |           |          |            |           |       |            |          |          |      |          |           |          |      |     |     |      |       |     |     |     |     |     |     |      |           |     |     |     |     |     |      |     |     |     |  |     |     |  |     |     |     |     |  |     |     |  |           |     |     |  |     |     |  |                      |  |     |      |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 14（ブリッジの支台として使用する場合）                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 883                                                                                                                                                                                                                                                                                                                                                                                                                                         | 1118                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                          |                                     |                       |                 |           |        |           |          |                 |          |            |               |           |             |           |           |            |          |           |          |            |           |       |            |          |          |      |          |           |          |      |     |     |      |       |     |     |     |     |     |     |      |           |     |     |     |     |     |      |     |     |     |  |     |     |  |     |     |     |     |  |     |     |  |           |     |     |  |     |     |  |                      |  |     |      |  |  |  |
| ブリッジ（1装置につき） <table><tr><td></td><td>5歯以下</td><td>6歯以上</td></tr><tr><td>印象採得料</td><td>280（420）</td><td>332（498）</td></tr><tr><td>咬合採得料</td><td>74（111）</td><td>148（222）</td></tr><tr><td>リテーナー（支台形成後の算定）</td><td>100（150）</td><td>300（450）</td></tr><tr><td>試適料（前歯部に係る場合）</td><td>40（60）</td><td>80（120）</td></tr><tr><td>装 着 料</td><td>150（225）</td><td>300（450）</td></tr><tr><td>仮 着 料</td><td>40（60）</td><td>80（120）</td></tr></table><br>注）○5歯以下：支台歯とボンテック数の合計が5歯以下の場合<br>6歯以上：支台歯とボンテック数の合計が6歯以上の場合<br>○支台装置ごとの装着料は、ブリッジの装着料に含まれる。（装着材料料は支台装置ごとに算定）<br>○ブリッジ未装着の場合は、ブリッジの装着料を算定しない。<br>○脱離再装着の場合は、ブリッジの装着料を算定する。（装着材料料は支台装置ごとに算定）<br>○接着ブリッジは、1歯欠損症例のみで、支台歯のうち1歯以上が接着ブリッジ支台歯の場合。前歯接着冠は1/2冠、臼歯接着冠は1/2冠に準じて算定する。 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 5歯以下                     | 6歯以上                                | 印象採得料                 | 280（420）        | 332（498）  | 咬合採得料  | 74（111）   | 148（222） | リテーナー（支台形成後の算定） | 100（150） | 300（450）   | 試適料（前歯部に係る場合） | 40（60）    | 80（120）     | 装 着 料     | 150（225）  | 300（450）   | 仮 着 料    | 40（60）    | 80（120）  |            |           |       |            |          |          |      |          |           |          |      |     |     |      |       |     |     |     |     |     |     |      |           |     |     |     |     |     |      |     |     |     |  |     |     |  |     |     |     |     |  |     |     |  |           |     |     |  |     |     |  |                      |  |     |      |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 5歯以下                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 6歯以上                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                          |                                     |                       |                 |           |        |           |          |                 |          |            |               |           |             |           |           |            |          |           |          |            |           |       |            |          |          |      |          |           |          |      |     |     |      |       |     |     |     |     |     |     |      |           |     |     |     |     |     |      |     |     |     |  |     |     |  |     |     |     |     |  |     |     |  |           |     |     |  |     |     |  |                      |  |     |      |  |  |  |
| 印象採得料                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 280（420）                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 332（498）                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                          |                                     |                       |                 |           |        |           |          |                 |          |            |               |           |             |           |           |            |          |           |          |            |           |       |            |          |          |      |          |           |          |      |     |     |      |       |     |     |     |     |     |     |      |           |     |     |     |     |     |      |     |     |     |  |     |     |  |     |     |     |     |  |     |     |  |           |     |     |  |     |     |  |                      |  |     |      |  |  |  |
| 咬合採得料                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 74（111）                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 148（222）                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                          |                                     |                       |                 |           |        |           |          |                 |          |            |               |           |             |           |           |            |          |           |          |            |           |       |            |          |          |      |          |           |          |      |     |     |      |       |     |     |     |     |     |     |      |           |     |     |     |     |     |      |     |     |     |  |     |     |  |     |     |     |     |  |     |     |  |           |     |     |  |     |     |  |                      |  |     |      |  |  |  |
| リテーナー（支台形成後の算定）                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 100（150）                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 300（450）                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                          |                                     |                       |                 |           |        |           |          |                 |          |            |               |           |             |           |           |            |          |           |          |            |           |       |            |          |          |      |          |           |          |      |     |     |      |       |     |     |     |     |     |     |      |           |     |     |     |     |     |      |     |     |     |  |     |     |  |     |     |     |     |  |     |     |  |           |     |     |  |     |     |  |                      |  |     |      |  |  |  |
| 試適料（前歯部に係る場合）                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 40（60）                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 80（120）                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                          |                                     |                       |                 |           |        |           |          |                 |          |            |               |           |             |           |           |            |          |           |          |            |           |       |            |          |          |      |          |           |          |      |     |     |      |       |     |     |     |     |     |     |      |           |     |     |     |     |     |      |     |     |     |  |     |     |  |     |     |     |     |  |     |     |  |           |     |     |  |     |     |  |                      |  |     |      |  |  |  |
| 装 着 料                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 150（225）                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 300（450）                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                          |                                     |                       |                 |           |        |           |          |                 |          |            |               |           |             |           |           |            |          |           |          |            |           |       |            |          |          |      |          |           |          |      |     |     |      |       |     |     |     |     |     |     |      |           |     |     |     |     |     |      |     |     |     |  |     |     |  |     |     |     |     |  |     |     |  |           |     |     |  |     |     |  |                      |  |     |      |  |  |  |
| 仮 着 料                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 40（60）                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 80（120）                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                          |                                     |                       |                 |           |        |           |          |                 |          |            |               |           |             |           |           |            |          |           |          |            |           |       |            |          |          |      |          |           |          |      |     |     |      |       |     |     |     |     |     |     |      |           |     |     |     |     |     |      |     |     |     |  |     |     |  |     |     |     |     |  |     |     |  |           |     |     |  |     |     |  |                      |  |     |      |  |  |  |
| ブ<br>リ<br>ッ<br>ジ                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ボンテック（1歯につき）（材料料を含む） <table><tr><td rowspan="2">鑄造</td><td>金パラ</td><td>大臼歯</td><td>871</td></tr><tr><td>ニッケルクロム合金</td><td>小臼歯</td><td>763</td></tr><tr><td rowspan="3">金属裏装</td><td>14K</td><td>大・小臼歯</td><td>476</td></tr><tr><td>金パラ</td><td>前 歯</td><td>1316 + 人工歯料</td></tr><tr><td>ニッケルクロム合金</td><td>小臼歯</td><td>978 + 人工歯料</td></tr><tr><td rowspan="3">レジン裏金属</td><td>金パラ</td><td>前 歯</td><td>932 + 人工歯料</td></tr><tr><td>ニッケルクロム合金</td><td>前・小臼歯</td><td>782 + 人工歯料</td></tr><tr><td>金パラ</td><td>前 歯</td><td>1442</td></tr><tr><td rowspan="2">その他</td><td>ニッケルクロム合金</td><td>前 歯</td><td>1234</td></tr></table><br>注）ボンテック人工歯料は本早見表(3)に掲載。                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 鑄造                       | 金パラ                                 | 大臼歯                   | 871             | ニッケルクロム合金 | 小臼歯    | 763       | 金属裏装     | 14K             | 大・小臼歯    | 476        | 金パラ           | 前 歯       | 1316 + 人工歯料 | ニッケルクロム合金 | 小臼歯       | 978 + 人工歯料 | レジン裏金属   | 金パラ       | 前 歯      | 932 + 人工歯料 | ニッケルクロム合金 | 前・小臼歯 | 782 + 人工歯料 | 金パラ      | 前 歯      | 1442 | その他      | ニッケルクロム合金 | 前 歯      | 1234 |     |     |      |       |     |     |     |     |     |     |      |           |     |     |     |     |     |      |     |     |     |  |     |     |  |     |     |     |     |  |     |     |  |           |     |     |  |     |     |  |                      |  |     |      |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 鑄造                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 金パラ                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 大臼歯                                                                                                                                                                                                                                                                                                                                                                                                                                         | 871                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                          |                                     |                       |                 |           |        |           |          |                 |          |            |               |           |             |           |           |            |          |           |          |            |           |       |            |          |          |      |          |           |          |      |     |     |      |       |     |     |     |     |     |     |      |           |     |     |     |     |     |      |     |     |     |  |     |     |  |     |     |     |     |  |     |     |  |           |     |     |  |     |     |  |                      |  |     |      |  |  |  |
| ニッケルクロム合金                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 小臼歯                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 763                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                          |                                     |                       |                 |           |        |           |          |                 |          |            |               |           |             |           |           |            |          |           |          |            |           |       |            |          |          |      |          |           |          |      |     |     |      |       |     |     |     |     |     |     |      |           |     |     |     |     |     |      |     |     |     |  |     |     |  |     |     |     |     |  |     |     |  |           |     |     |  |     |     |  |                      |  |     |      |  |  |  |
| 金属裏装                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 14K                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 大・小臼歯                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 476                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                          |                                     |                       |                 |           |        |           |          |                 |          |            |               |           |             |           |           |            |          |           |          |            |           |       |            |          |          |      |          |           |          |      |     |     |      |       |     |     |     |     |     |     |      |           |     |     |     |     |     |      |     |     |     |  |     |     |  |     |     |     |     |  |     |     |  |           |     |     |  |     |     |  |                      |  |     |      |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 金パラ                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 前 歯                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 1316 + 人工歯料                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                          |                                     |                       |                 |           |        |           |          |                 |          |            |               |           |             |           |           |            |          |           |          |            |           |       |            |          |          |      |          |           |          |      |     |     |      |       |     |     |     |     |     |     |      |           |     |     |     |     |     |      |     |     |     |  |     |     |  |     |     |     |     |  |     |     |  |           |     |     |  |     |     |  |                      |  |     |      |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | ニッケルクロム合金                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 小臼歯                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 978 + 人工歯料                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                          |                                     |                       |                 |           |        |           |          |                 |          |            |               |           |             |           |           |            |          |           |          |            |           |       |            |          |          |      |          |           |          |      |     |     |      |       |     |     |     |     |     |     |      |           |     |     |     |     |     |      |     |     |     |  |     |     |  |     |     |     |     |  |     |     |  |           |     |     |  |     |     |  |                      |  |     |      |  |  |  |
| レジン裏金属                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 金パラ                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 前 歯                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 932 + 人工歯料                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                          |                                     |                       |                 |           |        |           |          |                 |          |            |               |           |             |           |           |            |          |           |          |            |           |       |            |          |          |      |          |           |          |      |     |     |      |       |     |     |     |     |     |     |      |           |     |     |     |     |     |      |     |     |     |  |     |     |  |     |     |     |     |  |     |     |  |           |     |     |  |     |     |  |                      |  |     |      |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | ニッケルクロム合金                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 前・小臼歯                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 782 + 人工歯料                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                          |                                     |                       |                 |           |        |           |          |                 |          |            |               |           |             |           |           |            |          |           |          |            |           |       |            |          |          |      |          |           |          |      |     |     |      |       |     |     |     |     |     |     |      |           |     |     |     |     |     |      |     |     |     |  |     |     |  |     |     |     |     |  |     |     |  |           |     |     |  |     |     |  |                      |  |     |      |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 金パラ                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 前 歯                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 1442                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                          |                                     |                       |                 |           |        |           |          |                 |          |            |               |           |             |           |           |            |          |           |          |            |           |       |            |          |          |      |          |           |          |      |     |     |      |       |     |     |     |     |     |     |      |           |     |     |     |     |     |      |     |     |     |  |     |     |  |     |     |     |     |  |     |     |  |           |     |     |  |     |     |  |                      |  |     |      |  |  |  |
| その他                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | ニッケルクロム合金                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 前 歯                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 1234                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                          |                                     |                       |                 |           |        |           |          |                 |          |            |               |           |             |           |           |            |          |           |          |            |           |       |            |          |          |      |          |           |          |      |     |     |      |       |     |     |     |     |     |     |      |           |     |     |     |     |     |      |     |     |     |  |     |     |  |     |     |     |     |  |     |     |  |           |     |     |  |     |     |  |                      |  |     |      |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 冠及びボンテックの修理 <table><tr><td>レジン前装金属冠<br/>レジン前装金属ボンテック</td><td>窩洞形成 + 充填 + 材料料<br/>60 102 11, 10, 4</td></tr><tr><td>歯冠継続歯、レジンジャケット冠、ボンテック</td><td>修理 + 人工歯料<br/>70</td></tr></table>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | レジン前装金属冠<br>レジン前装金属ボンテック | 窩洞形成 + 充填 + 材料料<br>60 102 11, 10, 4 | 歯冠継続歯、レジンジャケット冠、ボンテック | 修理 + 人工歯料<br>70 |           |        |           |          |                 |          |            |               |           |             |           |           |            |          |           |          |            |           |       |            |          |          |      |          |           |          |      |     |     |      |       |     |     |     |     |     |     |      |           |     |     |     |     |     |      |     |     |     |  |     |     |  |     |     |     |     |  |     |     |  |           |     |     |  |     |     |  |                      |  |     |      |  |  |  |
| レジン前装金属冠<br>レジン前装金属ボンテック                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 窩洞形成 + 充填 + 材料料<br>60 102 11, 10, 4                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                          |                                     |                       |                 |           |        |           |          |                 |          |            |               |           |             |           |           |            |          |           |          |            |           |       |            |          |          |      |          |           |          |      |     |     |      |       |     |     |     |     |     |     |      |           |     |     |     |     |     |      |     |     |     |  |     |     |  |     |     |     |     |  |     |     |  |           |     |     |  |     |     |  |                      |  |     |      |  |  |  |
| 歯冠継続歯、レジンジャケット冠、ボンテック                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 修理 + 人工歯料<br>70                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                          |                                     |                       |                 |           |        |           |          |                 |          |            |               |           |             |           |           |            |          |           |          |            |           |       |            |          |          |      |          |           |          |      |     |     |      |       |     |     |     |     |     |     |      |           |     |     |     |     |     |      |     |     |     |  |     |     |  |     |     |     |     |  |     |     |  |           |     |     |  |     |     |  |                      |  |     |      |  |  |  |

(不許複製)

# 社会保険歯科診療報酬点数早見表(3)

(平成26年4月1日実施)

日本歯科医師会

＜注＞ 下記点数のうちゴシックは所定点数、（ ）の点数は6歳未満の乳幼児又は著しく歯科診療が困難な者を診療した場合の点数。

クラウン・ブリッジ維持管理料

クラウン・ブリッジ維持管理料（補管）（1装置につき）  
《文書により情報提供を行った場合に算定》

|       |          |          |
|-------|----------|----------|
| 歯冠補綴物 | 5歯以下ブリッジ | 6歯以上ブリッジ |
| 100   | 330      | 440      |

注）○5歯以下：支台歯とポンティックの数の合計が5歯以下の場合  
○6歯以上：支台歯とポンティックの数の合計が6歯以上の場合  
注）当該補綴物の装着時に算定する。

有床義歯

有床義歯（装着料・材料料を含む、人工歯料は別算定）

|                  |         | レジン床義歯     |            | 熱可塑性義歯     |            |
|------------------|---------|------------|------------|------------|------------|
|                  |         |            | 床適合        |            | 床適合        |
| 局<br>部<br>義<br>歯 | 1歯～4歯   | 632（662）   | 270（405）   | 776（806）   | 270（405）   |
|                  | 5歯～8歯   | 763（793）   | 320（480）   | 1006（1036） | 320（480）   |
|                  | 9歯～11歯  | 1055（1115） | 480（720）   | 1286（1346） | 480（720）   |
|                  | 12歯～14歯 | 1477（1537） | 680（1020）  | 1916（1976） | 680（1020）  |
| 総義歯              |         | 2350（2465） | 1000（1500） | 3056（3171） | 1000（1500） |

装 着 料  
少数歯欠損（1歯～8歯）……………60（90）  
多数歯欠損（9歯～14歯）……………120（180）  
総義歯……………230（345）

床義歯

人工歯料（有床義歯、ジャケット冠、ポンティック（前歯・小臼歯））

| 材 料     | 部 位 | 前 歯 部 |     | 小 ・ 臼 歯 部 |     |
|---------|-----|-------|-----|-----------|-----|
|         |     | 両 側   | 片 側 | 両 側       | 片 側 |
| レジン歯    |     | 26    | 13  | 27        | 14  |
| スルフォン樹脂 |     | 65    | 32  | 85        | 43  |
| 硬質レジン歯  |     | 61    | 30  | 80        | 40  |
| 床用陶歯    |     | 184   | 92  | 99        | 50  |

補綴隙（1個につき）……………40

義歯

有床義歯修理（装着料を含む）

| 《 》内は歯科訪問診療料のみ算定患者の点数 |               | 6月以内の修理       |
|-----------------------|---------------|---------------|
| 少数歯欠損（1歯～8歯）          | 258（387）《372》 | 144（216）《201》 |
| 多数歯欠損（9歯～14歯）         | 288（432）《402》 | 174（261）《231》 |
| 総義歯                   | 343（515）《457》 | 229（344）《286》 |

歯科技工加算（院内技工士により2日以内に修理、新たな欠損に対する増歯の場合）……………+24（+36）《+36》  
注）○印象採得、咬合採得を行った場合はそれぞれの点数を算定する。  
○有床義歯の修理、床裏装の際、人工歯を使用した場合それぞれの人工歯料を別に算定する。

歯線鉤

鑄造鉤（材料料を含む）

|                        |   | 双 子 鉤 | 二腕鉤（レスト付） |     |       |
|------------------------|---|-------|-----------|-----|-------|
|                        |   | 大大・大小 | 犬小・小小     | 大白歯 | 小白・犬歯 |
| 14                     | K | 942   | 810       | 792 | 658   |
| 金                      | パ | 583   | 507       | 456 | 424   |
| ニッケルクロム合金<br>コバルトクロム合金 | ラ | 239   | 239       | 221 | 221   |

線 鉤（材料料を含む）

|         |   | 双 子 鉤 | 二腕鉤（レスト付） | レストなし | フック、スパー |
|---------|---|-------|-----------|-------|---------|
| 14      | K | 590   | 441       | —     | —       |
| 不銹鋼・特殊鋼 |   | 209   | 149       | 129   | 103     |

コンビネーション鉤（材料料を含む、線鉤は不銹鋼・特殊鋼）

|       |    | 大 白 歯 | 小白・犬歯 | 前 歯 |
|-------|----|-------|-------|-----|
| 鑄造鉤   | 金パ | 384   | 368   | 360 |
| ニッケルコ | バ  | 266   | 266   | 266 |

バ ー（1個につき）（材料料を含む）

屈曲 { 金パラ { パラタル……………957  
          リングル……………982  
          不銹鋼・特殊鋼……………287  
鑄造 { 金パラ……………998  
          ニッケルクロム合金、コバルトクロム合金……………456  
保持装置（1個につき）……………60

在宅医療

歯科訪問診療料（1日につき）（初・再診料を含む）

| 同一建物での患者数 | 歯科訪問診療料 | 診療時間  |       |
|-----------|---------|-------|-------|
|           |         | 20分以上 | 20分未満 |
| 1人        | 歯科訪問診療1 | 866   | 143   |
| 2～9人      | 歯科訪問診療2 | 283   |       |
| 10人以上     | 歯科訪問診療3 |       |       |

歯科訪問診療における特掲診療料の50／100加算

| 訪問診療のみ算定    | 抜髄<br>感染根管処置<br>普通抜歯<br>膿瘍切開<br>有床義歯修理 | ・歯科訪問診療料のみを算定した患者は、抜髄、感染根管処置、普通抜歯、膿瘍切開は（ ）の点数を算定する。<br>・抜髄即充、感根即充、有床義歯修理は＜ ＞の点数を算定する。 |
|-------------|----------------------------------------|---------------------------------------------------------------------------------------|
| 訪問診療＋特別対応加算 | 外来における特別対応加算と同様の算定                     | ・歯科訪問診療料及び歯科診療特別対応加算を算定している場合で特掲診療料の50／100加算を算定する場合は（ ）の点数を算定する。                      |

歯科訪問診療料への加算

|         | 在宅患者等急性<br>歯科疾患対応加算 | 歯科訪問診療<br>補助加算 | 在宅かかりつけ<br>歯科診療所加算 | 診療時間に対する加算                | 患者の状態による加算 |        | 連携に関する加算    |  |  |  |  |
|---------|---------------------|----------------|--------------------|---------------------------|------------|--------|-------------|--|--|--|--|
|         |                     |                |                    |                           | 歯科治療困難者    |        |             |  |  |  |  |
| 歯科訪問診療1 | +170                | +110           | +100（施設基準有）        | 1時間を超えた場合30分または端数を増す毎+100 | +175       | 特導+250 | 1初診1回のみ+300 |  |  |  |  |
| 歯科訪問診療2 | +55                 | +45            |                    |                           |            |        |             |  |  |  |  |
| 歯科訪問診療3 | +170（1人の場合）+55      | +110（1人の場合）+45 |                    |                           |            |        |             |  |  |  |  |

訪問歯科衛生指導料（月4回まで）文書提供

| 同一建物での患者数 | 指導時間     |               |          |
|-----------|----------|---------------|----------|
|           | 40分以上    | 20分以上         | 20分未満    |
| 1人        | 複雑なもの360 |               | 簡単なもの120 |
| 2人以上      | 簡単なもの120 | （訪問診療日より1月以内） |          |

歯科疾患在宅療養管理料（月1回）（歯科疾患管理料の併算定は不可）（文書提供が必要）  
在宅療養支援歯科診療所の場合……………140  
口腔機能管理加算……………+50  
その他の場合……………130  
在宅患者歯科治療総合医療管理料（月1回）……………140  
（医科からの診療情報提供により在宅で総合的医療管理を行った場合）  
在宅患者連携指導料（月1回）  
（他職種との連携）（1回目の訪問診療から1月以内は算定不可）……………900  
（医療関係職種間で文書等により情報共有し、これに基づき指導を行った場合）  
在宅患者緊急時等カンファレンス料（月2回まで）……………200  
（医療関係職種等がカンファレンスを行い、その結果を踏まえて指導した場合）  
フッ化物歯面塗布処置（1口腔につき）  
在宅等療養患者……………80（120）  
（初期根面う蝕に罹患している歯科訪問診療料算定患者3月に1回）