

| SN | NUPCO CODE | ITEM DESCRIPTION | UOM | GROUP | NUMBER OF PATIENT |
|----|---------------|---|-----|----------|-------------------|
| 1 | 4216160103000 | <p>ADULT STANDER HEMODIALYSIS AS PER INTERNATIONAL PRESCRIPTION, INCLUDING:</p> <p>1- ADMISSION SEROLOGY AND RENAL PANEL (CBC , RENAL PROFILE , ELECTROLYTES, BONE PROFILE , PTH)</p> <p>2- MEDICATION :</p> <ul style="list-style-type: none"> * ANEMIA MANAGEMENT. <p>1- SCREENING AND PREVENTION</p> <p>2- TREATMENT</p> <ul style="list-style-type: none"> * HYPERPARATHYROIDISM. <p>1- SCREENING AND PREVENTION MEDICAL MANAGEMENT (MEDICATION)</p> <ul style="list-style-type: none"> • VITAMIN D • VITAMIN D ANALOGUE I.V AND/OR ORAL • CALCIMIMETIC I.V AND/OR ORAL <ul style="list-style-type: none"> • REFERRAL FOR SURGICAL INTERVENTION TO PRIMARY SECTOR IN CASE OF REFRACTORY SECONDARY HYPERPARATHYROIDISM DESPITE THE OPTIMAL MEDICAL TREATMENT. <ul style="list-style-type: none"> * MINERAL BONE DISORDER . <p>1- SCREENING AND PREVENTION MEDICAL TREATMENT OF HYPERPHOSPHATEMIA AND CALCIUM DISORDER (MEDICATION)</p> <p>2- PHOSPHATE BINDERS (CALCIUM AND/OR NON-CALCIUM)</p> <ul style="list-style-type: none"> * UREMIC PRURITIS. <p>1- SCREENING AND PREVENTION MEDICAL TREATMENT.</p> <ul style="list-style-type: none"> * I.V ANTIBIOTIC. FOR CLABSI MANAGEMENT <p>1- AS PER THE MOH GUIDELINES.</p> <p>2-HOWEVER IN CASE OF HEMODIALYSIS INSTABILITY OR INDICATION HEMODIALYSIS LINE REMOVAL THE PT SHOULD BE REFERRED TO THE PRIMARY SECTOR.</p> <ul style="list-style-type: none"> * BLOOD PRESSURE MANAGEMENT <p>ANTI-HYPERTENSIVE MEDICATION</p> <p>HYPOTENSION MEDICATION (SUCH AS MIDODRINE)</p> <ul style="list-style-type: none"> * SYSTEMATIC ANTICOAGULATION. <p>3- CREATION AND MAINTENANCE OF VASCULAR ACCESS</p> | EA | ITEMIZED | 508 |
| 2 | 4216160103100 | <p>ADULT STANDER HEMODIALYSIS AS PER INTERNATIONAL PRESCRIPTION, INCLUDING:</p> <p>1- ADMISSION SEROLOGY AND RENAL PANEL (CBC , RENAL PROFILE , ELECTROLYTES, BONE PROFILE , PTH)</p> <p>2- MEDICATION :</p> <ul style="list-style-type: none"> * ANEMIA MANAGEMENT. <p>1- SCREENING AND PREVENTION</p> <p>2- TREATMENT</p> <ul style="list-style-type: none"> * HYPERPARATHYROIDISM. <p>1- SCREENING AND PREVENTION MEDICAL MANAGEMENT (MEDICATION)</p> <ul style="list-style-type: none"> • VITAMIN D • VITAMIN D ANALOGUE I.V AND/OR ORAL • CALCIMIMETIC I.V AND/OR ORAL <ul style="list-style-type: none"> • REFERRAL FOR SURGICAL INTERVENTION TO PRIMARY SECTOR IN CASE OF REFRACTORY SECONDARY HYPERPARATHYROIDISM DESPITE THE OPTIMAL MEDICAL TREATMENT. <ul style="list-style-type: none"> * MINERAL BONE DISORDER . <p>1- SCREENING AND PREVENTION MEDICAL TREATMENT OF HYPERPHOSPHATEMIA AND CALCIUM DISORDER (MEDICATION)</p> <p>2- PHOSPHATE BINDERS (CALCIUM AND/OR NON-CALCIUM)</p> <ul style="list-style-type: none"> * UREMIC PRURITIS. <p>1- SCREENING AND PREVENTION MEDICAL TREATMENT.</p> <ul style="list-style-type: none"> * I.V ANTIBIOTIC. FOR CLABSI MANAGEMENT <p>1- AS PER THE MOH GUIDELINES.</p> <p>2-HOWEVER IN CASE OF HEMODIALYSIS INSTABILITY OR INDICATION HEMODIALYSIS LINE REMOVAL THE PT SHOULD BE REFERRED TO THE PRIMARY SECTOR.</p> <ul style="list-style-type: none"> * BLOOD PRESSURE MANAGEMENT <p>ANTI-HYPERTENSIVE MEDICATION</p> <p>HYPOTENSION MEDICATION (SUCH AS MIDODRINE)</p> <ul style="list-style-type: none"> * SYSTEMATIC ANTICOAGULATION. <p>3- MAINTENANCE OF VASCULAR ACCESS</p> | EA | ITEMIZED | 227 |

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|----|---------------|---|-----|----------|-------------------|
| 3 | 4216160103200 | <p>ADULT STANDER HEMODIALYSIS AS PER INTERNATIONAL PRESCRIPTION, CENTERS UNDER THE AUTHORITY'S OWNERSHIP, INCLUDING:</p> <p>1- ADMISSION SEROLOGY AND RENAL PANEL (CBC , RENAL PROFILE , ELECTROLYTES, BONE PROFILE , PTH)</p> <p>2- MEDICATION :</p> <p>* ANEMIA MANAGEMENT.</p> <p>1- SCREENING AND PREVENTION.</p> <p>2- TREATMENT</p> <p>* HYPERPARATHYROIDISM.</p> <p>1- SCREENING AND PREVENTION MEDICAL MANAGEMENT (MEDICATION)</p> <ul style="list-style-type: none"> • VITAMIN D • VITAMIN D ANALOGUE I.V AND/OR ORAL • CALCIMIMETIC I.V AND/OR ORAL <p>* REFERRAL FOR SURGICAL INTERVENTION TO PRIMARY SECTOR IN CASE OF REFRACTORY SECONDARY HYPERPARATHYROIDISM DESPITE THE OPTIMAL MEDICAL TREATMENT.</p> <p>* MINERAL BONE DISORDER .</p> <p>1- SCREENING AND PREVENTION MEDICAL TREATMENT OF HYPERPHOSPHATEMIA AND CALCIUM DISORDER (MEDICATION)</p> <p>2- PHOSPHATE BINDERS (CALCIUM AND/OR NON-CALCIUM)</p> <p>* UREMIC PRURITIS.</p> <p>1- SCREENING AND PREVENTION MEDICAL TREATMENT.</p> <p>* I.V ANTIBIOTIC. FOR CLABSI MANAGEMENT</p> <p>1- AS PER THE MOH GUIDELINES.</p> <p>2-HOWEVER IN CASE OF HEMODIALYSIS INSTABILITY OR INDICATION HEMODIALYSIS LINE REMOVAL THE PT SHOULD BE REFERRED TO THE PRIMARY SECTOR.</p> <p>* BLOOD PRESSURE MANAGEMENT</p> <p>ANTI-HYPERTENSIVE MEDICATION</p> <p>HYPOTENSION MEDICATION (SUCH AS MIDODRINE)</p> <p>* SYSTEMATIC ANTICOAGULATION.</p> <p>3- CREATION AND MAINTENANCE OF VASCULAR ACCESS</p> | EA | ITEMIZED | 3761 |
| 4 | 4216160103300 | <p>ADULT STANDER HEMODIALYSIS AS PER INTERNATIONAL PRESCRIPTION, CENTERS UNDER THE AUTHORITY'S OWNERSHIP, INCLUDING:</p> <p>1- ADMISSION SEROLOGY AND RENAL PANEL (CBC , RENAL PROFILE , ELECTROLYTES, BONE PROFILE , PTH)</p> <p>2- MEDICATION :</p> <p>* ANEMIA MANAGEMENT.</p> <p>1- SCREENING AND PREVENTION</p> <p>2- TREATMENT</p> <p>* HYPERPARATHYROIDISM.</p> <p>1- SCREENING AND PREVENTION MEDICAL MANAGEMENT (MEDICATION)</p> <ul style="list-style-type: none"> • VITAMIN D • VITAMIN D ANALOGUE I.V AND/OR ORAL • CALCIMIMETIC I.V AND/OR ORAL <p>* REFERRAL FOR SURGICAL INTERVENTION TO PRIMARY SECTOR IN CASE OF REFRACTORY SECONDARY HYPERPARATHYROIDISM DESPITE THE OPTIMAL MEDICAL TREATMENT.</p> <p>* MINERAL BONE DISORDER .</p> <p>1- SCREENING AND PREVENTION MEDICAL TREATMENT OF HYPERPHOSPHATEMIA AND CALCIUM DISORDER (MEDICATION)</p> <p>2- PHOSPHATE BINDERS (CALCIUM AND/OR NON-CALCIUM)</p> <p>* UREMIC PRURITIS.</p> <p>1- SCREENING AND PREVENTION MEDICAL TREATMENT.</p> <p>* I.V ANTIBIOTIC. FOR CLABSI MANAGEMENT</p> <p>1- AS PER THE MOH GUIDELINES.</p> <p>2-HOWEVER IN CASE OF HEMODIALYSIS INSTABILITY OR INDICATION HEMODIALYSIS LINE REMOVAL THE PT SHOULD BE REFERRED TO THE PRIMARY SECTOR.</p> <p>* BLOOD PRESSURE MANAGEMENT</p> <p>ANTI-HYPERTENSIVE MEDICATION</p> <p>HYPOTENSION MEDICATION (SUCH AS MIDODRINE)</p> <p>* SYSTEMATIC ANTICOAGULATION.</p> <p>3- MAINTENANCE OF VASCULAR ACCESS</p> | EA | ITEMIZED | 1838 |

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|----|---------------|---|-----|----------|-------------------|
| 5 | 4216160103400 | <p>ADULT STANDER HEMODIALYSIS AS PER INTERNATIONAL PRESCRIPTION, MOBILE DESALINATION PLANT, INCLUDING:</p> <p>1- ADMISSION SEROLOGY AND RENAL PANEL (CBC , RENAL PROFILE , ELECTROLYTES, BONE PROFILE , PTH)</p> <p>2- MEDICATION :</p> <p>* ANEMIA MANAGEMENT.</p> <p>1- SCREENING AND PREVENTION.</p> <p>2- TREATMENT</p> <p>* HYPERPARATHYROIDISM.</p> <p>1- SCREENING AND PREVENTION MEDICAL MANAGEMENT (MEDICATION)</p> <ul style="list-style-type: none"> • VITAMIN D • VITAMIN D ANALOGUE I.V AND/OR ORAL • CALCIMIMETIC I.V AND/OR ORAL <p>* REFERRAL FOR SURGICAL INTERVENTION TO PRIMARY SECTOR IN CASE OF REFRACTORY SECONDARY HYPERPARATHYROIDISM DESPITE THE OPTIMAL MEDICAL TREATMENT.</p> <p>* MINERAL BONE DISORDER .</p> <p>1- SCREENING AND PREVENTION MEDICAL TREATMENT OF HYPERPHOSPHATEMIA AND CALCIUM DISORDER (MEDICATION)</p> <p>2- PHOSPHATE BINDERS (CALCIUM AND/OR NON-CALCIUM)</p> <p>* UREMIC PRURITIS.</p> <p>1- SCREENING AND PREVENTION MEDICAL TREATMENT.</p> <p>* I.V ANTIBIOTIC. FOR CLABSI MANAGEMENT</p> <p>1- AS PER THE MOH GUIDELINES.</p> <p>2-HOWEVER IN CASE OF HEMODIALYSIS INSTABILITY OR INDICATION HEMODIALYSIS LINE REMOVAL THE PT SHOULD BE REFERRED TO THE PRIMARY SECTOR.</p> <p>* BLOOD PRESSURE MANAGEMENT</p> <p>ANTI-HYPERTENSIVE MEDICATION</p> <p>HYPOTENSION MEDICATION (SUCH AS MIDODRINE)</p> <p>* SYSTEMATIC ANTICOAGULATION.</p> <p>3- CREATION AND MAINTENANCE OF VASCULAR ACCESS</p> | EA | ITEMIZED | 2090 |
| 6 | 4216160103500 | <p>ADULT STANDER HEMODIALYSIS AS PER INTERNATIONAL PRESCRIPTION, MOBILE DESALINATION PLANT, INCLUDING:</p> <p>1- ADMISSION SEROLOGY AND RENAL PANEL (CBC , RENAL PROFILE , ELECTROLYTES, BONE PROFILE , PTH)</p> <p>2- MEDICATION :</p> <p>* ANEMIA MANAGEMENT.</p> <p>1- SCREENING AND PREVENTION</p> <p>2- TREATMENT</p> <p>* HYPERPARATHYROIDISM.</p> <p>1- SCREENING AND PREVENTION MEDICAL MANAGEMENT (MEDICATION)</p> <ul style="list-style-type: none"> • VITAMIN D • VITAMIN D ANALOGUE I.V AND/OR ORAL • CALCIMIMETIC I.V AND/OR ORAL <p>* REFERRAL FOR SURGICAL INTERVENTION TO PRIMARY SECTOR IN CASE OF REFRACTORY SECONDARY HYPERPARATHYROIDISM DESPITE THE OPTIMAL MEDICAL TREATMENT.</p> <p>* MINERAL BONE DISORDER .</p> <p>1- SCREENING AND PREVENTION MEDICAL TREATMENT OF HYPERPHOSPHATEMIA AND CALCIUM DISORDER (MEDICATION)</p> <p>2- PHOSPHATE BINDERS (CALCIUM AND/OR NON-CALCIUM)</p> <p>* UREMIC PRURITIS.</p> <p>1- SCREENING AND PREVENTION MEDICAL TREATMENT.</p> <p>* I.V ANTIBIOTIC. FOR CLABSI MANAGEMENT</p> <p>1- AS PER THE MOH GUIDELINES.</p> <p>2-HOWEVER IN CASE OF HEMODIALYSIS INSTABILITY OR INDICATION HEMODIALYSIS LINE REMOVAL THE PT SHOULD BE REFERRED TO THE PRIMARY SECTOR.</p> <p>* BLOOD PRESSURE MANAGEMENT</p> <p>ANTI-HYPERTENSIVE MEDICATION</p> <p>HYPOTENSION MEDICATION (SUCH AS MIDODRINE)</p> <p>* SYSTEMATIC ANTICOAGULATION.</p> <p>3- MAINTENANCE OF VASCULAR ACCESS</p> | EA | ITEMIZED | 202 |

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|----|---------------|---|-----|----------|-------------------|
| 7 | 4216160103600 | <p>ADULT STANDER HEMODIALYSIS AS PER INTERNATIONAL PRESCRIPTION, PRE-PREPARED DIALYSIS SOLUTIONS, INCLUDING:</p> <p>1- ADMISSION SEROLOGY AND RENAL PANEL (CBC , RENAL PROFILE , ELECTROLYTES, BONE PROFILE , PTH)</p> <p>2- MEDICATION :</p> <p>* ANEMIA MANAGEMENT.</p> <p>1- SCREENING AND PREVENTION.</p> <p>2- TREATMENT</p> <p>* HYPERPARATHYROIDISM.</p> <p>1- SCREENING AND PREVENTION MEDICAL MANAGEMENT (MEDICATION)</p> <ul style="list-style-type: none"> • VITAMIN D • VITAMIN D ANALOGUE I.V AND/OR ORAL • CALCIMIMETIC I.V AND/OR ORAL <p>* REFERRAL FOR SURGICAL INTERVENTION TO PRIMARY SECTOR IN CASE OF REFRACTORY SECONDARY HYPERPARATHYROIDISM DESPITE THE OPTIMAL MEDICAL TREATMENT.</p> <p>* MINERAL BONE DISORDER .</p> <p>1- SCREENING AND PREVENTION MEDICAL TREATMENT OF HYPERPHOSPHATEMIA AND CALCIUM DISORDER (MEDICATION)</p> <p>2- PHOSPHATE BINDERS (CALCIUM AND/OR NON-CALCIUM)</p> <p>* UREMIC PRURITIS.</p> <p>1- SCREENING AND PREVENTION MEDICAL TREATMENT.</p> <p>* I.V ANTIBIOTIC. FOR CLABSI MANAGEMENT</p> <p>1- AS PER THE MOH GUIDELINES.</p> <p>2-HOWEVER IN CASE OF HEMODIALYSIS INSTABILITY OR INDICATION HEMODIALYSIS LINE REMOVAL THE PT SHOULD BE REFERRED TO THE PRIMARY SECTOR.</p> <p>* BLOOD PRESSURE MANAGEMENT</p> <p>ANTI-HYPERTENSIVE MEDICATION</p> <p>HYPOTENSION MEDICATION (SUCH AS MIDODRINE)</p> <p>* SYSTEMATIC ANTICOAGULATION.</p> <p>3- CREATION AND MAINTENANCE OF VASCULAR ACCESS</p> | EA | ITEMIZED | 772 |
| 8 | 4216160103700 | <p>ADULT STANDER HEMODIALYSIS AS PER INTERNATIONAL PRESCRIPTION, PRE-PREPARED DIALYSIS SOLUTIONS, INCLUDING:</p> <p>1- ADMISSION SEROLOGY AND RENAL PANEL (CBC , RENAL PROFILE , ELECTROLYTES, BONE PROFILE , PTH)</p> <p>2- MEDICATION :</p> <p>* ANEMIA MANAGEMENT.</p> <p>1- SCREENING AND PREVENTION</p> <p>2- TREATMENT</p> <p>* HYPERPARATHYROIDISM.</p> <p>1- SCREENING AND PREVENTION MEDICAL MANAGEMENT (MEDICATION)</p> <ul style="list-style-type: none"> • VITAMIN D • VITAMIN D ANALOGUE I.V AND/OR ORAL • CALCIMIMETIC I.V AND/OR ORAL <p>* REFERRAL FOR SURGICAL INTERVENTION TO PRIMARY SECTOR IN CASE OF REFRACTORY SECONDARY HYPERPARATHYROIDISM DESPITE THE OPTIMAL MEDICAL TREATMENT.</p> <p>* MINERAL BONE DISORDER .</p> <p>1- SCREENING AND PREVENTION MEDICAL TREATMENT OF HYPERPHOSPHATEMIA AND CALCIUM DISORDER (MEDICATION)</p> <p>2- PHOSPHATE BINDERS (CALCIUM AND/OR NON-CALCIUM)</p> <p>* UREMIC PRURITIS.</p> <p>1- SCREENING AND PREVENTION MEDICAL TREATMENT.</p> <p>* I.V ANTIBIOTIC. FOR CLABSI MANAGEMENT</p> <p>1- AS PER THE MOH GUIDELINES.</p> <p>2-HOWEVER IN CASE OF HEMODIALYSIS INSTABILITY OR INDICATION HEMODIALYSIS LINE REMOVAL THE PT SHOULD BE REFERRED TO THE PRIMARY SECTOR.</p> <p>* BLOOD PRESSURE MANAGEMENT</p> <p>ANTI-HYPERTENSIVE MEDICATION</p> <p>HYPOTENSION MEDICATION (SUCH AS MIDODRINE)</p> <p>* SYSTEMATIC ANTICOAGULATION.</p> <p>3- MAINTENANCE OF VASCULAR ACCESS</p> | EA | ITEMIZED | 38 |