

List of Services

ADA Code	Diagnostic & Preventive Procedures	Fee Schedule
D0150	Comprehensive oral evaluation	\$50.00
D0120	Periodic oral evaluation	\$50.00
D0140	Consultation (limited oral evaluation-problem focused)	\$45.00
D0220	Single x-ray (intraoral)	\$25.00
D0210	X-rays (up to full mouth, or at least 3 films taken)	\$100.00
D1110	Adult cleaning, polishing and scaling	\$100.00
D1120	Child cleaning and polishing- excluding fluoride	\$50.00
D1203	Tropical Fluoride treatment for children	\$50.00
D9110	Palliative (emergency) treatment of dental pain	\$50.00
D1351	Sealant- per tooth	\$40.00

ADA Code	Restorative Procedures (Fillings)	Fee Schedule
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D2940	Sedative Filling	\$50.00
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Due to increased demand for more modern alternatives such as resin composite fillings (that match the tooth color), as well as public concern about the mercury content of dental amalgam, our offices do not provide amalgam fillings.

Composite Resins: (Primary or permanent teeth)

Anterior Composites:

D2330	One surface	\$120.00
D2331	Two surface	\$170.00
D2332	Three surfaces	\$220.00
D2335	Four or more surfaces	\$270.00

ADA Code	Restorative Procedures	Fee Schedule
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Posterior Composites:

D2391	One surface	\$120.00
D2392	Two surfaces	\$170.00
D2393	Three surfaces	\$220.00
D2394	Four or more surfaces	\$270.00

ADA Code	Endodontic Procedure	Fee Schedule
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Root Canal Therapy (excluding final restoration)

D3310	Anterior	\$800.00
D3320	Bicuspid	\$1,000.00
D3330	Molar	\$1,200.00

ADA Code	Periodontal Procedure	Fee Schedule
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D4341	Periodontal scaling and root planning (per quadrant)	\$250.00
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ADA Code	Oral Surgery Procedures	Fee Schedule
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D7140	Extraction, erupted tooth or exposed root	\$100.00
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ADA Code	Fixed Prosthodontic Procedures	Fee Schedule
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D6240	Pontic-Porcelain fused to high noble metal	\$1,500.00
D6241	Pontic-Porcelain fused to predominantly base metal	\$1,000.00
D6242	Pontic-Porcelain fused to noble metal	\$1,200.00
D2750/D6750	Crown-Porcelain fused to high noble metal	\$1,500.00

D2751/D6751	Crown-Porcelain fused to predominantly base metal	\$1,000.00
D2752/D6752	Crown-Porcelain fused to noble metal	\$1,200.00
D2740	Crown-Porcelain/Ceramic substrate	\$1,500.00
D2954/D6972	Post and core (prefabricated)	\$300.00
D2952/D6970	Post and core (non-gold) laboratory	\$350.00
D2920	Re-cement crown	\$60.00
D6930	Re-cement fixed bridge	\$100.00
D2999/D6999	Crown-Temporary	\$120.00

ADA Code	Removable Prosthodontic	Fee Schedule
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D5110	Complete Denture - Maxillary	\$1,000.00
D5120	Complete Denture - Mandibular	\$1,000.00
D5130	Immediate Denture - Maxillary	\$1,200.00
D5140	Immediate Denture - Mandibular	\$1,200.00
D5211	Maxillary Partial Denture - Resin Base	\$600.00
D5212	Mandibular Partial denture - Resin Base	\$600.00
D5213	Maxillary Partial Denture - Cast Frame	\$1,000.00
D5214	Mandibular Partial Denture - Cast Frame	\$1,000.00
D5225	Maxillary Partial Denture- Flexible Base	\$1,100.00
D5226	Mandibular Partial Denture - Flexible Base	\$1,100.00
D5510	Repair Broken Complete Denture Base	\$110.00
D5520	Replace missing/broken denture tooth	\$90.00
D5610	Repair Resin Denture Base	\$110.00
D5620	Repair Cast Framework	\$150.00
D5630	Repair/Replace Broken Clasp	\$150.00
D5640	Replace Broken Teeth (Per Tooth)	\$90.00
D5650	Add Tooth To Existing Partial Denture	\$90.00

D5660	Add Clasp to Existing Partial Denture	\$90.00
D5730	Reline Complete Max Denture (Chairside)	\$205.00
D5731	Reline Complete Mand Denture (Chairside)	\$205.00
D5740	Reline Max Partial Denture (Chairside)	\$205.00
D5741	Reline Mand Partial Denture (Chairside)	\$205.00
D5750	Reline Complete Max Denture (Lab)	\$280.00
D5751	Reline Complete Mand Denture (Lab)	\$280.00
D5760	Reline Max Partial Denture (Lab)	\$280.00
D5761	Reline Mand Partial Denture (Lab)	\$280.00
D5810	Interim Complete Denture (Maxillary)	\$1,000.00
D5811	Interim Complete Denture (Mandibular)	\$1,000.00
D5820	Interim Partial Denture (Maxillary)	\$1,000.00
D5821	Interim Partial Denture (Mandibular)	\$1,000.00
D5850	Tissue Conditioning, Maxillary	\$150.00
D5851	Tissue Conditioning, Mandibular	\$150.00
D9940	Night Guard	\$350.00