PD CALCULATIONS

Contents

Illustrations

NON-SCHEDULED INJURIES

Disabilty		Rating Percentage	
Loss of sense of Smell and/or taste		5%	
Loss of spleen		15%	
Laminectomy Disc removal with ideal result and Minimal functional loss		10%	
Removal of Patella		10%	
Loss of testical		10%	
Removal of Uterus		12, 5%	
Loss of Kidney		25%	
Loss of meniscus (knee)		2, 5%	
Un-united scaphoid or excision of		7, 5%	
Urethal stricture		15%	
Spinal fusion at one level only		15%	
Ulnar nerve lesion below elbow		15%	
Median nerve lesion below elbow		20%	
Radial nerve lesion below elbow		20%	
Footdrop		17,5%	
Triple arthrodesis (foot)		15%	
Ankle arthrodesis		20%	
Inguinal Hernia (inoperable)		10%	
Radial head excision		5%	
Loss of Breast		15%	
Symes amputation of Choparts or Boyds		35%	
Facial nerve paralysis		15%	Complete paralysis
Bankart's operation for dislocation of shoulder Joint		5%	
Excision of Upper lobe lung		15%	
Removal of Coccyx		2, 5%	
External rectus palsy		5%	
Outer part clavicle		2, 5%	
Impotence		15%	
Arthrodesis of hip		30%	
Ankylosis of wrist		15%	
Excision of distal ulna		5%	
Leg shortening	1" (25mm)	2, 5%	Depends on other features
	1, 5" (40mm)	5%	and the limb as a whole must
	2" (50mm)	7, 5%	be considered.
	3" (75mm)	10%	
	4" (100mm)	15%	
Loss of ear as a disfigurement		5%	

Loss of both testicles and/or loss of penis			40%	
*Epilepsy	(a)	grand mal	35%	Minimum. See reference below
	(b)	petit mal	25%	to brain injuries
	(c)	Jacksonian	25%	
Ankylosis of elbow in flexion of 90 degree			25%	
Ankylosis of shoulder or Frozen shoulder in Poor functional position			35%	
Knee arthrodesis 7 degree flexion In full extension			25% 30%	

* BRAIN INJURIES - IN ALL CASES a report should be called for from the employer on the worker's capabilities in his specific job.

ASSESSMENT OF PERMANENT DISABLEMENT

MULTIPLICITY.

The principal of "multiplicity" is applied in the assessment of permanent disablement where an employee has sustained disablement, irrespective of the percentages, to opposite extremities e.g. both arms/hands/legs, the maximum percentages prescribed in the First Schedule should be adhered to and permanent disability should not exceed that. For example the maximum permanent disablement for four fingers of one hand is 40% and an injury to the four fingers and the thumb may not exceed 50%. Multiplicity is already included in the scheduled percentages for the amputation of four fingers or four fingers and the thumb.

When a thumb and fingers of the same hand are injured, the thumb is not included when multiplicity is calculated. A thumb is not regarded as a finger for purposes of multiplicity. The percentages laid down in the First Schedule already takes that into account.

Where permanent disablement in respect of injuries for two or more extremities has to be awarded the total percentage permanent disablement should be increased by 20% (expect the fingers).

Example: 1

Left arm	=	15%
Right hand	=	10%
Total	=	25%

Calculate 20 multiplicity of the total percentage permanent disablement i.e.
20% X 25% = 5%

Total permanent disablement in thus:		25%
Plus multiplicity		5%
	=	30%

Example: 2

Left hand	=	15%
Right knee	=	10%
Right elbow	=	5%
Left ankle	=	10%

Total	40%

Add only 20% multiplicity of the total percentage permanent disablement i.e. 20% X 40% = 8%

Total permanent disablement	=	40%
Plus multiplicity		8%
	=	48%

Example: 3

Left index finger	=	5%
Left middle finger	=	4%
Left ring finger	=	3%
Left thumb	=	15%
Right index finger	=	3%
Right middle finger	=	4%
Right thumb	=	10%
Total		44%

First calculate multiplicity for each hand separately (excluding thumbs)
Three fingers were injured on the left hand (Thumb is not a finger)

Total permanent disablement Left Hand	=	12%
Add 30% multiplicity i.e. 30% X 12%	=	3, 6%
Add thumb	=	15%
Total permanent disablement Left Hand	=	30, 6%

The permanent disablement for the right hand is calculated similarly.

Total permanent disablement Right Hand	=	7%
Add 20% multiplicity i.e. 20% X 12%	=	1, 4%
Add thumb	=	10%
Total permanent disablement Right Hand	=	18, 4%

Multiplicity on both extremities is now calculated (Left and Right Hand) i.e. 20% of 49% (30, 6% + 18, 4%)

Total permanent disablement	=	49%
Plus multiplicity	=	9, 8%
Total	=	58, 8%
Rounded off to		59%

Rounding off fractions of percentages:
Only the final result of the calculation of permanent disablement, and after calculation of multiplicity has been done, is rounded off to the nearest full percentage e.g.

9, 25%	=	9%
8, 5%	=	9%
6, 4%	=	6%

The combination tables are used when multiple injuries have been sustained to one limb, to assess a total percentage permanent disablement for that limb.

PREAMBLE

Various principles are used to determine the permanent disablement.

- Any **fingers**, where there is functional loss of more than one interphalangeal joint. The percentage impairment of each joint is determined, and the combined, using the combination tables. This percentage is then converted into the permanent disablement percentage, using the specific tables for each finger.
- Any **joints**: Determine the percentage impairment of each movement of the joint, and then add it up. The sum total is then used to determine the permanent disablement percentage, using the specific table.
- **Arthrodesis (ankylosis) of a joint:** Only one position of arthrodesis is taken into consideration, i.e. the one giving the highest percentage of permanent disablement e.g. the wrist joint with Arthrodesis in 30° dorsiflexion (14% PD, table 11) and 10° radial deviation (33% PD, table 13). The permanent disablement is 33%.
- **Upper limb –** functional and/or anatomical loss of more than one joint and/or area. The percentage impairment in respect of the upper extremity caused by each area, i.e. the hand, wrist joint, elbow joint, and shoulder is determined. These values are combined to determine the degree of disablement of the upper limb whereafter the PD is determined using table 20.
- **Lower Limb –** use the same procedure as for the upper limb.
- **Sensory and motor losses –** are already included in the permanent disablement for amputations.
- With ankylosis and restrictions of movement the sensory loss is combined with the aid of the combination tables.
- The average range of joint movements used in the tables may differ from other references. It is thus always advisable to compare the range of movement of the injured joint with that of the uninjured joint.

Amputation of the hand at levels different to those referred to in the First Schedule

Amputation through the terminal phalanx with at least half of bony length retained:

	Disablement of finger	PD
Index finger	22%	3%
Middle finger	22%	2%
Ring finger	22%	1%
Little finger	22%	1%

Such disablement of a finger as a result of bony loss of the terminal phalanx should be combined with other disablements of the finger as a result of loss of movement; however, the disablement of a finger as a result of anatomical loss and/or loss of function of the terminal phalanx should not exceed 45%.

Amputation with loss of more than half the bony length shall be regarded as an amputation through the DIP joint.

Amputation through the middle phalanx with at least half of bony length retained:

	Disablement of finger	PD
Index finger	74%	7%
Middle finger	74%	5%
Ring finger	74%	4%
Little finger	74%	2, 5%

Such disablement of a finger as a result of bony loss of the middle phalanx should be combined with other disablements of the finger as a result of loss of movement; however, the disablement of a finger as a result of anatomical loss and/or loss of function of the middle phalanx should not exceed 82%.

Thumb:

	Disablement of thumb	PD
Loss of pulp of thumb	11%	2%
Loss of distal 1/3 of bony terminal phalanx	23%	5%
Loss of 2/3 of bony terminal phalanx	50%	10%
Loss of distal ½ of bony proximal phalanx	88%	20%

Such disablement of the thumb as a result of bony loss of a phalanx should be combined with other disablements of the thumb as a result of loss of movement. There is no limitation of combined loss where the thumb is concerned.

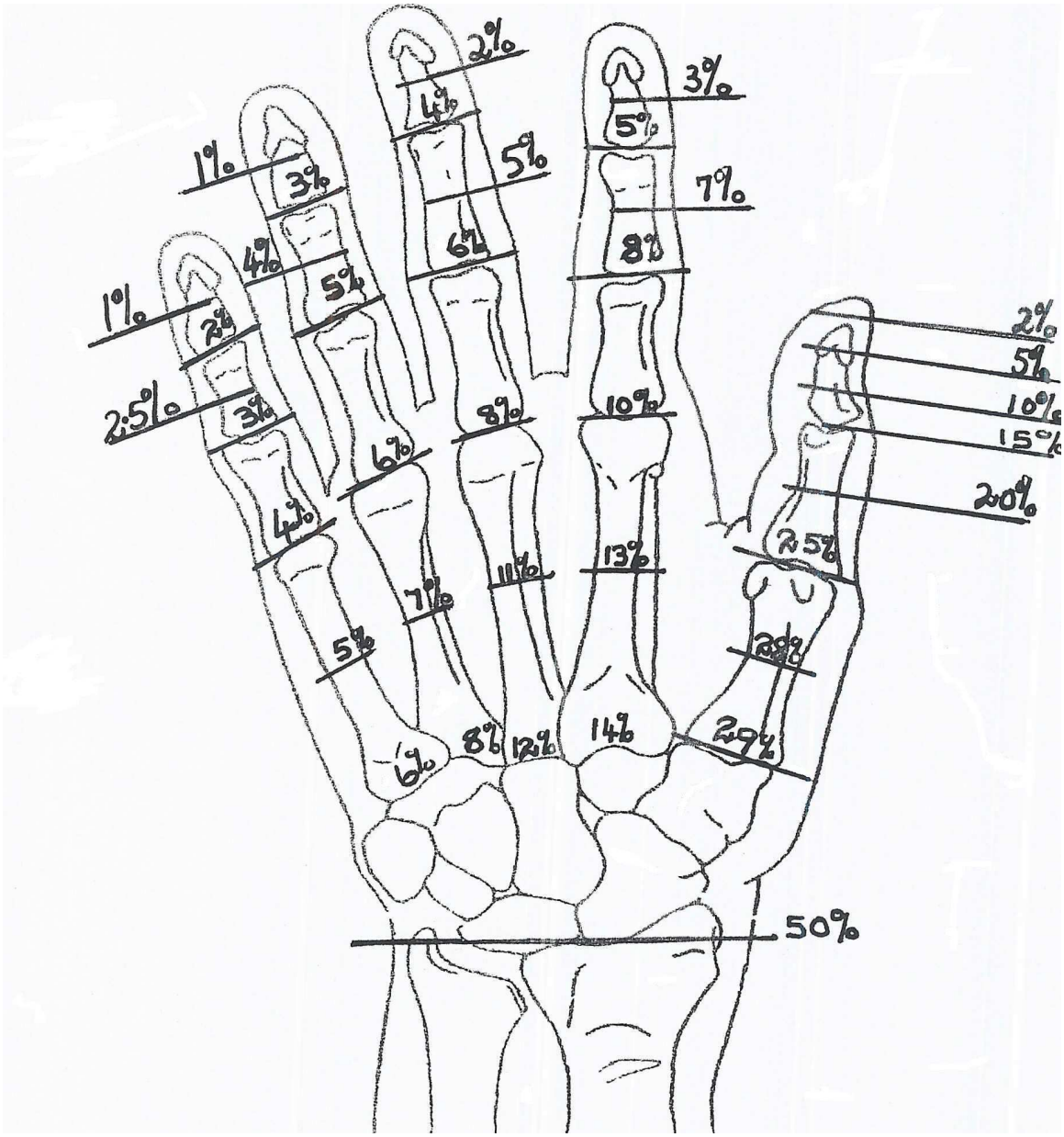
Metacarpals:

	PD
Loss of head of metacarpal	1%
Loss of distal half of metacarpal of thumb, index and middle fingers	3%
Loss of distal half of metacarpal of ring finger and little finger	1%

THE UPPER LIMB EXTREMITY

With amputation, motor and sensory loss are already included in the disablement. However, with ankylosis (arthrodesis) and loss of movement, sensory loss should be added with the aid of the combination tables.

PD Applicable to Finger and Thumb Amputation



Thumb

First Schedule to the Act	
Thumb	
	PD
Amputation through MP joint	25%
Amputation through IP joint	15%

Loss of movement/ankylosis of the thumb

If more than one joint is affected (CM, MP, IP), the disablement is as read from tables ONE, TWO and THREE for each joint respectively. The disablements are then combined with the aid of the combination tables to determine the total disablement of the thumb; then use table FOUR to determine disablement of the hand and table NINE to determine disablement of the upper limb; finally use table TWENTY to determine the PD.

TABLE ONE

Motion loss and arthrodesis of the interphalangeal joint of the thumb.
Amputation = 75% impairment of the thumb = 15% PD
(Average flexion/extension is 80°)

Flexion from 0°	Degrees lost	Degrees Retained	Thumb Impairment	PD
0°	80°	0°	45%	9%
10°	70°	10°	39%	8%
20°	60°	20°	34%	7%
30°	50°	30°	28%	5%
40°	40°	40°	23%	5%
50°	30°	50°	17%	3%
60°	20°	60°	11%	2%
70°	10°	70°	6%	1%
80°	0°	80°	0%	0%

Arthrodesis / Ankylosis

0° (neutral position)	45%	9%
10°	43%	8%
20°	40%	8%
30°	38%	8%
40° (functional position)	35%	7%
50°	45%	9%
60°	55%	11%
70°	65%	13%
80°	75%	15%

TABLE TWO

Motion loss and arthrodesis of the Metacarpo-phalangeal joint of the thumb.
Amputation = 100% impairment of the thumb = 25% PD
(Average flexion/extension is 60°)

Flexion from 0°	Degrees lost	Degrees Retained	Thumb Impairment	PD
0°	60°	0°	55%	11%
10°	50°	10°	46%	9%
20°	40°	20°	37%	8%
30°	30°	30°	27%	5%
40°	20°	40°	18%	3%
50°	10°	50°	9%	2%
60°	0°	60°	0%	0%

Arthrodesis / Ankylosis

0° (neutral position)	55%	11%
10°	49%	10%
20°	43%	8%
30°	52%	10%
40° (functional position)	61%	12%
50°	70%	14%
60°	80%	17%

TABLE THREE

Motion loss and arthrodesis of the Carpo-metacarpo joint of the thumb
(Average flexion/extension is 45°)

Flexion from 0°	**Degrees lost**	**Degrees Retained**	**Thumb Impairment**	**PD**
0°	15°	0°	15%	3%
10°	5°	10°	5%	1%
15°	0°	15°	0%	0%
Extension From 0°	**Degrees lost**	**Degrees Retained**	**Thumb Impairment**	**PD**
0°	30°	0°	15%	3%
10°	20°	10°	10%	2%
20°	10°	20°	5%	1%
30°	0°	30°	0%	0%

Arthrodesis / Ankylosis

0°	30%	6%
10° (flexion)	55%	11%
15° (full flexion)	80%	17%
10° (extension)	47%	10%
20° (extension)	63%	12%
30° (full extension)	80%	17%

TABLE FOUR

% Impairment of Tumb	% Impairment of the hand	% PD	% Impairment of Thumb	% Impairment of the Hand	% PD
0 -1	0	0	49 – 51	20	10
2 – 3	1	1	52 – 53	21	10
4 – 6	2	1	54 -56	22	11
7 – 8	3	1	57 – 58	23	12
9 – 11	4	2	59 – 61	24	12
12 – 13	5	3	62 – 63	25	12
14 – 16	6	3	64 – 66	26	13
17 – 18	7	3	67 – 68	27	14
19 – 21	8	4	69 – 71	28	14
22 – 23	9	5	72 – 73	29	14
24 – 26	10	5	74 – 76	30	15
27 – 28	11	5	77 – 78	32	16
29 – 31	12	6	79 – 81	34	17
32 – 33	13	6, 5	82 – 83	35	18
34 – 36	14	7	84 – 86	37	18
37 – 38	15	8	87 – 88	39	19, 5
39 – 41	16	8	89 – 91	41	21
42 – 43	17	8	92 – 93	43	21
44 – 46	18	9	94 – 96	46	23
47 - 48	19	10	97 – 98	48	24
			99 -100	20	25

The other four fingers

First Schedule to the Act

Amputation through M.P. joint of the index finger	10%
Amputation through M.P. joint of the middle finger	8%
Amputation through M.P. joint of the ring finger	6%
Amputation through M.P. joint of the little finger	4%
Amputation through P.I.P. joint of the index finger	8%
Amputation through P.I.P. joint of the middle finger	6%
Amputation through P.I.P joint of the ring finger	5%
Amputation through P.I.P. joint of the little finger	3%
Amputation through D.I.P. joint of the index finger	5%
Amputation through D.I.P. joint of the middle finger	4%
Amputation through D.I.P. joint of the ring finger	3%
Amputation through D.I.P. joint of the little finger	2%

Ankylosis / Arthrodesis and loss of movement of the other four fingers.

- Tables FIVE, SIX and SEVEN give the impairments for the DIP (distal interphalangeal).
  PIP (proximal interphalangeal), and
  MP (metacarpo-phalangeal) joints

- Table EIGHT shows the relationship between impairment of a specific finger and that of the hand.

- Any finger – more than one joint affected: Determine individually the impairment of each joint; then combine impairments with aid of combination tables.

TABLE FIVE

Distal interphalangeal joint of any finger.
Amputation at DIP level = 45% finger impairment.
(Average flexion/extension is 70°)

Flexion from 0°	Degrees lost	Degrees Retained	Finger impairment
0°	70°	0°	45%
10°	60°	10°	38%
20°	50°	20°	32%
30°	40°	30°	26%
40°	30°	40°	19%
50°	20°	50°	13%
60°	10°	60°	6%
70°	0°	70°	0%

Arthrodesis / Ankylosis

0° (neutral position	45%
10°	41%
20°	38%
30°	34%
40° (functional position)	30%
50°	35%
60°	40%
70° (full flexion)	45%

TABLE SIX

Proximal interphalangeal joint of any finger.

Amputation at PIP level = 80% finger impairment.
(Average flexion/extension is 100°)

Flexion from 0°	Degrees lost	Degrees Retained	Finger impairment
0°	100°	0°	60%
10°	90°	10°	54%
20°	80°	20°	48%
30°	70°	30°	42%
40°	60°	40°	36%
50°	50°	50°	30%
60°	40°	60°	24%
70°	30°	70°	18%
80°	20°	80°	12%
90°	10°	90°	6%
100°	0°	100°	0%

Arthrodesis / Ankylosis

0° (neutral position	60%
10°	58%
20°	55%
30°	53%
40° (functional position)	50%
50°	55%
60°	60%
70°	65%
80°	70%
90°	75%
100° (full flexion)	80%

TABLE SEVEN

Metacarpo phalangeal joint of any finger.
Amputation at MP level = 100% finger impairment.

(Average flexion/extension is 90°)

Flexion from 0°	Degrees lost	Degrees Retained	Finger impairment
0°	90°	0°	55%
10°	80°	10°	49%
20°	70°	20°	43%
30°	60°	30°	37%
40°	50°	40°	31%
50°	40°	50°	24%
60°	30°	60°	18%
70°	20°	70°	12%
80°	10°	80°	6%
90°	0°	90°	0%

Arthrodesis / Ankylosis

0° (neutral position	55%
10°	52%
20°	48%
30°	45%
40° (functional position)	54%
50°	63%
60°	72%
70°	82%
80°	91%
90° (full flexion)	100%

TABLE EIGHT

% Impairment of the Index Finger	% Impairment of the Hand	% PD
0 -1	0	0

% Impairment of the Middle finger	% Impairment of the Hand	% PD
0 – 2	0	0

2 – 5	1	1
6 – 9	2	1
10 – 13	3	1
14 – 17	4	2
18 – 21	4	2
22 – 25	5	3
26 – 29	6	3
30 – 33	7	3
34 – 37	8	4
38 – 41	9	5
42 – 45	10	5
46 – 49	10	5
50 – 53	11	5
54 – 57	11	5
58 – 61	12	6
62 – 65	12	6
66 – 69	13	6, 5
70 – 73	13	6, 5
74 – 77	14	7
78 – 81	15	8
82 – 85	17	8
86 – 89	18	9
90 – 93	18	9
94 – 97	19	10
98 - 100	20	10

3 – 7	1	1
8 – 12	2	1
13 – 17	3	1
18 – 22	4	2
23 – 27	4	2
28 – 32	5	3
33 – 37	6	3
38 – 42	7	3
43 – 47	8	4
48 – 52	9	5
53 – 57	9	5
58 – 62	9	5
63 – 67	10	5
68 – 72	10	5
73 – 77	11	5
78 – 82	12	6
83 – 87	14	7
88 – 92	14	7
93 – 97	15	8
98 - 100	16	8

% Impairment Of the Ring Finger	**% Impairment Of the Hand**	**% PD**
0 -2	0	0
5 – 14	1	1
15 – 24	2	1
25 – 34	4	2
35 – 44	5	3
45 – 54	6	3
55 – 64	7	3
65 – 74	8	4
75 – 84	10	5
85 – 94	11	5
95 - 100	12	6

% Impairment Of the Little Finger	**% Impairment of the Hand**	**% PD**
0 – 9	0	0
10 – 29	2	1
30 – 49	4	2
50 – 69	5	3
70 – 89	6	3
90 - 100	8	4

Whole Hand

If two or more fingers are affected

- Calculate the impairment of each finger by combination
- Determine the impairment of the hand by adding the impairment of all fingers.

TABLE NINE

% Impairment of the Hand	% Impairment of the upper extremity	% PD	% Impairment of the Hand	% Impairment of the upper extremity	% PD
0	0	0	51	39	25
1	1	1	52	40	26
2	2	1	53	41	27
3	2	1	54	42	27
4	3	2	55	42	27
5	4	3	56	43	28
6	5	3	57	44	29
7	5	3	58	45	29
8	6	4	59	45	29
9	7	5	60	46	30
10	8	5	61	47	31
11	8	5	62	48	31
12	9	6	63	49	32
13	10	6, 5	64	49	32
14	11	7	65	50	32, 5
15	12	8	66	51	33
16	12	8	67	52	34
17	13	8	68	52	34
18	14	9	69	53	34
19	15	10	70	54	35
20	15	10	71	55	36
21	16	10	72	56	36
22	17	11	73	57	37
23	18	12	74	57	37
24	18	12	75	58	38
25	19	12	76	59	38
26	20	13	77	60	39
27	21	14	78	60	39
28	22	14	79	61	40
29	22	14	80	62	40
30	23	15	81	63	41
31	24	16	82	64	42
32	25	16	83	65	42
33	25	16	84	65	42
34	26	17	85	66	43
35	27	18	86	67	44
36	28	18	87	67	44
37	28	18	88	68	44
38	29	19	89	69	45
39	30	19, 5	90	69	45

% Impairment of the Hand	% Impairment of the upper extremity	% PD	% Impairment of the Hand	% Impairment of the upper extremity	% PD
40	31	20	91	70	45, 5
41	32	21	92	71	46
42	32	21	93	72	47
43	33	21	94	72	47
44	34	22	95	73	47
45	35	23	96	74	48
46	35	23	97	75	49
47	36	23	98	75	49
48	37	24	99	76	49
49	38	25	100	77	50
50	38	25			

TABLE TEN

Sensory loss	% Finger Impairment	% Hand impairment	% PD
Radial aspect of the	11%	4%	2%

Thumb			
Ulnar aspect of the Thumb	23%	9%	5%
Radial aspect of the Index finger	37%	8%	4%
Ulnar aspect of the Index Finger	13%	3%	1%
Radial aspect of the Middle finger	42%	7%	3%
Ulnar aspect of the Middle finger	12%	2%	1%
Radial aspect of the Ring finger	34%	4%	2%
Ulnar aspect of the Ring finger	24%	2%	1%
Radial aspect of the Little finger	49%	4%	2%
Ulnar aspect of the Little finger	49%	4%	2%

With injuries of the ulnar nerve there also is loss of ab/adduction of the fingers because the intrinsic muscle function is lost. These nerve injuries – sensory losses, when present, are added through the combination tables.

First Schedule to the Act **Loss of four fingers = 40% PD**

Wrist Joint

First Schedule to the Act

Loss of hand at wrist = 50%PD

Loss of four fingers and a thumb = 50%PD

Table Eleven

Wrist joint – dorsiflexion
Amputation = 50% PD (77 %of upper extremity)
Average dorsi/palmar flexion = 130

Dorsiflexion from 0 (Extension)	**Degrees lost**	**Degrees retained**	**% Impairment of the upper extremity**	**% PD**
0	60	0	9%	6%
10	50	10	7%	5%
20	40	20	5%	3%
30	30	30	4%	3%
40	20	40	3%	2%
50	10	50	2%	1%
60	0	60	0%	0%

Arthrodesis / Ankylosis

0 (neutral position)	26%	17%
10	24%	16%
20	23%	15%
30 (functional position)	21%	14%
40	40%	26%
50	58%	38%
60 (full dorsiflexion)	77%	50%

Table Twelve

Wrist joint – palmar flexion
Amputation = 50%PD
Average dorsi/palmar flextion = 130

Palmar Flexion from 0 (flexion)	Degree lost	Degree retained	% impairment of the upper extremity	PD
0	70	0	9%	6%
10	60	10	9%	6%
20	50	20	7%	5%
30	40	30	5%	3%
40	30	40	4%	3%
50	20	50	3%	2%
60	10	60	2%	1%
70	0	70	0%	0%

Arthrodesis / Ankylosis

0	26%	17%
10	33%	21%
20	40%	26%
30	48%	31%
40	55%	36%
50	62%	40%
60	69%	45%
70 (full palmar flexion)	77%	50%

The % upper limb impairments due to palmar flexion, dorsal flexion, adduction and abduction at the wrist joint are added and the PD determined (Table Twenty)

In the event of an arthrodesis the highest impairment value is used to determine the PD.

TABLE THIRTEEN

Wrist joint – adduction / abduction
Amputation = 50% PD
Average radial-ulnar deviation (ad-/abduction) = 50

Radial deviation From 0	**Degree lost**	**Degree retained**	**% Impairment of the upper extremity**	**% PD**
0	20	0	3%	2%
10	10	10	2%	1%
20	0	20	0%	0%
Ulnar deviation From 0	**Degree lost**	**Degree retained**	**% Impairment of the upper extremity**	**% PD**
0	30	0	4%	3%
10	20	10	3%	2%
20	10	20	2%	1%
30	0	30	0%	0%

Arthrodesis / Ankylosis

0 (neutral position)	26%	17%
10 (radial deviation)	51%	33%
20 (full radial deviation)	77%	50%
10 (Ulnar deviation)	43%	28%
20 (Ulnar deviation)	60%	39%
30 (full ulnar deviation)	77%	50%

The percentage upper limb impairments due to palmar flexion, dorsal flexion, adduction and abduction at the wrist joint are added and the PD determined (Table Twenty)

In the event of an arthrodesis the highest impairment value is used to determine the permanent disablement.

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Elbow Joint

First Schedule to the Act
Amputation through elbow joint = 55% PD

For example:
100 flexion from 30 extension limitation = disablement of 17% (12% as a result of loss of flexion plus 5% as a result f limitation of extension)

Loss of rotation should also be added.

Now add all loss of movements up.

Ankylosis – the highest disablement should be taken as limb disablement.

Upper Limb PD Percentages

Amputation through shoulder = 65%

Amputation of 5 cm and more proximal from elbow joint = 65%

Amputation proximal to Radius and Ulna at wrist point to 5 cm proximal to elbow joint = 55%

Amputation of the hand proximal to the five metacarpal phalanx joints through the distals of the Radius and Ulna = 50%

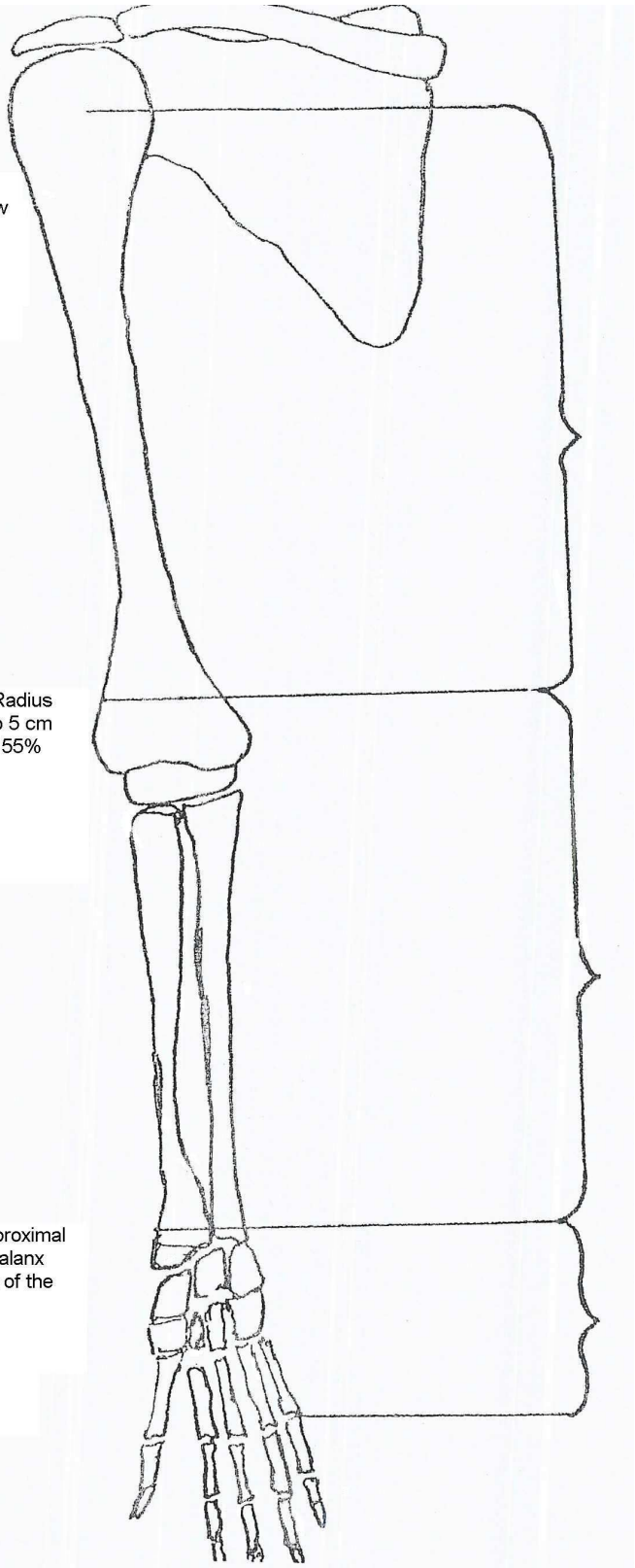


TABLE FOURTEEN

Elbow joint – flexion / extension
Amputation through elbow joint = 55%PD
Average flexion/extension = 150

Flexion of (active flexion)	% Upper extremity impairment	%PD	Extension loss	%Impairmentof the upper extremity	%PD
0	35%	23%	10	2%	1%
10	32%	21%	20	3%	2%
20	30%	19.5%	30	5%	3%
30	28%	18%	40	7%	5%
40	26%	17%	50	9%	6%
50	23%	15%	60	11%	7%
60	21%	14%	70	13%	8%
70	19%	12%	80	14%	9%
80	16%	10%	90	16%	10%
90	14%	9%	100	18%	12%
100	12%	8%	110	20%	13%
110	9%	6%	120	21%	14%
120	7%	5%	130	23%	15%
130	5%	3%	140	25%	16%
140	3%	2%	150	27	18%
150	0%	0%			

Elbow Arthrodesis / Ankylosis

0 (neutral position)	58%	38%
10	57%	37%
20	55%	36%
30	55%	36%
40	53%	34%
50	52%	34%
60	50%	32.5%
70	49%	32%
80	74%	31%
90	47%	31%
100 (functional position)	45%	29%
110	53%	34%
120	61%	40%
130	69%	45%
140	77%	50%
150	85%	55%

Elbow joint – Average pronation/supination = 160
Amputation through elbow joint =55%PD

Pronation From 0	Degrees Lost	Degrees Retained	% Impairment of the upper extremity	%PD
0	80	0	12%	8%
10	70	10	10%	6.5%
20	60	20	9%	65
30	50	30	7%	5%
40	40	40	6%	4%
50	30	50	5%	%3
60	20	60	3%	2%
70	10	70	2%	1%
80	0	80	0%	0%
Supination from 0				
0	80	12%	12%	8%
10	70	10%	10%	6.5%
20	60	9%	9%	65
30	50	7%	7%	5%
40	40	6%	6%	4%
50	30	5%	5%	%3
60	20	3%	3%	2%
70	10	2%	2%	1%
80	0	0%	0%	0%

Elbow Arthrodesis / Ankylosis in pronation /supination

0 (neutral position/functional)	58%	38%
10 (Pronation)	62%	40%
20 (Pronation)	65%	42%
30 (Pronation)	68%	44%
40 (Pronation)	72%	47%
50 (Pronation)	75%	49%
60 (Pronation)	79%	51%
70 (Pronation)	81%	53%
80 (full pronation)	85%	55%
10 (supination)	62%	40%
20 (supination)	65%	42%
30 (supination)	68%	44%
40 (supination)	72%	47%
50 (supination)	75%	49%
60 (supination)	79%	51%
70 (supination)	81%	53%
80 (full supination	85%	55%

Shoulder Joint

First Schedule to the Act
Amputation through shoulder joint – 65%

Movements Forward
Backward elevation (flexion)
Abduction / adduction
Internal / external rotation

All loss of movement is added.
Ankylosis – only the highest disablement is taken into account.

Upper limb – multiple units affected;
Determine individually the disablement of each unit i.e hand, wrist joint, elbow and shoulder.

Combine the values to determine the disablement of the upper limb – refer to table Twenty to dertermine permanent disablement.

Table Sixteen

Shoulder joint – Forward elevation (flexion)
Amputation through shoulder joint = 65%PD
Average forward –backward elevation = 190

Forward Elevation From 0	Degrees Lost	Degrees Retained	% Impairment of the upper extremity	%PD
0	150	0	16%	10%
10	140	10	15%	10%
20	130	20	14%	9%
30	120	30	13%	8%
40	110	40	12%	8%
50	100	50	11%	7%
60	90	60	9%	6%
70	80	70	8%	5%
80	70	80	7%	5%
90	60	90	6%	4%
100	50	100	5%	3%
110	40	110	4%	3%
120	30	120	35%	2%
130	20	130	2%	1%
140	10	140	1%	1%
150	0.	150	0%	0%

Shoulder Arthrodesis/Ankylosis in forward elevation

0 (neutral position)	60%	39%
10	53%	34%
20	47%	31%
30 (functional position)	40%	26%
40	45%	29%
50	50%	32.5%
60	55%	36%
70	60%	39%
80	65%	42%
90	70%	45.5%
100	75%	49%
110	80%	52%
120	85%	55%
130	90%	58.5%
140	95%	62%
150 (full forward elevation)	100%	65%

Table Seventeen

Shoulder joint – Backward elevation (extension)
Average extension =40

Extension from 0	**Degrees Lost**	**Degrees Retained**	**% Impairment of the upper extremity**	**%PD**
0	40	0	4%	3%
10	30	10	3%	2%
20	20	20	2%	1%
30	10	30	1%	1%
40	0	40	0%	0%

Shoulder Arthrodesis/Ankylosis in extention

0 (neutral position)	60%	395
10	70%	45.5%
20	80%	52%
30	90%	58.5%
40 (full extension)	100%	65%

Shoulder joint – abduction/adduction

Average abduction/adduction = 180

Abduction From	**Degrees Lost**	**Degrees Retained**	**% Impairment of the upper extremity**	**%PD**
0	150	0	17%	115
10	140	10	16%	10%
20	130	20	14%	9%
30	120	30	13%	8%
40	110	40	12%	8%
50	100	50	11%	7%
60	90	60	10%	6.5%
70	80	70	95	6%
80	70	80	8%	5%
90	60	90	7%	5%
100	50	100	6%	4%
110	40	110	5%	3%
120	30	120	3%	2%
130	20	130	2%	1%
140	10	140	1%	1%
150	0	150	0%	0%
Adduction From	**Degrees Lost**	**Degrees Retained**	**% Impairment of the upper extremity**	**%PD**
0	30	0	3%	3%
10	20	10	2%	1%
20	10	30	1%	1%
30	0	20	0%	0%

Shoulder Arthrodesis/Ankylosis abduction/adduction

0 (neutral position)	60%	39%
10 (abduction)	56%	36%
20 (abduction)	51%	33%
30 (abduction)	47%	31%
40 (abduction)	42%	27%
45 (Functional position)	40%	26%
50 (abduction)	43%	28%
60 (abduction)	49%	32%
70 (abduction)	54%	35%
80 (abduction)	60%	39%
90 (abduction)	66%	43%
100 (abduction)	71%	46%
110 (abduction)	77%	50%
120 (abduction)	83%	54%
130 (abduction)	89%	58%
140 (abduction)	94%	61%
150 (abduction)	100%	65%
10 (abduction)	73%	47%
20 (abduction)	87%	57%
30 (abduction)	100%	65%

Table Nineteen

Shoulder joint – internal/external rotation
Average internal/external rotation = 130

Internal rotation from	**Degrees Lost**	**Degrees Retained**	**% Impairment of the upper extremity**	**%PD**
0	40	0	6%	45
10	30	10	5%	3%
20	20	20	3%	25
30	10	30	2%	1%
40	0	40	0%	0
External Rotation from	**Degrees Lost**	**Degrees Retained**	**% Impairment of the upper extremity**	**%PD**
0	90	0	14%	9%
10	80	10	12%	8%
20	70	20	11%	7%
30	60	30	9%	6%
40	50	40	8%	5%
50	40	50	6%	4%
60	30	60	5%	3%
70	20	70	3%	2%
80	10	80	2%	1%
90	0	90	0%	0%

Shoulder arthrodesis in internal/external rotation

0	(neutral position)	60%	39%
10	(internal rotation)	70%	45.5%
20	(internal rotation)	80%	52%
30	(internal rotation)	90%	58.5%
40	(full internal position)	100%	65%
10	(external rotation)	50%	32.5%
20	(functional position)	40%	26%
30	(external rotation)	49%	32%
40	(external rotation)	57%	37%
50	(external rotation)	66%	43%
60	(external rotation)	74%	48%
70	(external rotation)	83%	54%
80	(external rotation)	91%	59%
90	(full external rotation)	100%	65%

Table twenty

% Upper extremity impairment = PD%

%Upper extremity impairment	%PD	%Upper extremity impairment	%PD	%Upper extremity impairment	%PD
1	1	32	23	69	45
2	1	36	23	70	45.5
3	2	37	24	71	46
4	3	38	25	72	47
5	3	39	25	73	47
6	4	40	26	74	48
7	5	41	27	75	49
8	5	42	27	76	49
9	6	43	28	77	50
10	6.5	44	29	78	51
11	7	45	29	79	51
12	8	46	30	80	52
13	8	47	31	81	53
14	9	48	31	82	53
15	10	49	32	83	54
16	10	50	32.5	84	55
17	11	51	33	85	55
18	12	52	34	86	56
19	12	53	34	87	57
20	13	54	35	88	57
21	14	55	36	89	58
22	14	56	36	90	58.5
23	15	57	37	91	59
24	16	58	38	92	60
25	16	59	38	93	60
26	17	60	39	94	61
27	18	61	40	95	62
28	18	62	40	96	62
29	19	63	41	97	63
30	19.5	61	42	98	64
31	20	65	42	99	64
32	21	66	43	100	65
33	21	67	44		
34	22	68	44		

THE LOWER LIMB

PD Applicable to Foot Amputation

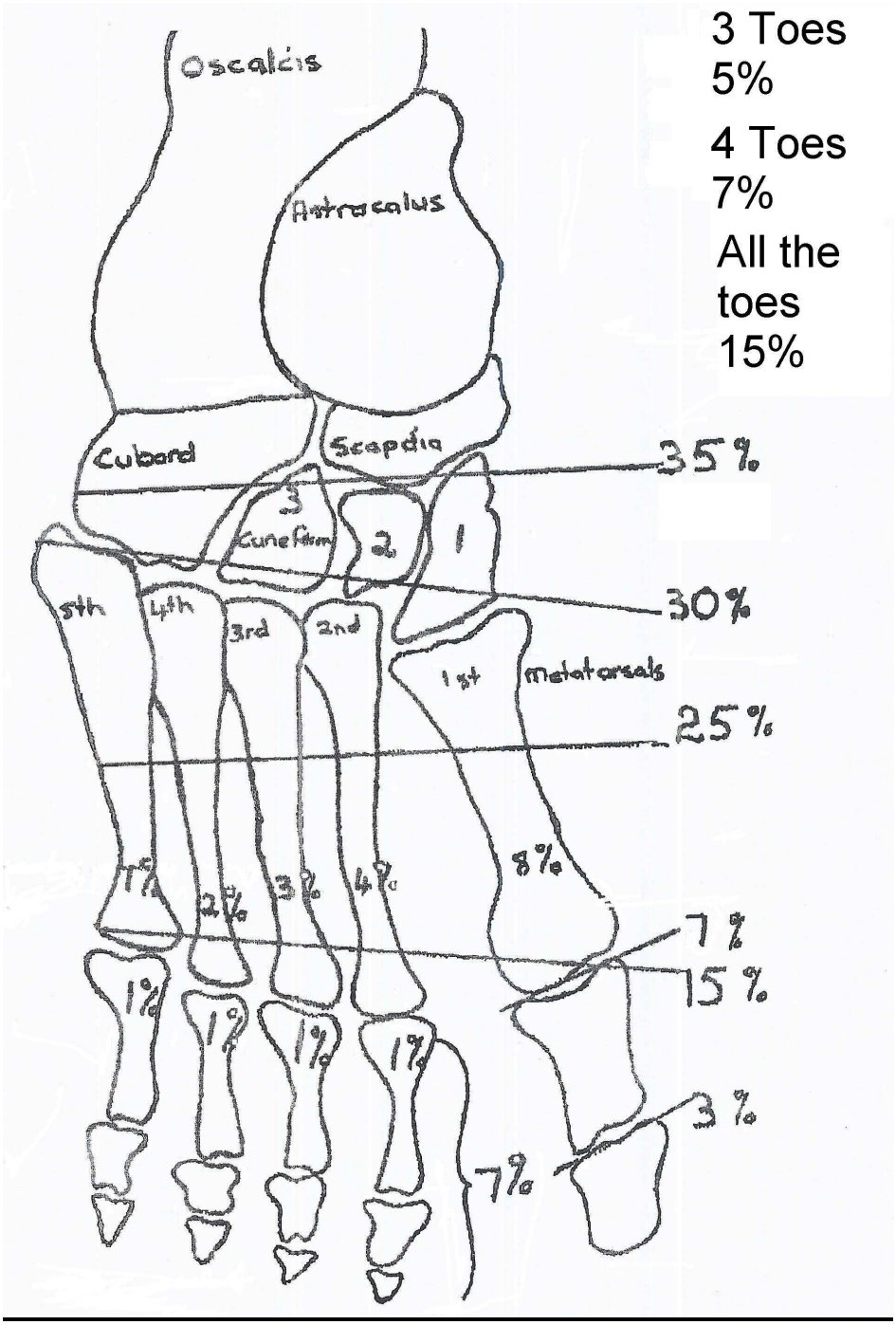


Table Twenty – Two

I.P. joint of the big toe
Amputation through joint = 3%permanent disablement
Average flexion – extension of the big toe is 30

Flexion from 0	Degrees Lost	Degrees Retained	% Impairment of the big toe	%PD
0	30	0	45%	2%
10	20	10	30%	1%
20	10	20	15%	1%
30	0	30	0%	0%

Ankylosis/Arthrodesis

0 neutral and functional position	45%	2%
10	55%	2%
20	65%	3%
30 (full flexion)	75%	3%

First Schedule to the Act

Big Toe

Loss of one phalanx = 3%
Loss of both phalanx = 7%

Table Twenty – three and Twenty - four

Metacapo phalangeal joint of the big toe
Amputation through joint = 70% permanent disablement
Average flexion-extension of the big toe is 80

Dorsiflexion from 0	**Degrees Lost**	**Degrees Retained**	**% Impairment of the big toe**	**%PD**
0	50	0	34%	1%
10	40	10	28%	1%
20	30	20	21%	1%
30	20	30	14%	1%
40	10	40	7%	0%
50	0	50	0%	0%

Arthrodesis / Ankylosis

0 (neutral position)	55%	2%
10 (functional position)	49%	2%
20	62%	2%
30	74%	3%
40	87%	5%
50 (full dorsiflexion)	100%	7%

Plantar flexion from 0	**Degrees Lost**	**Degrees Retained**	**% Impairment of the big toe**	**%PD**
0	30	0	21%	1%
10	20	10	14%	1%
20	10	20	7%	0%
30	0	30	0%	0%

Arthrodesis / Ankylosis

0 (neutral position)	55%	2%
10	70%	3%
20	85%	5%
30 (full plantar flexion)	100%	7%

Table Twenty - five

% Impairment

Big toe		**Foot**		**%PD**
0-2	=	0%	=	0%
3-8	=	1%	=	0%
9-13	=	1%	=	0%
14-19	=	2%	=	1%

Big toe		Foot		%PD
20-24	=	2%	=	1%
25-30	=	3%	=	1%
31-35	=	3%	=	1%
36-41	=	4%	=	1%
42-46	=	5%	=	2%
47-52	=	5%	=	2%
53-57	=	6%	=	2%
58-62	=	6%	=	2%
63-68	=	7%	=	3%
69-73	=	7%	=	3%
74-79	=	8%	=	3%
80-84	=	11%	=	4%
85-90	=	14%	=	5%
91-95	=	17%	=	6%
96-100	=	20%	=	7%

First Schedule to the Act

Loss of all five toes = 15%
Loss of toes other than big toe:
4 toes 7%
3 toes 5%
2 toes 3%
1 toe 1%

DIP of second to fifth toes
Amputation through joint = 45% toe disablement
P I P of second to fifth toes
Amputation through joint = 60% toe disablement
M P of second to fifth toes
Amputation through joint = 80% toe disablement

Total loss of movement = 30% toe disablement

Table thirty two
% Disablement of

Each Toe		Foot		%PD
0% - 16%	=	0%	=	0%
17% - 49%	=	1%	=	0%
50% - 83%	=	3%	=	1%
84% - 100%	=	5%	=	2%

Additional impairments of the foot

	% Foot disablement	%PD

Loss of metatarsal of big toe	12	4
Loss of any other metatarsal	6	2
Loss of the head up to the distal half of the metatarsal of the big toe	6	2
Loss of head up to the distal half of any other metatarsal	3	1

The **permanent disablemen**t of toes and metatarsals are **added** together.
For example: Loss of two toes (other than the big toe) with their metatarsals.
Loss of 2 toes = 3%PD
Loss of metatarsals = 4%PD
Total PD = 7%

As a result of the severed complications arising, all amputations proximal to metatarsal amputations of the foot should be regarded as the same as a below knee amputation with a functional stump and the same permanent disablement awarded.

For example
Disarticulation at the tarsometatarsal joints (Lisfrano's amputation leads to equines) = 35% permanent disablement.
Midtarsal amputation (Chopart's amputation leads to severe equino-valgus) = 35% permanent disablement.

Table Thirty – four

% Disablement of

Foot	Lower Limb		PD		Foot	Lower Limb		PD
1	= 0.5	=	0		52	=26	=	18
2	=1	=	1		53	=26.5	=	19
3	=1.5	=	1		54	=27	=	19
4	=2	=	1		55	=27.5	=	20
5	=2.5	=	2		56	=28	=	20
6	=3	=	2		57	=28.5	=	20
7	=3.5	=	3		58	=29	=	20
8	=4	=	3		59	=29.5	=	21
9	=4.5	=	3		60	=30	=	21
10	=5	=	4		61	=30.5	=	22
11	=5.5	=	4		62	=31	=	22
12	=6	=	4		63	=31.5	=	22
13	=6.5	=	5		64	=32	=	22
14	=7	=	5		65	=32.5	=	23
15	=7.5	=	6		66	=33	=	23
16	=8	=	6		67	=33.5	=	24
17	=8.5	=	6		68	=34	=	24
18	=9	=	6		69	=34.5	=	24
19	=9.5	=	7		70	=35	=	25
20	=10	=	7		71	=35.5.	=	25
21	=10.5	=	8		72	=36	=	25
22	=11	=	8		73	=36.5	=	26
23	=11.5	=	8		74	=37	=	26
24	=12	=	8		75	=37.5	=	27
25	=12.5	=	9		76	=38	=	27
26	=13	=	9		77	=38.5	=	27
27	=.13.5	=	10		78	=39	=	27
28	=14	=	10		79	=39.5	=	28
29	=14.5	=	10		80	=40	=	28
30	=15	=	11		81	=40.5	=	29
31	=15.5	=	11		82	=41	=	29
32	=16	=	11		83	=41.5	=	29
33	=16.5	=	12		84	=42	=	29
34	=17	=	12		85	=42.5	=	30
35	=17.5	=	13		86	=43	=	30
36	=18	=	13		87	=43.5	=	31
37	=18.5	=	13		88	=44	=	31
38	=19	=	13		89	=44.5	=	32
39	=19.5	=	14		90	=45	=	32
40	=20	=	14		91	=45.5	=	32
41	=20.5	=	15		92	=46	=	32
42	=21	=	15		93	=46.5	=	33

Foot	Lower Limb		PD		Foot	Lower Limb		PD
43	=21.5	=	15		94	=47	=	33
44	=22	=	15		95	=47.5	=	34
45	=22.5	=	16		96	=48	=	34
46	=23	=	16		97	=48.5	=	34
47	=23.5	=	17		98	=49	=	34
48	=24	=	17		99	=49.5	=	35
49	=24.5	=	17		100	=50	=	35
50	=25	=	18			=	=	
51	=25.5		18			=		

Multiple toes affected

Determine the disablement of each toe then determine the foot disablement contributed by each toe; then add these foot disablements together – this total is the total disablement of the foot.

Table Thirty-five

Ankle Joint

Ankle joint – dorsi/plantar flexion
Average dorsi/plantar flexion =60
Amputation through ankle joint = 35%PD

Dorsiflexion to	Degree lost	Degree retained	Lower extremity impairment	%PD
0	20	0	5%	4%
10	10	10	3%	2%
20	0	20	0%	0%
Plantar flexion to				
0	40	0	10%	7%
10	30	10	8%	6%
20	20	20	5%	4%
30	10	30	3%	2%
40	0	40	0%	0%

Arthrodesis / Ankylosis

0 (neutral and functional position)	21%	15%
10 (dorsiflexion)	36%	25%
20 (full dorsiflexion)	50%	35%
10 (plantar flexion)	28%	20%
20 (plantar flexion)	36%	25%
30 (plantar flexion)	43%	30%
40 (full plantar flexion)	50%	35%

Impairment of inversion/eversion should be added to impairment of the ankle (not combined)

Table thirty – six

Amputation through ankle = 35%
Ankle joint – (subtalar joint) inversion/eversion
Average inversion/eversion=50

Inversion to	Degree lost	Degree retained	Impairment of the lower extremity	%PD
0	30	0	4%	3%
10	20	10	3%	2%
20	10	20	1%	1%
30	0	30	0%	0%
Eversion to				
0	20	0	3%	2%
0	10	10	1%	1%
20	0	20	0%	0%

Arthrodesis / Ankylosis

0 (neutral and functional position)	7%	5%
10 (inversion)	30%	21%
20 (inversion)	41%	29%
30 (full inversion)	50%	35%
10 (eversion)	36%	25%
20 (full eversion)	43%	30%

Table Thirty – six A

	Lower extremity impairment	%PD
Ankle instability due to lateral collateral ligament loss	18%	13%
Ankle instability due to medial collateral ligament loss	11%	8%

PD Applicable to Lower Limb Amputation

Amputation (disarticulation) through hip = 70%

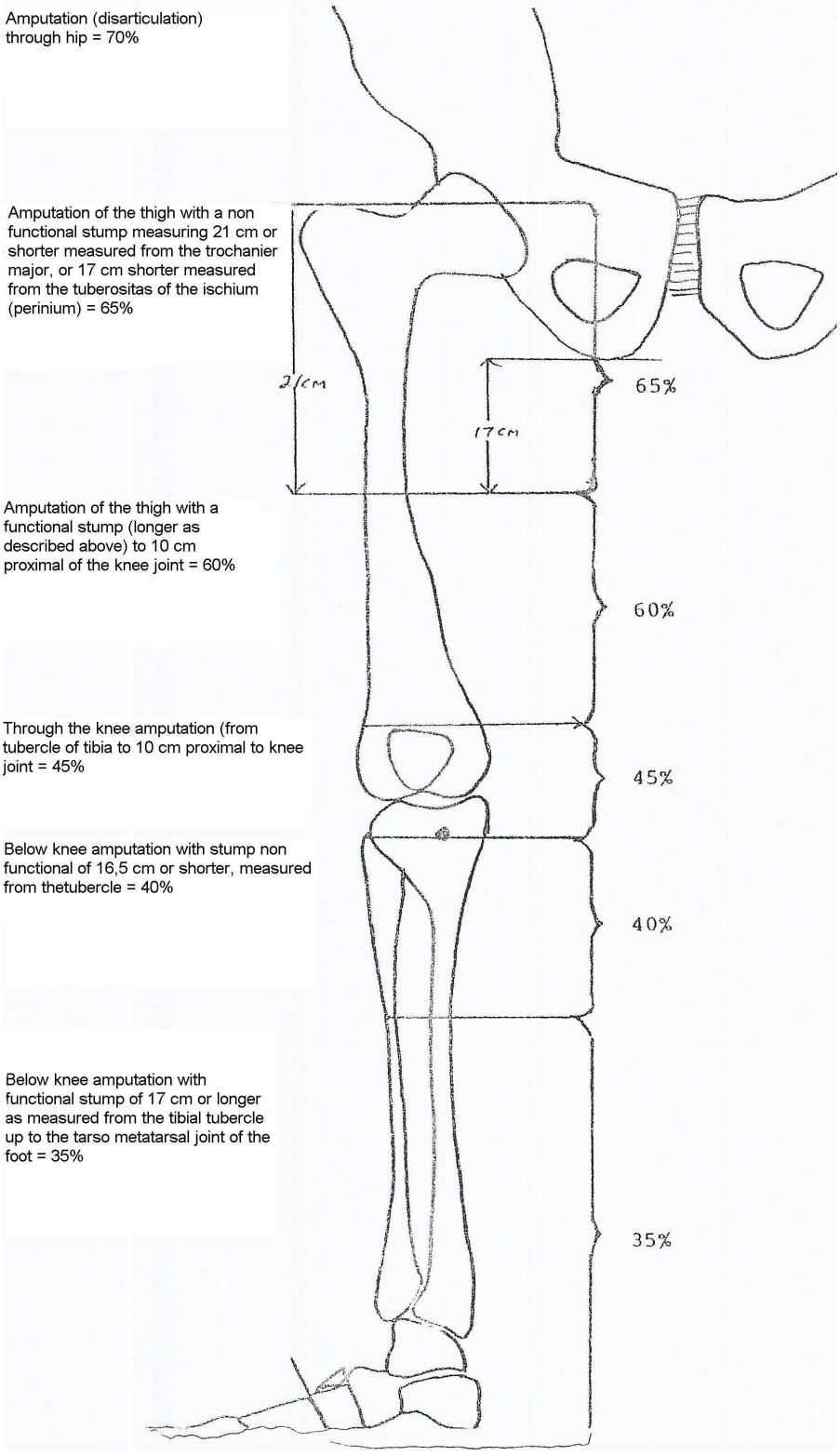
Amputation of the thigh with a non functional stump measuring 21 cm or shorter measured from the trochanier major, or 17 cm shorter measured from the tuberositas of the ischium (perinium) = 65%

Amputation of the thigh with a functional stump (longer as described above) to 10 cm proximal of the knee joint = 60%

Through the knee amputation (from tubercle of tibia to 10 cm proximal to knee joint = 45%

Below knee amputation with stump non functional of 16,5 cm or shorter, measured from thetubercle = 40%

Below knee amputation with functional stump of 17 cm or longer as measured from the tibial tubercle up to the tarso metatarsal joint of the foot = 35%



The Knee Joint

Table Thirty – seven

Knee joint – flexion/extension
Average flexion/extension = 150
Amputation through knee joint =45%PD
Amputation with a functional stump of 17 cm or longer=35%PD
Amputation with a non-functional stump(16,5 cm or shorter)=40%PD

Flexion retained	Lower extremity impairment	%PD
0	38%	27%
10	35%	25%
20	33%	23%
30	30%	21%
40	28%	20%
50	25%	18%
60	23%	16%
70	20%	14%
80	18%	13%
90	15%	11%
100	13%	9%
110	10%	7%
120	8%	6%
130	5%	4%
140	3%	2%
150	0%	0%

Table Thirty – seven B

Hyper extension to (knee joint)		
10	1%	1%
20	5%	4%
30	12%	8%
40	19%	13%
50-150	64%	45%

Arthrodesis / Ankylosis of knee

0 (neutral position)	38%	27%
10 (functional position20)	36%	25%

20	43%	30%
30	50%	35%
40	57%	40%
50-150	64%	45%

Table Thirty-eight

Impairment values of the lower extremity as a result of other conditions of the knee

	Impairment of the lower extremity	**%PD**
Patelloctomy (medial of lateral with loss of power)	14%	10%
Menisectomy (with loss of shock absorption)	4%	3%
Menisectomy both menisci (medial and lateral)	10%	7%
Menisectomy – both menisci of both knees (multiplicity applicable)	24%	17%
Knee arthroplasty (knee – replacement – in optimum position)	28%	20%
Post traumatic osteo arthritis of the knee	14%	10%
Anterior cruciate ligament loss	14%	10%
Posterior cruciate ligament loss	18%	13%
Collateral ligament loss – with moderate instability	11%	8%
Collateral ligament loss – with severe instability	18%	13%
Post traumatic varus deformity (more than 15)	14%	105
Post traumatic valgus deformity (more than 20)	14%	10%

The above are the percentages for successful procedures, to be combined with other impairments where applicable.

Hip Joint

Table Thirty – nine

Hip joint – average flexion/extension = 130
Amputation = 70% PD

Forward flexion from	Degree lost	Degree retained	Lower extremity impairment	%PD
0	100	0	18%	13%
10	90	10	16%	11%
20	80	20	14%	10%
30	70	30	12%	8%
40	60	40	11%	8%
50	50	50	9%	6%
60	40	60	7%	5%
70	30	70	5%	4%
80	20	80	4%	3%
90	10	90	2%	1%
100	0	100	0%	0%

Arthrodesis / Ankylosis of the hip joint

0 (neutral position)	70%	49%
10	62%	43%
20	54%	38%
25 (functional position	50%	35%
30	53%	37%
40	60%	42%
50	67%	47%

Table Forty

Hip joint – Backward extension

Backward extension to	Degree lost	Degree retained	Lower extremity impairment	%PD
0	30	0	5%	4%
10	20	10	4%	3%
20	10	20	2%	1%
30	0	30	0%	0%

Arthrodesis / Ankylosis

0 (neutral position)	70%	49%
10 (extension)	80%	56%
10 (extension)	80%	565
20 (extension)	90%	63%
25 (full extension backwards)	100%	70%

Hip joint – abduction/adduction
Average motion is 60

Abduction to	Degrees lost	Degrees retained	Lower extremity % impairment	%PD
0	40	0	16%	11%
10	30	10	12%	8%
20	20	20	8%	6%
30	10	30	4%	3%
40	0	40	0%	0%
Adduction to				
0	20	0	8%	6%
10	10	10	4%	3%
20	0	20	0%	0%

Arthrodesis / Ankylosis

0 (neutral position)	70%	49%
10 (abduction)	78%	55%
20	85%	60%
30	93%	65%
40 (full abduction)	100%	70%
0 (neutral position)	70%	49%
10 (adduction)	85%	60%
20 (full adduction)	100%	70%

Table Forty – two
Hip joint – Rotation
Average internal / external rotation is 90

Internal rotation	**Degree lost**	**Degree retained**	**Lower extremity % impairment**	**%PD**
0	40	0	10%	7%
10	30	10	8%	6%
20	20	20	5%	4%
30	10	30	3%	2%
40	0	40	0%	0%
External				

rotation				
0	50	0	13%	9%
10	40	10	10%	7%
20	30	20	8%	6%
30	20	30	5%	4%
40	10	40	3%	2%
50	0	50	0%	0%

Arthrodesis / Ankylosis

0 (neutral position)	70%	49%
10 (internal rotation)	78%	55%
20	85%	60%
30	93%	65%
40 (full internal rotation)	100%	70%
10 (external rotation)	76%	53%
20	82%	57%
30	88%	62%
40	94%	66%
50 (full external rotation)	100%	70%

Other abnormalities of the hip joint

	Lower limb disablement %	PD %
Arthroplasty (in optimum position)	21%	15%
Non – union of a hi fracture	30%	21%
Avascular necrosis of the hip	30%	21%
Loose hip prosthesis	40%	28%

Combine with loss of movement to determine disablement of the lower limb.
These conditions should be referred to the Medical Officer as these are minimum percentages.

Loss of movement

The disablement as a result of the loss of movement at each joint should be added together to determine the disablement of the joint relative to the lower limb.
This is then combined with other disablements of the limb to ultimately determine the permanent disablement.

If multiple units of the lower limb are affected, the disablement of each unit (for example foot, ankle, subtalar joint, knee, hip) is dertemined.

The values are now combined for example:
Disablement of the foot 57% = 40% Disablement of the lower limb
Disablement of the ankle 30% = 30% Disablement of the lower limb

Disablement of the knee 20% = 20% Disablement of the lower limb
Total = 66% Lower limb disablement.
(40/30= 58, 58/20=66)
Determine PD with the aid of Table 44
66% Lower limb disablement = 46% Permanent disablement.

First Schedule to the Act

Loss of leg at hip joint	PD 70%
High amputation of leg (with short stump +- 17 ,5 cm below tuberositas of ischium)	PD 70%
Above knee amputation with functional stump	PD 63%
Through knee amputation	PD 45%
Below knee amputation (+- 17cm below tubercle of tibia	PD35%
Trans metatarsal amputation	PD 21%

Shortening of the Leg

In the case of **shortening of the leg** due to fracture deformities, the following impairments are combined with other lower extremity impairments.

	% lower extremity impairment	**%PD**
Up to 1,25cm	5%	4%
1.3 to 2,6cm	10%	7%
2,7 to 3,9	15%	11%
4 to 5 cm	20%	14%

% impairment of lower extremity	PD	% impairment of lower extremity	PD	% impairment of lower extremity	PD
0	0				
1	1	35	24.5	69	48
2	1	36	25	70	49
3	2	37	26	71	50
4	3	38	27	72	50
5	3.5	39	27	73	51
6	4	40	28	74	52
7	5	41	29	75	52.5
8	6	42	29	76	53
9	6	43	30	77	54
10	7	44	31	78	55
11	8	45	31.5	79	55
12	8	46	32	80	56
13	9	47	33	81	5
14	10	48	34	82	57
15	10.5	49	34	83	58
16	11	50	35	84	59
17	12	51	36	85	59.5
18	13	52	37	86	60
19	13	53	38	87	61
20	14	54	38.5	88	62
21	15	55	39	89	62
22	15	56	39	90	63
23	16	57	40	91	64
24	17	58	41	92	64
25	17.5	59	41	93	65
26	18	60	42	94	66
27	19	61	43	95	66.5
28	20	62	43	96	67
29	20	63	44	97	68
30	21	64	45	98	69
31	22	65	45.5	99	69
32	22	66	46	100	70
33	23	67	47		
34	24	68	48		

SPINAL COLUMN

- Spinal (vertebra) fractures:

Compression	PD
Up to 25%	3%
26 – 50%	6%
More than 50%	10%

- Fractures of the posterior elements are taken as 3% permanent disablement.

  Disablement as a result of compression of the body of a vertebra and fractures of the posterior elements of that vertebra are combined.

- Disablement caused by neurological sequelae of a spinal injury should also be taken into account and is combined with disablement of the vertebrae.

- Dislocation or subluxation of a vertebra = PD 5%

  When two or more vertebrae are dislocated (and reduced again), the disablements are combined, for example, the dislocation of 3 vertebrae =
  14%PD (5/5 = 10, 10/5 = 14%)

  When reduction of the dislocated vertebrae is not possible, disablement is determined by restricted movement and accompanying neurologic sequelae.

- **Other conditions of the spinal column:**

- Fusion = 15% plus 5% for each additional level.

- Laminectomy = 10% plus 5% for each additional level.

- Complications should be taken into account.

2 Disc lesions

	PD
Clinically suspected disc lesion with no fall out	0%
Surgically removed disc with no fall out	10%
Disc leasions with neurological fall out (conservatively/ Surgically treated)	10%

- **combined with**

(a) abnormal movement in spinal column of limbs
(b) fractures of vertebrae
(c) neurological fall out

(d) Combinations of the above.

THE PELVIS

3. Disablement as a result of various conditions

	PD
Healed fracture, without displacement or complications	0%
Healed fracture, with displacement without complications	
Single ramus	0%
Bilateral rami	0%
Lleum	0%
Symphysis, without displacement	5%
Sacrum	5%
Coccyx	0%
Healed fracture with displacement and with complications	
Single ramus	0%
Bilateral rami	5%
Lleum	2%
Symphysis, with separation	10%
Sacro-iliac displacement of more than 2.5cm	10%
Coccyx, non union or excision	5%

Other complications of pelvis fracture e.g. rapture of the urethra are additional to the above.

Multiplicity Tables follow…../

MULTIPLICITY TABLES

1	2																																																	
2	3	4																																																
3	4	5	6																																															
4	5	6	7	8																																														
5	6	7	8	9	10																																													
6	7	8	9	10	11	12																																												
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9	10	11	12	13	14	14	15	16	17																																									
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13	14	15	16	16	17	18	19	20	21	22	23	23	24																																					
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	1	**2**	**3**	**4**	**5**	**6**	**7**	**8**	**9**	**10**	**11**	**12**	**13**	**14**	**15**	**16**	**17**	**18**	**19**	**20**	**21**	**22**	**23**	**24**	**25**	**26**	**27**	**28**	**29**	**30**	**31**	**32**	**33**	**34**	**35**	**36**	**37**	**38**	**39**	**40**	**41**	**42**	**43**	**44**	**45**	**46**	**47**	**48**	**49**	**50**

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