

EVERGREEN CARE CLINIC / HOME HEALTHCARE	COST
CONSULTATIONS AND SCREENING	
(Individual Consultation/Counselling or assessment encompasses consultation, history taking, examination and assessment, observations and treatment planning, discharge planning and / or counseling)	
05-15 minutes	R 130.00
16-30 minutes	R 290.00
31-45 minutes	R 490.00
46+ minutes	R 680.00
OBSERVATIONS	
Temperature / Pulse / Respiration / Blood Pressure / SATS	R 94.00
SPECIMENS	
Blood Glucose - Rapid Test	R 90.00
Cholesterol - Rapid Test	R 130.00
Urine - Analysis	R 90.00
Specimen collection laboratory testing - (blood/sputum/urine/throat/nasal swab)	R 100.00
MEDICATION	
Injection (intramuscular or subcutaneous)	R 94.00
Intravenous therapy	R 490.00
Enema/Suppository	R 97.00
Medication Administration (once)	R 94.00
Monthly administration of blister pack medication	R1 120.00
WOUND CARE	
Treatment of simple wounds / requires dressing only	R 177.00
Treatment of moderate wounds e.g. drains or fistulas	R 270.00
Treatment of extensive wounds requiring extensive management e.g., irrigation	R 250.00
Stitch Removal	R 110.00
STOMA CARE / COLOSTOMY	
Simple stoma – a well-constructed, sited stoma which is easy to pouch	R177.00
RESPIRATORY	
Nebulization /Inhalation	R 90.00
Tracheostomy Care	R 159.00
Peak flow measurement	R 70.00
URINARY SYSTEM	
Catheterization/bladder wash out	R 200.00
Condom Catheter application	R 117.00
Incontinence Management (30 min) This fee includes intermittent catheterization, taking history, providing literature and teaching	R 191.00
HIRE OF OXYGEN CONCENTRATOR	
Daily	R 70.00
Monthly	R2 210.00
Administration of Oxygen – flat rate per administration	R 180.00
HOME BASED CARE	
This includes all aspects of elementary nursing care performed in patient's home which include: Bed bath/bath/hair wash/mouth hygiene/nail care/ shave / pressure care (irrespective of time spent)	R 370.00
CARE Giver PLACEMENT RATE	
Hourly rate	R 100.00
Day Shift – twelve (12) hours (Monthly Rate)	R22 000.00
Night Shift - twelve (12) hours (Monthly Rate)	R22 000.00
24 – hour / 12 Hours Day and 12 hours night (10% Discount)	R41 000.00

MEDICAL AID AND PROCEDURE INFORMATION

Medical procedures may be claimed through your medical aid provided that pre-authorization has been obtained and the procedure approved according to the scheme's rules and benefits, please inform the Registered Nurse in advance should you wish to proceed. For assistance with care, other services, consumables, or equipment requirements, please contact the clinic to discuss your needs.

Some services or consumables may not be covered by your medical aid, and any portion not covered will be payable by the patient. All tariffs are subject to change and will be confirmed prior to treatment.