South Australia

Civil Liability Regulations 2013

under the Civil Liability Act 1936

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Part 1—Preliminary

1—Short title

These regulations may be cited as the Civil Liability Regulations 2013.

2—Commencement

These regulations will come into operation on 1 July 2013.

3—Interpretation

In these regulations, unless the contrary intention appears—

Act means the Civil Liability Act 1936;

AMA 5 means the 5th edition of the *Guides to the Evaluation of Permanent Impairment* published by the American Medical Association;

consequential mental harm does not include psychiatric impairment;

GEPIC means The guide to the evaluation of Psychiatric Impairment for Clinicians prepared by MWN Epstein, G Mendelson and NHM Strauss as published in the Victorian Government Gazette on 8 May 2008;

GEPIC rating, in relation to pure mental harm, means a rating in accordance with the GEPIC for the psychiatric impairment caused by the mental harm;

highest range means the range of ISVs having the highest maximum ISV;

insurer includes the nominal defendant;

ISV means injury scale value;

Le Fort I fracture means a horizontal segmented fracture of the alveolar process of the maxilla;

Le Fort II fracture means a unilateral or bilateral fracture of the maxilla—

- (a) in which the body of the maxilla is separated from the facial skeleton and pyramidal in shape; and
- (b) that may extend through the body of the maxilla down the midline of the hard palate, through the floor of the orbit and into the nasal cavity;

Le Fort III fracture means a fracture in which the entire maxilla and 1 or more facial bones are completely separated from the brain case;

medical expert, in relation to an assessment of a GEPIC rating, means a person—

- (a) who is registered under the *Health Practitioner Regulation National Law*
 - (i) to practise in the medical profession; and
 - (ii) holding specialist registration as a psychiatrist; and
- (b) who has successfully completed a course of training in the use of the GEPIC under a scheme determined by the Minister for the purposes of these regulations;

permanent impairment, in relation to an injury, means the impairment an injured person has, or is likely to have, after maximal medical improvement within the meaning of AMA 5;

psychiatric impairment means pure mental harm;

range, in relation to an ISV for an injury, means the range of ISVs for the injury set out in Schedule 1;

relevant MVA motor accident means the MVA motor accident that results in the personal injury that is relevant for the purposes of the application of these regulations in relation to a particular person;

whole person impairment, in relation to an injury, means an estimate, expressed as a percentage, of the impact of a permanent impairment caused by the injury on the injured person's overall ability to perform activities of daily living, as described by AMA 5, other than employment.

Part 2—Injury scale values

4—Injury scale value

- (1) If general damages are to be awarded by a court in relation to an injury that results from an MVA motor accident occurring on or after 1 July 2013, the court must in assessing the ISV—
 - (a) assess the ISV under any rules prescribed by these regulations; and
 - (b) have regard to the ISVs given to cases involving the same or similar injuries.
- (2) An ISV assessment must not be undertaken until the injury has stabilised.

5—Medical assessments before injury has stabilised

If a medical assessment of a person is undertaken for the purposes of determining an ISV but the health professional undertaking the assessment is of the opinion that, because the person's injury has not yet stabilised, the ISV is not able to be determined—

- (a) the health professional must provide a report to that effect; and
- (b) the insurer or nominal defendant is liable for any costs associated with the assessment and report where the insurer or the nominal defendant has requested or approved the assessment.

6—Rules for assessing ISV

- (1) This Part and Schedule 1 provide the rules under which a court must assess the ISV for an injury.
- (2) Schedule 1 provides the ranges of ISVs for particular injuries that the court is to consider in assessing the ISV for those injuries.
- (3) For an injury not mentioned in Schedule 1, a court, in assessing an ISV for the injury, may have regard to the ranges prescribed in Schedule 1 for other injuries of comparable severity.

7—ISV must be a whole number

An ISV assessed by a court must be expressed as a whole number (a number having a fraction of half or more being rounded up to the nearest whole number).

8—Injury mentioned in Schedule 1

(1) In assessing the ISV for an injury mentioned in the injury column in the table in Schedule 1, a court must consider the range of ISVs stated in the Schedule for the injury.

(2) The range of ISVs for the injury reflects the level of adverse impact of the injury on the injured person.

9—Court to have regard to certain matters

(1) In addition to providing ranges of ISVs for particular injuries, Schedule 1 sets out provisions relevant to using the Schedule to assess an ISV for particular injuries.

Examples of relevant provisions—

- (a) examples of the injury
- (b) examples of factors affecting ISV assessment
- (c) comments about appropriate level of ISV
- (2) In assessing an ISV, a court—
 - (a) must have regard to provisions referred to in subregulation (1) to the extent they are relevant in a particular case; and
 - (b) may have regard to other matters to the extent they are relevant in a particular case.
- (3) Without limiting subregulation (2), a court may have regard to—
 - (a) the injured person's age, life expectancy, pain, suffering and loss of amenities of life; and
 - (b) the effects of a pre-existing condition of the injured person; and
 - (c) difficulties in life likely to have emerged for the injured person whether or not the injury happened; and
 - (d) with respect to assessing an ISV for multiple injuries, the range for, and other provisions of Schedule 1 in relation to, an injury other than the dominant injury of the multiple injuries; and
 - (e) the extent to which the injured person has refused treatment that could lead to a significant improvement in the level of impairment caused by that injury or condition, reasons for any refusal of treatment, and any evidence provided by a health professional as to the likely effect of treatment.

10—Whole person impairment

The extent of whole person impairment is an important consideration, but not the only consideration, affecting the assessment of an ISV.

11—Multiple injuries

(1) Subject to regulation 12, in assessing the ISV for multiple injuries, a court must consider the range of ISVs for the dominant injury.

(2) To reflect the level of adverse impact of multiple injuries on an injured person, the court may assess the ISV for the multiple injuries as being higher in the range of ISVs for the dominant injury of the multiple injuries than the ISV the court would assess for the dominant injury only.

Note-

This regulation acknowledges that—

- (a) the effects of multiple injuries commonly overlap, with each injury contributing to the overall level of adverse impact on the injured person; and
- (b) if each of the multiple injuries were assigned an individual ISV and these ISVs were added together, the total ISV would generally be too high.

12—Multiple injuries and maximum dominant ISV inadequate

- (1) This regulation applies if a court considers the level of adverse impact of multiple injuries on an injured person is so severe that the maximum ISV for the dominant injury is inadequate to reflect the level of impact.
- (2) To reflect the level of impact, the court may make an assessment of the ISV for the multiple injuries that is higher than the maximum ISV for the dominant injury.
- (3) However, the ISV for the multiple injuries—
 - (a) must not be more than 100; and
 - (b) should rarely be more than 25% higher than the maximum ISV for the dominant injury.
- (4) If the increase is more than 25% of the maximum dominant ISV, the court must give written reasons for the increase.

13—Consequential mental harm

- (1) This regulation applies if a court is assessing an ISV where an injured person suffers consequential mental harm following a physical injury.
- (2) The court must treat the consequential mental harm merely as a feature of the injury.

14—Pure mental harm

- (1) This regulation applies if—
 - (a) a court is assessing an ISV; and
 - (b) a GEPIC rating for psychiatric impairment of an injured person is relevant under Schedule 1.
- (2) A GEPIC rating may be accepted by the court only if it is—
 - (a) an assessment of pure mental harm; and
 - (b) assessed by a medical expert; and
 - (c) provided to the court in a GEPIC report.

15—Pre-existing conditions

(1) This regulation applies if an injured person has a pre-existing condition that may be relevant to assessing an ISV.

(2) In considering the effect of the injury on the pre-existing condition, the court may have regard only to the extent to which the pre-existing condition has been made worse by the injury.

16—Medical report stating whole person impairment percentage

If a medical report states a whole person impairment percentage, it must state how the percentage is calculated, including—

- (a) the clinical findings; and
- (b) how the impairment is calculated; and
- (c) if the percentage is based on criteria provided under AMA 5—
 - (i) an identification of the relevant provisions of AMA 5; and
 - (ii) if a range of percentages is available under AMA 5 for an injury of the type being assessed—the reason for assessing the injury at the selected point in the range.

17—Greater weight to assessments based on AMA 5

- (1) This regulation does not apply to a medical assessment of scarring or of mental harm.
- (2) In assessing an ISV, a court must, unless it considers there is good reason for doing otherwise, give greater weight to a medical assessment of a whole person impairment percentage based on the criteria for the assessment of whole person impairment provided under AMA 5 than to a medical assessment of a whole person impairment percentage not based on the criteria.

Part 3—Damages in respect of gratuitous services

18—Determination of State average weekly earnings (section 58 of Act)

For the purposes of assessing damages to be awarded in respect of gratuitous services under section 58 of the Act in respect of a particular period, *State average weekly earnings* are to be determined by applying the relevant male *Full-time Adult Average Weekly Ordinary Time Earnings* for South Australia as published, from time to time, by the Australian Statistician.

19—Damages in respect of gratuitous services (section 58(4)(b) of Act)

- (1) For the purposes of assessing damages awarded to allow for the recompense of gratuitous services of a parent, spouse, domestic partner or child, the rate prescribed under section 58(4)(b) of the Act is \$25 per hour (indexed).
- (2) The amount applying under subregulation (1) (and followed by the word "(indexed)") is to be adjusted on 1 July of each year, beginning on 1 July 2014, by multiplying the stated amount by a proportion obtained by dividing the Consumer Price Index for the March quarter of that year by the Consumer Price Index for the March quarter 2013.

Part 4—Assessment of motor vehicle injuries

20—Assessment of motor vehicle injuries (section 76 of Act)

- (1) A claimant must—
 - (a) submit himself or herself to any medical examination by a health professional nominated by the insurer that the insurer may require; and
 - (b) within 21 days of consulting a health professional in relation to the injury to which the claim relates, or such longer period as may be reasonable in the circumstances of the case or as the insurer may allow, inform the insurer, by notice in writing, of—
 - (i) the name of the health professional; and
 - (ii) the day on which the consultation occurred; and
 - (c) within 21 days of receiving a written report from a health professional consulted by the person in relation to the injury, or such longer period as may be reasonable in the circumstances of the case, send a copy of that report to the insurer.
- (2) The cost of a medical examination under subregulation (1)(a) must be borne by the insurer.
- (3) If a claimant fails, without reasonable cause, to attend an examination as required under this regulation—
 - (a) the insurer may request that the claimant makes payment of any cancellation fees incurred because of the claimant's non attendance; and
 - (b) if a request is made, the claimant is liable to pay for any fees incurred by the insurer (and the insurer may set this off against any liability for payment of damages or compensation).
- (4) Where a written report is obtained by the insurer on the findings made, or the opinions formed, by a health professional on the examination of a claimant under subregulation (1)(a), the insurer must, within 21 days of receiving the report, send a copy of the report to the claimant.

Schedule 1—Ranges of injury scale values

Item 1	m No Injury			
Part 1	1—Central nervous system and head injuries			
1	Quadriplegia			
	Examples of factors affecting ISV scale	80	100	
	 Presence and extent of pain 			
	 Extent of any residual movement 			
	Consequential mental harm			
	 Level of function and pre-injury function 			
	 Degree of independence 			

Item No	Injury	Ra	nge
	Ability to participate in daily activities, including employment		
	 Presence and extent of secondary medical complications 		
	 Loss of reproductive or sexual function 		
	Bowel or bladder incontinence		
	Comment about appropriate level of ISV An ISV at or near the top of the range will be appropriate only if the injured person has assisted ventilation, extreme physical limitation and gross impairment of ability to communicate.		
2	Paraplegia	T	
	Examples of factors affecting ISV scale	60	80
	Presence and extent of pain		
	Extent of any residual movement		
	Consequential mental harm		
	 Level of function and pre-injury function 		
	Degree of independence		
	 Ability to participate in daily activities, including employment 		
	 Loss of reproductive or sexual function 		
	Bowel or bladder incontinence		
	Presence and extent of secondary medical complications		
3	Hemiplegia or severe paralysis of more than 1 limb	1	
	Examples of factors affecting ISV scale for item 3 The same examples apply as for item 2.		
	Additional comment for item 3 Incomplete paralyses causing whole person impairment of less than 40% must be assessed under orthopaedic injuries if it is the only injury or the dominant injury of multiple injuries.		
3.1	Complete or nearly complete paralysis	60	80
3.2	Other paralysis, causing whole person impairment of at least 40%	45	60
4	Monoplegia		
	Comment See items 5, 6 and 7 and orthopaedic injuries section.		
5	Extreme brain injury		
	Comment The injury will involve major trauma to the brain with severe permanent impairment for which there is radiological evidence	71	100
	Comment about appropriate level of ISV		
	 An ISV at or near the top of the range will be appropriate only if the injured person needs full-time nursing care and has the following— 		
	 gross disturbance of brain function 		
	• significant physical limitation and destruction of pre-existing lifestyle		

Item No	Injury		Rai	nge
		epileptic seizures		
		double incontinence		
		little or no language function		
		• little or no meaningful response to environment		
	•	An injured person with an injury for which an ISV at or near the top of the range is appropriate may have some ability to follow basic commands, recovery of eye opening, return of postural reflex movement and return to pre-existing sleep patterns.		
	Exampl	es of factors affecting ISV assessment for item 5:		
	•	Degree of insight		
	•	Life expectancy		
	•	Extent of bodily impairment		
6	Serious	brain injury		
		ent ared person will be very seriously disabled and substantially depends on or professional and other care	56	70
		e of the injury brain damage causing—		
	(a)	physical impairment, for example, limb paralysis; or		
	(b)	cognitive impairment with marked impairment of intellect and personality		
	Exampl	es of factors affecting ISV scale		
	•	Life expectancy		
	•	Extent of physical limitations		
	•	Extent of cognitive limitations		
	•	Extent of sensory impairment, for example, loss of hearing or sense of taste or smell		
	•	Level of function and pre-existing function		
	•	Degree of independence		
	•	Ability to communicate		
	•	Behavioural or psychological changes		
	•	Epilepsy confirmed by EEG or evidenced through a requirement for prophylactic medication for 6 months		
	•	Presence of and extent of secondary medical complications		
	An ISV person s	at or near the top of the range will be appropriate only if the injured ubstantially depends on others and needs professional and other care, that we overnight care and more than 6 hours of care per day		

Item No	Injury	Ra	nge
7	Moderate brain injury		
	Comment The injured person will be seriously disabled, but the degree of the injured person's dependence on others, although still present, is lower than for an item 6 injury.		
	Examples of factors affecting ISV scale		
	Life expectancy		
	Extent of physical limitations		
	• Extent of cognitive limitations		
	 Extent of sensory limitation, for example, limitation of hearing or sense of taste or smell 		
	 Level of function and pre-existing function 		
	Degree of independence		
	Ability to communicate		
	 Behavioural or psychological changes 		
	 Epilepsy or a high risk of epilepsy confirmed by EEG or requiring prophylactic medication for 6 months 		
	Presence of, and extent of, secondary medical complications		
7.1	An ISV in this item will be applicable if there is no capacity for employment, and 1 or more of the following—	41	55
	 moderate to severe cognitive impairment 		
	marked personality change		
	 dramatic effect on speech, sight or other senses 		
	 epilepsy or a high risk of epilepsy confirmed by EEG or evidenced through a requirement for prophylactic medication for 6 months. 		
7.2	An ISV in this item will be applicable if there is an increased risk of epilepsy confirmed by EEG requiring prophylactic medication for 6 months and—	21	40
	a moderate cognitive impairment		
	 loss of, or greatly reduced capacity for, employment 		
	noticeable interference with lifestyle		
8	Minor brain injury	1	П
	Comment An ISV under this item will be applicable if there is evidence of physical injury causing the brain damage. The injured person will make a good recovery and be able to take part in normal social life and to return to work. There may be minor problems persisting that prevent a restoration of normal function	6	20
	Examples of factors affecting ISV scale		
	 Severity of any physical injury causing the brain damage, having regard to— 		
	 any medical assessment made immediately after the injury was caused, for example, CT or MRI scans, an ambulance officer's assessment or hospital emergency unit assessment; 		

Item No	Injury	Range
	and	
	(b) significant post-traumatic amnesia.	
	Extent of any ongoing, and possibly permanent, disability	
	Extent of any personality change	
	• Depression	
	Extent of physical limitations	
	Extent of cognitive limitations	
	 Extent of sensory limitation, for example, limitation of hearing or sense of taste or smell 	
	Level of function and pre-existing function	
	Degree of independence	
	Ability to communicate	
	Behavioural or psychological changes	
	Presence of, and extent of, secondary medical complications	
	Comment about appropriate level of ISV An ISV at or near the top of the range will be appropriate if:	
	 the injured person has epilepsy or an increased risk of epilepsy confirmed by EEG and the use of prophylactic medication; and 	
	 there is on-going reduced concentration and memory, or reduced mood control, that does not significantly interfere with the person's ability to take part in normal social life or return to work. 	
9	Minor head injury, other than a skeletal injury of the facial area	
	Comment Brain damage, if any, is minimal.	0 5
	Examples of the injury	
	Uncomplicated skull fracture	
	Concussion with transitory loss of consciousness and no residual effects	
	Examples of factors affecting ISV scale	
	Severity of any physical injury causing brain damage	
	Length of time to recover from any symptoms	
	Extent of ongoing symptoms	
	Presence, or absence of, headaches	
	Comment about appropriate level of ISV	
	 An ISV at the bottom of the range will be applicable for an injury from which the injured person fully recovers within a few weeks 	
	 An ISV at or near the top of the range will be appropriate if there is an uncomplicated skull fracture and/or there are associated concussive symptoms of dizziness, headache and memory loss (usually persisting for less than 6 months) 	

Item No	Injury	Ra	nge
Part 2—I	Pure mental harm		
	General comment This Part includes references to ratings on the psychiatric impairment scale, Guide to the Evaluation of Psychiatric Impairment for Clinicians (GEPIC).		
10	Extreme psychiatric impairment		
	Example of the injury An ISV score in the lower part of the range will be appropriate if psychiatric impairment is assessed with a GEPIC rating of class 5.	41	65
11	Serious psychiatric impairment	T	T
	Comment about appropriate level of ISV An ISV under this item will be applicable if psychiatric impairment is assessed with a GEPIC rating of class 4.	26	40
12	Moderate psychiatric impairment	T	T
	Comment There is generally only moderate impairment.	8	25
	Example of the injury An ISV score in this range will be appropriate if psychiatric impairment is assessed with a moderate GEPIC rating of Class 3		
13	Minor psychiatric impairment	1	1
	Comment There is generally only mild impairment.	0	7
	Comment about appropriate level of ISV An ISV near the top of the range will be applicable if psychiatric impairment is assessed with a mild GEPIC rating of Class 2. An ISV near the bottom of the range will be applicable if psychiatric impairment is assessed with a GEPIC rating of Class 1.		
Part 3—I	Facial injuries		
Division	1—Skeletal injuries of the facial area		
	Examples of factors affecting ISV assessment for items 14 to 22		
	Extent of skeletal or functional damage		
	degree of cosmetic damage or disfigurement		
	Consequential mental harm		
	availability of cosmetic repair		
14	Extreme facial injury	Π	Π
	Comment The injury will involve severe traumatic injury to the face requiring substantial reconstructive surgery.	26	45
	Examples of the injury		
	A Le Fort I fracture or Le Fort II fracture if the degree of incapacity and disfigurement after reconstructive surgery will be very severe		
1	A Le Fort III fracture causing incapacity in daily activities		

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Item No	Injury	Rai	nge
	Additional example of factor affecting ISV scale The extent of any neurological impairment or effect on the airway		
	Note—		Ī
	Le Fort I fracture, Le Fort II fracture and Le Fort III fracture are will be defined in regulation 3.		
15	Serious facial injury		
	Comment The injury will involve serious traumatic injury to the face requiring reconstructive surgery that is not substantial.	14	25
	Examples of the injury		Ī
	A Le Fort I fracture or Le Fort II fracture if the degree of incapacity and disfigurement after reconstructive surgery will not be very severe		
	 A Le Fort III fracture if no serious deformity will remain after reconstructive surgery 		
	A serious or multiple fracture of the nasal complex either or both—		İ
	(a) requiring more than 1 operation; and		Ī
	(b) causing 1 or more of the following—		Ī
	 permanent damage to the airway 		Ī
	 permanent damage to nerves or tear ducts 		İ
	• facial deformity.		ĺ
	 A serious cheekbone fracture that will require surgery and cause serious disfigurement and permanent effects despite reconstructive surgery, for example, hyperaesthesia or paraesthesia 		
	A very serious multiple jaw fracture that will—		Ī
	(a) require prolonged treatment; and		Ī
	(b) despite reconstructive surgery, cause permanent effects, for example, severe pain, restriction in eating, paraesthesia or a risk of arthritis in the joints.		
	 A severed trunk of the facial nerve (7th cranial nerve), causing total paralysis of facial muscles on 1 side of the face 		
	Additional examples of factors affecting ISV scale		Ī
	 Any neurological impairment or effect on the airway 		Ī
	Permanent cosmetic deformity		Ī
	Comment about appropriate level of ISV		Ī
	• An ISV at or near the bottom of the range will be appropriate if the injury causes permanent cosmetic deformity, asymmetry of 1 side of the face and limited consequential mental harm.		
	 An ISV at or near the top of the range will be appropriate if the injury causes serious bilateral deformity and significant consequential mental harm. 		
16	Moderate facial injury	· · · · · · · · · · · · · · · · · · ·	
	Examples of the injury	6	13

Item No	Injury		Ra	nge
	•	A simple cheekbone fracture, requiring minor reconstructive surgery, from which the injured person will fully recover with little cosmetic damage		
	•	A fracture of the jaw causing—		
		(a) permanent effects, for example, difficulty in opening the mouth or in eating; or		
		(b) hyperaesthesia or paraesthesia in the area of the fracture.		
	•	Damaged branches of the facial nerve (7th cranial nerve) with permanent paralysis of some of the facial muscles		
	•	A displaced fracture of the nasal complex from which the injured person will almost fully recover after surgery		
	•	A severed sensory nerve of the face with minor permanent paraesthesia		
17	Minor f	acial injury	ı	
	Exampl	es of the injury	0	5
	•	A simple cheekbone fracture, for which surgery is not required and from which the injured person will recover fully		
	•	A simple jaw fracture, requiring immobilisation and from which the injured person will recover		
	•	A stable fracture of the joint process of the jaw		
	•	A displaced fracture of the nasal complex requiring only manipulation		
	•	A simple undisplaced fracture of the nasal complex, from which the injured person will fully recover		
	•	A severed sensory nerve of the face, with good repair causing minimal or no paraesthesia		
18	Injury t	o teeth or gums	ı	1
	Comme There w	nt ill generally have been a course of treatment as a result of the injury.		
	Exampl	es of factors affecting ISV scale		
	•	Extent and degree of discomfort during treatment		
	•	Difficulty with eating		
	If protra	nt about appropriate level of ISV cted dentistry causes the injury, the ISV may be higher than the ISV for enjury caused by something else.		
18.1	Loss of c	or serious damage to more than 3 teeth, serious gum injury or serious ection	6	12
18.2	Loss of a	or serious damage to 2 or 3 teeth, moderate gum injury or moderate gum	3	5
18.3	Loss of a	or serious damage to 1 tooth, minor gum injury or minor gum infection	0	2
Division 2	2—Scarri	ng to the face	ı	T
	This Div	comments vision will usually apply to an injury involving skeletal damage only if the damage is minor		

Item No	Injury	Rai	nge
19	Extreme facial scarring		
	Examples of the injury	21	50
	 Widespread area scarring, for example, over the side of the face or another whole area 		
	Severe contour deformity		
	 Significant deformity of the mouth or eyelids with muscle paralysis or tic 		
	Comment about appropriate level of ISV		
	 An ISV in the upper half of the range may be appropriate if the injured person is relatively young, the cosmetic damage is very disfiguring and the consequential mental harm is severe 		
	 An ISV at or near the top of the range will be appropriate if the injury is caused by burns that resulted in loss of the entire nose, eyelids or ears. 		
20	Serious facial scarring		
	Examples of the injury	11	20
	Substantial disfigurement and significant consequential mental harm		
	Discoloured hypertrophic or keloid scarring		
	Serious contour defects		
	Severe linear scarring		
	Extensive atrophic scarring		
21	Moderate facial Scarring	,	
	Comment Any consequential mental harm is minor, or having been considerable at the outset, has greatly diminished.		
	Examples of the injury	6	10
	 Scarring, the worst effects of which will be reduced by plastic surgery that will leave minor cosmetic damage 		
	Scars crossing lines of election with discoloured, indurated, hypertrophic or atrophic scarring, of moderate severity		
22	Minor facial scarring		
	Examples of the injury	0	5
	A single scar able to be camouflaged		
	 More than 1 very small scar if the overall effect of the scars is to mar, but not markedly to affect, appearance and consequential mental harm is minor 		
	• Almost invisible linear scarring, in lines of election, with normal texture and elevation		
Part 4—I	injuries affecting the senses		
Division	1—General comment		
	Injuries mentioned in this Part are commonly symptoms of brain and nervous system injury		

Item No	Injury	Ra	nge
Division 2	—Injuries affecting the eyes		
23	Total sight and hearing impairment		
	Comment The injury ranks with the most devastating injuries.	90	100
	Examples of factors affecting ISV scale		
	• Degree of insight		
	Age and life expectancy		
24	Total sight impairment		
	Examples of factors affecting ISV scale	50	80
	• Degree of insight		
	Age and life expectancy		
25	Complete sight impairment in 1 eye with reduced vision in the other eye		
	Comment about appropriate level of ISV An ISV at or near the top of the range will be appropriate if there is serious risk of further significant deterioration in the remaining eye.	25	50
26	Complete sight impairment in 1 eye or total loss of 1 eye		
	Examples of factors affecting ISV scale	26	30
	 The extent to which the injured person's activities are adversely affected by the impairment or loss 		
	Associated scarring or cosmetic damage		
	Comment about appropriate level of ISV An ISV at or near the top of the range will be appropriate if there is a minor risk of sympathetic ophthalmia.		
27	Serious eye injury		
	Examples of the injury	11	25
	• A serious but incomplete loss of vision in 1 eye without significant risk of loss or reduction of vision in the other eye		
	An injury causing double vision that is not minor and intermittent		
28	Moderate eye injury		
	Example of the injury Minor but permanent impairment of vision in one eye, including if there is double vision that is minor and intermittent	6	10
29	Minor eye injury		
	Examples of the injury	0	5
	A minor injury, for example, from being struck in the eye, exposed to smoke or other fumes or being splashed by liquids—		
	(a) causing initial pain and temporary interference with vision; and		
	(b) from which the injured person will fully recover within a relatively short time		

Item No	Injury	Ra	nge
Division	3—Injuries affecting the ears		
30	Extreme ear injury	Т	
	Definition of injury The injury involves a binaural hearing loss of at least 80%.	36	55
	Additional examples of factors affecting ISV scale		
	 Associated problems, for example, severe tinnitus, moderate vertigo, a moderate vestibular disturbance or headaches 		
	 Availability of hearing aids or other devices that may reduce the hearing loss 		
	Comment about appropriate level of ISV An ISV at or near the top of the range will be appropriate if the injury happened at an early age so as to prevent or to seriously affect the development of normal speech		
31	Serious ear injury	T	T
	Definition of injury The injury involves—	26	35
	(a) a binaural hearing loss of at least 50% but less than 80%; or		
	(b) severe permanent vestibular disturbance.		
	Comment about appropriate level of ISV		
	 An ISV in the lower half of the range will be appropriate if there is no speech impairment or tinnitus 		
	 An ISV in the upper half of the range will be appropriate if there is speech impairment and tinnitus. 		
32	Moderate ear injury	ı	T
	Definition of injury The injury involves—	11	25
	(a) a binaural hearing loss of at least 20% but less than 50%; or		
	(b) significant permanent vestibular disturbance.		
	Comment about appropriate level of ISV An ISV at or near the top of the range will be appropriate if there are problems associated with the injury, for example, severe tinnitus, moderate vertigo, a moderate vestibular disturbance or headaches.		
33	Minor ear injury		
	Definition of injury The injury involves a binaural hearing loss of less than 20%.		
	Comment		
	 This item covers the bulk of hearing impairment cases 		
	• The injury is not to be judged simply by the degree of hearing loss		
	There will often be a degree of tinnitus present		
	 There may also be minor vertigo or a minor vestibular disturbance causing loss of balance 		
	A vestibular disturbance may increase the level of ISV.		

Item No	Injury	Ra	nge
33.1	Moderate tinnitus and hearing loss	6	11
33.2	Mild tinnitus with some hearing loss	4	5
33.3	Slight or occasional tinnitus with slight hearing loss or an occasional vestibular disturbance, or both	0	3
Division 4	4—Impairment of taste or smell		
34	Total loss of taste or smell, or both		
	Comment about appropriate level of ISV	6	9
	 An ISV at or near the bottom of the range will be appropriate if there will be a total loss of either taste or smell 		
	• An ISV at or near the top of the range will be appropriate if there will be a total loss of both taste and smell.		
35	Partial loss of smell or taste, or both		
_	Comment about appropriate level of ISV	0	5
	 An ISV at or near the bottom of the range will be appropriate if there will be a partial loss of either taste or smell 		
	 An ISV at or near the top of the range will be appropriate if there will be a partial loss of both taste and smell. 		
Part 5—I	Injuries to internal organs		
Division 1	1—Chest Injuries		
	Example of factors affecting ISV assessment for items 36 to 39 The level of any reduction in the capacity for employment and enjoyment of life		
36	Extreme chest injury		
	Comment The injury will involve severe traumatic injury to the chest, or a large majority of the organs in the chest cavity, causing a high level of disability and ongoing medical problems.	46	65
	Comment about appropriate level of ISV An ISV at or near the top of the range will be appropriate if there will be total removal of 1 lung or serious heart damage, or both, with serious and prolonged pain and suffering and significant permanent scarring.		
37	Serious chest injury		
	Comment The injury will involve serious traumatic injury to the chest or organs in the chest cavity, causing serious disability and ongoing medical problems.		
	Examples of the injury	21	45
	A trauma to 1 or more of the following, causing permanent damage, physical disability and impairment of function—		
	 the chest (e.g. the chest wall mechanics with consequent restrictive ventilatory impairment) 		
	• the heart		
	• 1 or both of the lungs (eg scarring or restrictive pleural disease)		
		i	ı

Item No	Injury	Ra	nge
	 an injury that causes the need for oxygen therapy for about 16 to 18 hours a day 		
	Example of factors affecting ISV scale The need for a permanent tracheostomy		
	Comment about appropriate level of ISV An ISV at or near the top of the range will be appropriate if, after recovery, there are both of the following—		
	(a) serious impairment to cardio-pulmonary function;		
	(b) whole person impairment for the injury of, or of nearly, 40%.		
38	Moderate chest injury		
	Example of the injury The injury will involve serious traumatic injury to the chest or organs in the chest cavity, causing moderate disability and ongoing medical problems	11	20
	Examples of factors affecting ISV scale		
	 Duration and intensity of pain and suffering (eg chronic inter costal neuralgia) 		
	 The degree of permanent impairment of lung or cardiac function, as evidenced by objective test results 		
	 The need for a temporary tracheostomy for short-term airway management 		
	Comment about appropriate level of ISV An ISV at or near the top of the range will be applicable if there are multiple rib fractures causing—		
	(a) a flail segment (flail chest) requiring mechanical ventilation in the acute stage; and		
	(b) moderate permanent impairment of cardio-pulmonary function.		
	An ISV at near the bottom of the range will be appropriate if there will be a partial loss of a breast without significant consequential mental harm.		
	An ISV in the lower half of the range will be appropriate if there was a pneumothorax, or haemothorax, requiring intercostal catheter insertion.		
39	Minor chest injury		
	Examples of factors affecting ISV scale for items 39.1 and 39.2		
	complexity of any fractures		
	extent of injury to underlying organs		
	• extent of any disability		
	duration and intensity of pain and suffering		
39.1	Complicated or significant fracture, or internal organ injury, that substantially rese	olves	
	Comment The injury will involve significant or complicated fractures, or internal injuries, that cause some tissue damage but no significant long-term effect on organ function.	5	10
	Examples of the injury		

Item No	Injury		Rai	nge
	•	Multiple fractures of the ribs or sternum, or both, that may cause cardio-pulmonary contusion		
	•	Internal injuries that cause some tissue damage but no significant long-term effect on organ function		
	Comme	nt about appropriate level of ISV		
	•	An ISV at or near the bottom of the range will be appropriate if there is a fractured sternum that substantially resolves, and there is some ongoing pain and activity restriction		
	•	An ISV at or near the top of the range will be appropriate if the injury causes significant persisting pain and significant activity restriction.		
39.2	Soft tissi	ue injury, minor fracture or minor internal organ injury		
	Comme	nt	0	4
	•	The injury will involve a soft tissue injury, minor fracture, or minor and non-permanent injury to internal organs		
	•	There may be persistent pain from the chest, for example, from the chest wall or sternochondral or costochondral joints.		
	Exampl	es of the injury		
	•	A single penetrating wound, causing some tissue damage but no long-term effect on lung function		
	•	An injury to the lungs caused by the inhalation of toxic fumes or smoke that will not permanently interfere with lung function		
	•	A soft tissue injury to the chest wall, for example, a laceration or serious seatbelt bruising		
	•	Fractured ribs or a minor fracture of the sternum causing serious pain and disability for weeks, without internal organ damage or permanent disability		
	Comme	nt about appropriate level of ISV		
		at or near the bottom of the range will be appropriate if there is a soft jury from which the injured person will fully recover.		
Division 2	2—Lung i	injury other than asthma		
	The leve	comments el of an ISV for lung disease often reflects the fact that the disease is ng and there is a risk of the development of secondary medical conditions.		
		es of factors affecting ISV assessment for items 40 to 43 tential mental harm may increase the level of ISV		
40	Extreme	e lung injury		
	Example	es of the injury	46	65
	•	Lung disease involving serious disability causing severe pain and dramatic impairment of function and quality of life		
	•	A recurrent pulmonary embolism resulting in failure of the right side of the heart requiring a lung transplant, heart transplant or both		
	Addition	nal examples of factors affecting ISV scale		
	•	Age		

Item No	Injury	Ra	nge
	Likelihood of progressive worsening		
	Duration and intensity of pain and suffering		
41	Serious lung injury		
41.1	Serious lung injury if progressive worsening of lung function		
	Example of item 41.1 Lung disease, causing—	25	45
	significantly reduced and worsening lung function		
	 prolonged and frequent coughing 		
	• restriction of physical activity, employment and enjoyment of life.		
	Additional examples of factors affecting ISV scale for item 41.1		
	• The possibility of lung cancer developing may increase the level of ISV		
	The need for continuous oxygen therapy		
41.2	Serious lung injury if no progressive worsening of lung function		
	Examples of item 41.2	11	24
	 Lung disease causing breathing difficulties, short disabling breathlessness, requiring frequent use of inhaler 		
	 Lung disease causing a significant effect on employment and social life, including inability to tolerate a smoky environment, with an uncertain prognosis 		
	 A recurrent pulmonary embolism causing pulmonary hypertension and cor pulmonale 		
42	Moderate lung injury		
	Example of the injury A pulmonary embolism requiring anticoagulant therapy for at least 1 year or pulmonary endarterectomy	6	11
43	Minor lung injury		
	Examples of the injury	0	5
	• Lung disease causing slight breathlessness, with—		
	(a) no effect on employment; and		
	(b) the likelihood of substantial and permanent recovery within a few years after the injury is caused		
	 A pulmonary embolism requiring anticoagulant therapy for less than 1 year 		
	Comment about appropriate level of ISV An ISV under this item will also will be appropriate if there is lung disease causing temporary aggravation of bronchitis, or other chest problems, that will resolve within a few months.		
Division 4	1—Injuries to male reproductive system	1	
	General comment		
	 This Division applies to injuries caused by physical trauma rather than as a secondary result of psychiatric impairment 		

Item No	Injury		Ra	nge
	•	For psychiatric impairment that causes loss of reproductive system function, (see psychiatric impairment)		
	•	Sterility is usually either—		
		(a) caused by surgery, chemicals or disease; or		
		(b) caused by a traumatic injury that is often aggravated by scarring.		
	Exampl	es of factors affecting ISV assessment for items 44 to 47		
	•	Consequential mental harm		
	•	Effect on social and domestic life		
44	Impoter	nce and sterility	ı	
	Addition	nal examples of factors affecting ISV scale	5	37
	•	Age		
	•	Whether the injured person has children		
	•	Whether the injured person intended to have children or more children		
44.1	Comme	nt about appropriate level of ISV		
	•	An ISV at or near the top of the range will be appropriate if a young injured person has total impotence and loss of sexual function and sterility		
	•	An ISV in the upper half of the range will be appropriate if a young injured person without children has uncomplicated sterility, without impotence or any aggravating features		
	•	An ISV near the middle of the range will be appropriate if a middle-aged injured person with children has sterility and permanent impotence		
	•	An ISV in lower half of the range will be appropriate if an injured person with children may have intended to have more children and has uncomplicated sterility, without impotence or any aggravating features		
	•	An ISV at or near the bottom of the range will be applicable if the sterility has little impact.		
45	Loss of	part or all of the penis		
	Comme	nt about appropriate level of ISV	5	25
	•	Extent of penis remaining		
	•	Availability of prosthesis		
	•	Extent to which sexual activity will be possible		
46		both testicles 1 44 where sterility results	5	37
47	Loss of	1 testicle		
		nal example of factors affecting ISV scale smetic damage or scarring	2	11
	An ISV	nt about appropriate level of ISV at or near the bottom of the range will be appropriate if the injury does not eproductive capacity.		

Item No	Injury	Ra	nge
Division	5—Injuries to female reproductive system		
	General comment		
	 This Division applies to injuries caused by physical trauma rather than as a secondary result of psychiatric impairment 		
	 For psychiatric impairment that causes loss of reproductive system function, (see psychiatric impairment). 		
	Examples of factors affecting ISV assessment for items 48 to 49		
	Extent of any physical trauma		
	Whether the injured person has children		
	Whether the injured person intended to have children or more children		
	• Age		
	• Scarring		
	Depression or consequential mental harm		
	Effect on social and domestic life		
48	Infertility		
48.1	Infertility causing severe effects		
	Example Infertility with severe depression, anxiety and pain	16	35
48.2	Infertility causing moderate effects		
	Example Infertility without any medical complication if the injured person has children	9	15
	Comment about appropriate level of ISV An injury under this item is applicable even if there is consequential mental harm		
48.3	Infertility causing minor effects		
	Example Infertility if—	0	8
	(a) the injured person was unlikely to have had children, for example, because of age; and		
	(b) there is little or no consequential mental harm		
49	Any other injury to the female reproductive system		
49.1	Injury to female genitalia or reproductive organs, or both		
	Comment about appropriate level of ISV	3	25
	 An ISV at or near the top of the range will be appropriate if the injury causes the early onset of menopause or irregular hormonal activity 		
	 An ISV at or near the middle of the range will be appropriate if the injury causes: 		
	 development of a prolapse or fistula 		
	a laceration or tear with good repair.		
49.2	Female impotence		
	Comment	5	15

Item No	Injury	Ra	nge
	The injury may be correctable by surgery.		
	Additional examples of factors affecting ISV scale The level of sexual function or the extent of any corrective surgery		
49.3	An injury causing an inability to give birth by normal vaginal delivery, for example pelvic ring disruption or deformity	e, becai	ise of
	Comment The injury may be correctable by surgery.	4	15
49.4	Reduced fertility, caused by, for example, trauma to ovaries or fallopian tubes	2	11
Division (6—Injuries to digestive system		
	on 1—Upper digestive tract		
50	Extreme injury to the digestive system caused by trauma		
	Examples of the injury	19	40
	Severe permanent damage to the upper digestive system, with ongoing debilitating pain and discomfort, diarrhoea, nausea and vomiting that—		
	(a) are not controllable by drugs; and		
	(b) causes weight loss of at least 15%.		
	 An injury to the throat requiring a permanent gastrostomy 		
	Comment about appropriate level of ISV		
	• An ISV at or near the bottom of the range will be appropriate if there is an injury to the oropharynx / oesophagus (throat) requiring a temporary gastrostomy for more than 1 year and permanent dietary changes, for example, a requirement for a soft food diet		
	 An ISV at or near the top of the range will be appropriate if there is an injury to the oropharynx / oesophagus (throat) requiring a permanent gastrostomy, with significant ongoing symptoms. 		
	Examples of factors affecting ISV scale		
	 the extent of any voice or speech impairment 		
	need for ongoing endoscopic procedure		
51	Serious injury to the digestive system caused by trauma		
	Examples of the injury A serious injury causing long-term complications and requiring continuous medication	11	18
	Examples of factors affecting ISV scale		
	The extent of any ongoing voice or speech impairment		
	 Whether a feeding tube was required, and if so, for how long it was required 		
	• Urgent and / or uncontrolled bowel use		
	An ISV under this item is applicable if a feeding tube is required for between 3 and 12 months		
52	Moderate injury to the digestive system caused by trauma		
	Examples of the injury	6	10

Item No	Injury	Rai	nge			
	 A blunt trauma or a penetrating stab wound, causing some permanent tissue damage, but with no significant long-term effect on digestive function 					
	 An injury requiring a feeding tube for less than 3 months 					
	Example of factors affecting ISV scale					
	 Whether a feeding tube was required, and if so, for how long it was required 					
	 Whether dietary changes are required to reduce the risk of aspiration because of impaired swallowing 					
53	Minor injury to the digestive system caused by trauma	1				
	Examples of the injury	0	5			
	 A soft tissue injury to the abdomen wall, for example, a laceration or serious seatbelt bruising to the abdomen or flank, or both 					
	 A minor injury to the throat or tongue causing temporary difficulties with swallowing or speech 					
	A laceration of the tongue requiring suturing					
Subdivisi	on 2—Injuries to the digestive system not caused by trauma					
	There is a marked difference between those comparatively rare cases having a long term or even permanent effect on quality of life and cases in which the only ongoing symptom is an allergy, for example, to specific foods, that may cause short-term illness.					
54	Extreme injury to the digestive system not caused by trauma					
	Example of the injury Severe toxicosis—	13	35			
	(a) Causing serious acute pain, vomiting, diarrhoea and fever, requiring hospitalisation for days or weeks; and					
	(b) Also causing 1 or more of the following—					
	Ongoing incontinence					
	 Haemorrhoids 					
	 Irritable bowel syndrome; and 					
	(c) Having a significant impact on the capacity for employment and enjoyment of life.					
	Comment about appropriate level of ISV An ISV in the lower half of the range will be appropriate if the injury causes a chronic infection that requires prolonged hospitalisation that will not resolve after antibiotic treatment for a year.					
55	Serious injury to the digestive system not caused by trauma					
	Examples of the injury	6	12			
	Constant abdominal pain, causing significant discomfort, for up to 18 months caused by a delay in diagnosis of an injury to the digestive system					
	Constant abdominal pain, causing significant discomfort, for up to 18 months					

Item No	Injury		Rai	nge
	<u> </u>	adverse response to the administration of a drug that—		
		(a) requires admission to an intensive care unit; and		
		(b) does not cause any permanent impairment; and		
		(c) causes the need for ongoing drug therapy for life.		
	•	An ISV in the upper half of the range will be appropriate if a chronic infection—		
		(a) requires prolonged hospitalisation and additional treatment; and		
		(b) will be resolved by antibiotic treatment within 1 year.		
	•	An ISV at or near the bottom of the range will be appropriate if there is an adverse response to the administration of a drug that—		
		(a) requires admission to an intensive care unit; and		
		(b) does not cause any permanent impairment; and		
		(c) does not cause the need for ongoing drug therapy for life.		
56	Modera	te injury to the digestive system not caused by trauma		
	Exampl	es of the injury	3	5
	•	An infection that is resolved by antibiotic treatment, with or without additional treatment in hospital, within 3 months after the injury is caused		
	•	An adverse response to the administration of a drug, causing any of the following continuing over a period of more than 7 days, and requiring hospitalisation—		
		(a) vomiting;		
		(b) shortness of breath;		
		(c) hypertension;		
		(d) skin irritation		
57	Minor i	njury to the digestive system not caused by trauma		
	Exampl	es of the injury	0	2
	•	Disabling pain, cramps and diarrhoea, ongoing for days or weeks		
	•	A localised infection, requiring antibiotic treatment, that heals within 6 weeks after the start of treatment		
	•	An adverse response to the administration of a drug, causing any of the following continuing over a period of not more than 7 days, and not requiring hospitalisation—		
		(a) vomiting;		
		(b) shortness of breath;		
		(c) hypertension;		
		(d) skin irritation		
	•	Intermittent abdominal pain for up to 6 months caused by a delay in diagnosis of an injury to the digestive system		

Item No	Injury	Rai	nge
Division 7	7—Kidney or ureter injuries		
	General comment An injury to a ureter or the ureters alone, without loss of, or serious damage to, a kidney will generally be assessed under items 60 or 61.		
	Examples of factor affecting ISV assessment for items 58 to 61		
	• Age		
	Risk of ongoing kidney or ureter problems, complications or symptoms		
	Need for future medical procedures		
58	Extreme injury to kidneys or ureters		
58.1	Loss of both kidneys causing loss of renal function and requiring permanent dialysis or transplant	56	75
58.2	Serious damage to both kidneys, requiring temporary or intermittent dialysis	31	55
	Examples of factors affecting ISV scale		
	 The effect of dialysis and loss of kidney function on activities of daily living 		
	 The length of time for which dialysis was required or the frequency of intermittent dialysis 		
	 Ongoing requirement for medication, for example, to control blood pressure 		
	 Whether the injury caused the need for dietary changes 		
	Comment about appropriate level of ISV		
	 An ISV at or near the bottom of the range will be appropriate if dialysis was required for an initial 3 months period, with intermittent dialysis required after that 		
	 An ISV at or near the top of the range will be appropriate if the injury required dialysis for about 1 year and ongoing dietary changes and medication. 		
59	Serious injury to kidneys or ureters		
	Comment The injury may require temporary dialysis for less than 3 months.	19	30
	Example of the injury Loss of 1 kidney if there is severe damage to, and a risk of loss of function of, the other kidney		
	Comment about appropriate level of ISV The higher the risk of loss of function of the other kidney, the higher the ISV.		
60	Moderate injury to kidneys or ureters		
	Examples of the injury	12	18
	 Loss of 1 kidney, with no damage to the other kidney 		
	 An injury to a ureter or the ureters that requires surgery or placement of stents 		

Item No	Injury	Ra	nge
61	Minor injury to kidneys or ureters		
	Example of the injury A laceration or contusion to 1 or both of the kidneys confirmed by imaging	0	11
	Comment about appropriate level of ISV		
	 An ISV at or near the bottom of the range will be appropriate if there is an injury to a kidney causing a contusion 		
	 An ISV at or near the top of the range will be appropriate if a partial removal of a kidney is required 		
Division 8	8—Liver, gall bladder or biliary tract injuries	Ι	
	Examples of factors affecting ISV assessment		
	 Whether there are recurrent episodes of infection or obstruction 		
	Whether there is a risk of developing biliary cirrhosis		
62	Extreme injury to liver, gall bladder or biliary tract	 	1
	Example of the injury Loss, or injury causing effective loss of liver function	51	70
	Comment about appropriate level of ISV		
	 An ISV at or near the bottom of the range will be appropriate if there are recurrent episodes of liver failure that require hospital admission and medical management but do not require liver transplantation 		
	 An ISV at or near the top of the range will be appropriate if the injury requires liver transplantation 		
63	Serious injury to liver, gall bladder or biliary tract	,	Ī
	Example of the injury Serious damage causing physical loss of over 30% of the tissue of the liver, but with some functional capacity of the liver remaining	36	50
64	Moderate injury to liver, gall bladder or biliary tract		
	Example of the injury A laceration, contusion or trauma damage to the liver, with a moderate permanent effect on liver function, confirmed from imaging	11	35
	The removal of the gall bladder that causes ongoing symptoms		
	Comment about appropriate level of ISV		
	 An ISV at or near the bottom of the range will be appropriate if the injury causes impaired liver function with symptoms of intermittent nausea and vomiting and weight loss 		
	 An ISV at or near the bottom of the range will also be appropriate if there is a gall bladder injury with recurrent infection or symptomatic stone disease, the symptoms of which may include, for example, pain or jaundice 		
	 An ISV at or near the middle of the range will be appropriate if the injury involves removal of the gall bladder causing a bile duct injury 		
	• An ISV at or near the top of the range will be appropriate if—		
	(a) surgery is required to remove not more than 30% of the liver; or		

Item No	Injury	Ra	nge			
	(b) bile ducts require repair, for exa	ample, placement of stents.				
	 An ISV at or near the top of the range wil an injury to the gall bladder, that despite l symptoms, infection or the need for further 	biliary surgery, causes ongoing				
65	Minor injury to liver, gall bladder or biliary duc	et	1			
	Comment An injury within this item should not require surger	ry to the liver.	10			
	Example of the injury A laceration or contusion to the liver, with a minor confirmed from imaging	effect on liver function and				
	Comment about appropriate level of ISV An ISV in the lower half of the range will be appropuncomplicated removal of the gall bladder with no					
Division 9	9—Bowel Injuries		_			
	Examples of factors affecting ISV assessment for	r items 66 to 69				
	• Age					
	Risk of ongoing bowel problems, complice	cations or symptoms				
	Need for future surgery					
	 The degree to which dietary changes are a pain or diarrhoea caused by the injury 	required to manage chronic				
66	Extreme bowel injury					
	Example of the injury An injury causing a total loss of natural bowel func colostomy	tion and dependence on 41	60			
67	Serious bowel injury	·				
	Example of the injury A serious abdominal injury causing either or both o	of the following—	40			
	(a) impairment of bowel function (which often long-term colostomy, leaving disfiguring					
	(b) permanent restrictions on employment an nutritional supplements	d diet and / or requiring				
68	Moderate bowel injury		1			
	Example of the injury	7	18			
	(a) the injury requires temporary surgical div example, an ileostomy or colostomy; and					
	(b) there is ongoing intermittent abnormal bo medication	owel function requiring				
	(c) some loss of bowel, weight loss and perm or requiring nutritional supplements	nanent restriction on diet and /				
69	Minor bowel injury		ı			
	Example of the injury An injury causing tears to the bowel, with minimal	ongoing bowel problems	6			

Item No	Injury	Ra	nge
Division 1	10—Bladder, prostate or urethra injuries	ı	
	Examples of factors affecting ISV assessment for items 70 to 73		
	• Age		
	 Risk of ongoing bladder, prostate or urethra problems, complications or symptoms 		
	Need for future surgery		
70	Extreme bladder, prostate or urethra injury	Т	ı
	Example of the injury An injury causing a complete loss of bladder function and control, with permanent dependence on urostomy	40	60
71	Serious bladder, prostate or urethra injury		
	Example of the injury An injury causing serious impairment of bladder control, with some incontinence	19	39
	Comment about appropriate level of ISV An ISV in the upper half of the range will be appropriate if there is serious ongoing pain.		
72	Moderate bladder, prostate or urethra injury		
	Example of the injury An injury causing continued impairment of bladder control, with minimal incontinence and minimal pain	7	18
	Comment about appropriate level of ISV An ISV at or near the top of the range will be applicable if—		
	 an ongoing requirement for minor surgery, for example, cystoscopy or urethral dilation; or 		
	Other surgery due to being unresponsive to treatment		
73	Minor bladder, prostate or urethra injury	ı	
	Example of the injury A bladder injury that may require conservative intermittent medical treatment for which surgery is not required and from which the injured person will fully recover	3	6
Division	11—Spleen and Pancreas injuries		
74	Injuries to the pancreas	Г	
	Examples of factors affecting ISV scale	11	35
	 The extent of any ongoing risk of internal infection and disorders, for example, diabetes 		
	 The need for, and outcome of, further surgery, for example, surgery to manage pain caused by stone disease, infection or an expanding pseudocyst 		
	• An ISV at or near the middle of the range will be appropriate if there are chronic symptoms, for example, pain or diarrhoea, and weight loss		
	• An ISV at or near the top of the range will be appropriate if—		
	(a) there are chronic symptoms with significant weight loss of between 10% and 20% of body weight, and pancreatic enzyme replacement is required; or		

Item No	Injury	Ra	nge	
	(b) an injury to the pancreas causes diabetes.			
75	Loss of spleen (complicated)			
	Example of the injury Loss of spleen if there will be a risk, that is not minor, of ongoing internal infection and disorders caused by the loss	8	20	
	Comment			
	 An ISV at or near the top of the range will be appropriate if the injury leads to a splenectomy, with portal vein thrombosis after the splenectomy 			
	 An ISV at or near the middle of the range will be appropriate if— 			
	(a) the injury leads to a splenectomy, with serious infection after the splenectomy; and			
	(b) the infection requires surgical or radiological intervention			
76	Injury to the spleen or uncomplicated loss of spleen		_	
	Example of the injury Laceration or contusion to the spleen that—	0	7	
	(a) has been radiologically confirmed;			
	(b) has no ongoing bleeding;			
	(c) is managed conservatively; and			
	(d) resolves fully			
	Comment about appropriate level of ISV An ISV at or near the top of the range will be appropriate if there has been removal of the spleen (splenectomy), with little or no risk of ongoing infections and disorders caused by the loss of the spleen.			
Division 1	12—Hernia injuries			
77	Severe hernia			
	Example of the injury An incisional hernia if after repair there is either or both—	11	20	
	(a) ongoing pain; and			
	(b) a restriction on physical activities, sport or employment			
	Comment about appropriate level of ISV An ISV at the top of the range will be appropriate if—			
	(a) The incisional hernia is reoccurring; and			
	(b) has a whole of person impairment of 10% or more			
78	Moderate hernia			
	Example of the injury An incisional hernia that after repair has some real risk of recurring in the short-term	6	10	
79	Minor hernia		_	
	Example of the injury An uncomplicated incisional hernia, whether or not repaired	0	5	

Item No	Injury		Range	e
Part 6—0	Orthopaedic injuries			
Division 1	—Cervical spine injuries			
	General comment for items 80 to 84 This Division does not apply to the follow 1 to 3)—	ing injuries (that are dealt with in items		
	 quadriplegia 			
	 paraplegia 			
	hemiplegia or severe paralysis o	f more than 1 limb.		
	There must be clinical findings present at	the time of examination.		
	Clinical findings must be consistent with r present.			
		In those dealt with in items 1 to 3, range lity to cases of a minor strain, with no ly suffered for 2 or 3 weeks		
	taken into account in assessing a	e root compression or damage cannot be in ISV under items 80 to 82 unless permanent nerve root compression or ing findings as defined—		
	of disc herniation (as of	or other appropriate imaging evidence listinct from merely a disc bulge and/or dual and corresponding objective ent, for example:		
	 sensory loss 			
	loss of musc atrophy	le strength and/or corresponding		
	impaired ref	lexes		
80	Extreme cervical spine injury			
	Comment These are extremely severe injuries that caserious interference with performance of disgnificant upper or lower extremity impair adaptive device or prosthesis	aily activities. The injury will involve	41 7	75
	Examples of the injury			
	A total neurological loss at a sin	gle level		
	Severe multilevel neurological d	ysfunction		
	Structural compromise of the sp extremity motor and sensory imp	inal canal with extreme upper or lower pairments		
	• Fractures involving more than 5 with neural compromise	0% compression of a vertebral body		
	Comment about appropriate level of IS	v		
	An ISV at or near the bottom of whole person impairment of abo	the range will be appropriate if there is ut 35%		
		range will be appropriate if there is a moplegia of the dominant upper limb		

Item No	Injury			Range	
	and whole person impairment of at least 60%.				
81	Serious	cervical s	pine injury		
	Comme			16	40
	•	The injury of the cervical spine will cause serious neurological upper extremity impairment or serious permanent impairment of the cervical spine for which there is radiological evidence			
	The injury may involve—				
		(a)	a change of motion segment integrity; or		
		(b)	bilateral or multilevel nerve root compression or damage		
		(c)	A fracture involving more than 25% compression of 1 vertebral body or a fusion (either traumatic or post-surgical)		
		(d)	An injury showing objective signs of nerve root damage after surgery		
		es of the in	njury a motion segment because of a surgical or post-traumatic fusion		
	Comme	nt about a	appropriate level of ISV		
	•	An ISV a	at or near the bottom of the range will be appropriate if—		
		(a)	the injured person has had surgery and symptoms persist; or		
		(b)	there is a fracture involving 25% compression of 1 vertebral body.		
	•	fracture i	An ISV in the middle of the range will be appropriate if there is a fracture involving about 50% compression of a vertebral body, with ongoing pain		
	•	An ISV a	at or near the top of the range will be appropriate if—		
		(a)	the injured person has had a fusion of vertebral bodies that has failed, leaving objective signs of significant residual nerve root damage and ongoing pain, affecting 1 side of the body; and		
		(b)	there is whole person impairment of about 28%.		l
82	Moderate cervical spine injury—fracture, disc prolapse (herniated disc) or ner compression or damage				
	Comme An ISV		m will be appropriate if—	5	15
	(a)		herniated disc for which there is radiological evidence nding to an anatomically correct level of objective neurological ent; and		
	(b)	(b) there are symptoms of pain and 3 or more of the following objective signs that are anatomically localised to an appropriate spinal nerve root distribution—			
		(i)	sensory loss;		
		(ii)	loss of muscle strength and/or corresponding atrophy;		
		(iii)	impaired reflexes;		
		(iv)	unilateral atrophy; and		L

Item No	Injury	Rai	Range	
	(c) the impairment has not improved after non-operative treatment			
83	Moderate cervical spine injury—soft tissue injury			
	Comment The injury will cause moderate permanent impairment, for which there is a clinical history and examination findings that are compatible with a specific injury for which there will be 2 or more objective signs. Comment about appropriate level of ISV An ISV at the top half of the range is appropriate if there is a whole of person			
Q/I	impairment of 8% caused by a traumatic soft tissue injury Minor corriect spine injury			
84	Minor cervical spine injury Comment	0	4	
	 Injuries within this item include a whiplash injury with minor ongoing symptoms, and/or dysfunction including symptoms, remaining for more or expected to remain more than 18 months after the injury is caused; and There are no objective signs of a neurological impairment (for example, 	0	4	
	a radiculopathy) at the time of assessment.			
	Comment about appropriate level of ISV			
	A low range ISV under this item will be applicable if the injury will resolve within months after the injury is caused; and			
	 A high range ISV under this item will be applicable if, the injury causes persistent headaches, significant neck stiffness and some ongoing pain and/or dysfunction 			
Division 2	2—Thoracic spine or lumbar spine injuries			
	General comments			
	 This Division does not apply to the following injuries (that are dealt with in items 1 to 3)— 			
	• quadriplegia			
	• paraplegia			
	hemiplegia or severe paralysis of more than 1 limb.			
	• Thoracic or lumbar spine injuries, other than those dealt with in items 1 to 3, range from cases of very severe disability to cases of a minor strain, with no time off work and symptoms suffered only for 2 or 3 weeks			
	Symptoms associated with nerve root compression or damage cannot be taken into account in assessing an ISV under item 85-87 unless objective signs are present of nerve root compression or damage, for example—			
	CT or MRI scans or other radiological evidence			
	muscle wasting			
	 clinical findings of deep tendon reflex loss, motor weakness and loss of sensation. 			
	There must be clinical findings present at the time of examination.			

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	Clinical findings must be consistent with radiological objective evidence where present.					
85	Extreme thoracic or lumbar spine injury					
	Comment These are extremely severe injuries causing gross limitation of movement and serious interference with performance of daily activities. There may be some motor or sensory loss, and some impairment of bladder, ano-rectal or sexual function.					
	Example of the injury A fracture involving compression of a thoracic or lumbar vertebral body of more than 50%, with neurological impairment					
	Comment about appropriate level of ISV		İ			
	 An ISV at or near the bottom of the range will be appropriate if there is whole person impairment for the injury of 25% 					
	 An ISV at or near the top of the range will be appropriate if there is whole person impairment for the injury of at least 45%. 		<u> </u>			
86	Serious thoracic or lumbar spine injury	ı				
	Comment		İ			
	 The injury will cause serious permanent impairment in the thoracic or lumbar spine 					
	• The injury may involve—		Ī			
	(a) bilateral or multilevel nerve root damage; or		Ī			
	(b) a change in motion segment integrity, for example, because of surgery.					
	Example of the injury A fracture involving at least 25% compression of 1 thoracic or lumbar vertebral body					
	Comment about appropriate level of ISV					
	An ISV at or near the bottom of the range will be appropriate if—		ĺ			
	(a) the injured person has had surgery and symptoms persist; or		İ			
	(b) there is a fracture involving 25% compression of 1 vertebral body.					
	 An ISV in the middle of the range will be appropriate if there is a fracture involving 50% compression of a vertebral body, with ongoing pain 					
	 An ISV at or near the top of the range will be appropriate if the injured person has had a fusion of vertebral bodies that has failed— 					
	(a) leaving objective signs of significant residual nerve root damage and ongoing pain, affecting 1 side of the body; and					
	(b) causing whole person impairment of 24%.					
87	Moderate thoracic or lumbar spine injury—fracture, disc prolapse or nerve root compression or damage					
	Comment	5	15			

Item No	Injury	Ra	nge
	An ISV for this item will be appropriate if —		
	(a) there is a herniated disc for which there is radiological evidence corresponding to an anatomically correct level of objective neurological impairment; and		
	(b) there are symptoms of pain and 3 or more of the following objective signs that are anatomically localised to an appropriate spinal nerve root distribution—		
	(i) sensory loss;		
	(ii) loss of muscle strength, and/or corresponding atrophy;		
	(iii) impaired reflexes		
	(iv) unilateral atrophy; and		
	(c) the impairment has not improved after non-operative treatment.		
88	Moderate thoracic or lumbar spine injury—soft tissue injury		
	Comment The injury will cause moderate permanent impairment, for which there is a clinical history and examination findings that are compatible with a specific injury for which there will be 2 or more objective signs.	5	10
	Comment about appropriate level of ISV An ISV at the top half of the range is appropriate if there is a whole of person impairment of 8% caused by a traumatic soft tissue injury		
89	Minor thoracic or lumbar spine injury		
	Example of the injury A soft tissue injury of the thoracic or lumbar spine with no—	0	4
	significant clinical findings		
	• fractures		
	documented neurological impairment		
	significant loss of motion segment integrity		
	other objective signs of impairment relating to the injury		
	Comment about appropriate level of ISV		
	 An ISV at or near the top of the range will be appropriate, whether or not the injured person continues to suffer some ongoing pain, if the injury will substantially reach maximum medical improvement, with only minor symptoms, within about 18 months after the injury is caused 		
	An ISV at or near the bottom of the range will be appropriate if the injury will resolve without any ongoing symptoms within months after the injury is caused		
Division 3	Shoulder injuries		
	General comments Injuries under items 90 to 93 include subluxations or dislocations of the sternoclavicular joint, acromioclavicular joint or glenohumeral joint.		
	Soft tissue injuries may involve the musculoligamentous supporting structures of the joints		
	• Fractures may involve the clavicle, the scapula (shoulder blade) and the humerus		

Item No	Injury	Rai	nge
	Comment about appropriate level of ISV for items 90 to 93 An ISV at or near the top of the range will generally only be appropriate if the injury is to the shoulder of the dominant upper limb.		
90	Extreme shoulder injury		
	Comment These are the most severe traumatic injuries causing gross permanent impairment.	31	50
	Examples of the injury		
	A severe fracture or dislocation, with secondary medical complications		
	Joint disruption with poor outcome after surgery		
	• Degloving		
	Permanent nerve palsies		
	Additional comment about appropriate level of ISV An ISV at or near the top of the range will be appropriate if there is whole person impairment of 45% and complete loss of all shoulder function of the dominant upper limb.		
91	Serious shoulder injury		
	Comment The injury will involve serious trauma to the shoulder causing serious permanent impairment.	16	30
	Examples of the injury		
	A crush injury		
	A serious fracture with secondary arthritis		
	Nerve palsies from which the injured person will partially recover		
	• Established non-union of a clavicular or scapular fracture despite open reduction and internal fixation (ORIF)		
	 Established non-union of a clavicular or scapular fracture if surgery is not appropriate or not possible, and there is significant functional impairment 		
	Additional comment about appropriate level of ISV An ISV at or near the top of the range will be appropriate if there is whole person impairment for the injury of 25% and the injury is to the dominant upper limb.		
92	Moderate shoulder injury		
92.1	Comment An ISV under this item will be applicable if there is a whole of person impairment of 10-12%	11	15
	Examples of the injury		
	 Traumatic adhesive capsulitis with discomfort, limitation of movement and symptoms persisting or expected to persist for about 2 years 		
	 Permanent and significant soft tissue disruption, for example, from tendon tears or ligament tears 		
	 A fracture, from which the injured person has made a reasonable recovery, requiring open reduction and internal fixation 		
	Nerve palsies from which the injured person has made a good recovery		

Item No	Injury		Ra	nge
	•	Painful persisting dislocation of the acromioclavicular joint		
	•	An injury to the sternoclavicular joint causing permanent, painful instability		
	Comme	nt about the appropriate level of ISV		
	•	An ISV at or near the bottom of the range will be appropriate if the injury is to the non-dominant upper limb		
	•	An ISV at or near the top of the range will be appropriate if the injury is to the dominant upper limb		
92.2		nt under this item will be appropriate if there is a whole person impairment njury of less than 10%	6	10
	Exampl	es of the injury		
	•	Traumatic adhesive capsulitis with discomfort, limitation of movement and symptoms persisting or expected to persist for about 2 years		
	•	Permanent and significant soft tissue disruption, for example, from tendon tears or ligament tears		
	•	Nerve palsies from which the injured person has made a good recovery		
	•	Painful persisting dislocation of the acromioclavicular joint		
	•	An injury to the sternoclavicular joint causing permanent, painful instability		
	Comme	nt about this level of ISV		
	•	An ISV at or near the bottom of the range will be appropriate if the injury is to the non-dominant upper limb		
	•	An ISV at or near the top of the range will be appropriate if the injury is to the dominant upper limb		
93	Minor s	houlder injury		
	Exampl	es of the injury	0	5
	•	Soft tissue injury with considerable pain from which the injured person makes an almost full recovery in less than 18 months		
	•	Fracture from which the injured person has made an uncomplicated recovery		
	•	Strain injury of the acromioclavicular joint or sternoclavicular joint		
Division 4	1—Ampu	tation of upper limbs		
	An ISV	nt about appropriate level of ISV for items 94 to 95 at or near the top of the range will generally only be appropriate if the ion is of the dominant upper limb		
94	Loss of	both upper limbs, or loss of 1 arm and extreme injury to the other arm	<u> </u>	
	Comme The effe helpless	ct of the injury is to reduce the injured person to a state of considerable	55	85
	Exampl	es of factors affecting ISV scale		
	•	Whether the amputations are above or below the elbow (the loss of the		

Item No	Injury			Ra	nge
		elbow jo	oint adds greatly to the disability)		
	•	The leng	gth of any stump suitable for use with a prosthesis		
	•	Severity	of any phantom pains		
	Addition	nal comm	ent about appropriate level of ISV		
	•	An ISV	of 70 to 85 will be appropriate if—		
		(a)	both upper limbs are amputated at the shoulder; or		
		(b)	1 arm is amputated at the shoulder, and there is a loss of function in the other arm, causing whole person impairment of 60%.		
	•	An ISV	of 65 to 80 will be appropriate if—		
		(a)	both upper limbs are amputated through the elbow or above the elbow but below the shoulder; or		
		(b)	1 arm is amputated through the elbow or above the elbow but below the shoulder, and there is a loss of function in the other arm, causing whole person impairment of 57%.		
	•	An ISV	of 55 to 75 will be appropriate if—		
		(a)	both upper limbs are amputated below the elbow; or		
		(b)	1 arm is amputated below the elbow, and there is a loss of function in the other arm, causing whole person impairment of 54%.		
95	Loss of	1 upper li	imb		
	Exampl	es of facto	ors affecting ISV assessment		
	•		the amputation is above or below the elbow (the loss of the bint adds greatly to the disability)		
	•	Whether	the amputation was of the dominant arm		
	•	The leng	gth of any stump suitable for use with a prosthesis		
	•	Severity	of any phantom pains		
	•	Extent o	f any disability in the other arm		
95.1	An uppe	r limb am _l	putation at the shoulder	50	65
95.2	An uppe shoulder		putation through the elbow or above the elbow but below the	40	65
	Addition	nal comm	ent about appropriate level of ISV		
	•		at or near the bottom of the range will generally be appropriate s an amputation through the elbow		
	•		at or near the top of the range will be appropriate if there is a imp because a short stump may create difficulties in the use of a is		
95.3	An uppe	r limb am _l	putation below the elbow	35	60
	An ISV	at or near	the top of the range will be appropriate if there is an amputation m with residual severe pain in the stump and phantom pains		

Item No	Injury	Ra	nge
Division 5	5—Elbow injuries		
	Comment about appropriate level of ISV for items 96 to 99 An ISV at or near the top of the range will generally only be appropriate if the injury is to the elbow of the dominant upper limb		
96	Extreme elbow injury		
	Comment The injury will involve an extremely severe elbow injury, falling short of amputation, leaving little effective use of the elbow joint	26	50
	Examples of the injury		
	• Whole person impairment for the injury of between 24% and 42%		
	A complex elbow fracture, or dislocation, with secondary complications		
	Joint disruption, with poor outcome after surgery		
	• Degloving		
	Permanent nerve palsies		
	 An injury causing severe limitation of elbow movement with the joint constrained in a non-functional position 		
97	Serious elbow injury		
	Comment The injury will involve significant disability and require major surgery.	13	25
	Examples of the injury		
	A serious fracture with secondary arthritis		
	A crush injury		
	 Nerve palsies from which the injured person will partially recover 		
	 Permanent, poor restricted range of movement with the elbow constrained in a satisfactory functional position 		
	Additional comment about appropriate level of ISV An ISV at or near the top of the range will be appropriate if there is whole person impairment for the injury of 23% and the injury is to the elbow of the dominant upper limb.		
98	Moderate elbow injury		
	Comment The injury will cause moderate long-term disability but does not require multiple surgeries.	6	12
	Examples of the injury		
	 A fracture, from which the injured person has made a reasonable recovery, requiring open reduction and internal fixation 		
	Nerve palsies from which the injured person has made a good recovery		
	Additional comment about appropriate level of ISV		
	 An ISV at or near the bottom of the range will be appropriate if there is whole person impairment for the injury of 5% 		
	 An ISV at or near the top of the range will be appropriate if there is a moderately severe injury to the elbow of the dominant upper limb— 		

Item No	Injury			
	(a) requiring prolonged treatment; and			
	(b) causing whole person impairment of 10%.			
99	Minor elbow injury			
	Comment The injury will cause no permanent damage and no permanent impairment of function.	0	5	
	Examples of the injury			
	A fracture with an uncomplicated recovery			
	 A soft tissue injury with pain, minor tennis elbow syndrome or lacerations 			
Division (6—Wrist injuries			
	Comment about appropriate level of ISV for items 100 to 103 An ISV at or near the top of the range will generally only be appropriate if the injury is to the wrist of the dominant upper limb.			
100	Extreme wrist injury			
	Comment The injury will involve severe fractures, or a dislocation, causing a high level of permanent impairment.	25	40	
	Examples of the injury			
	A severe fracture or dislocation with secondary joint complications			
	Joint disruption with poor outcome after surgery			
	• Degloving			
	Permanent nerve palsies			
	Additional comment about appropriate level of ISV An ISV at or near the top of the range will be appropriate if there is whole person impairment for the injury of 36% and the injury is to the wrist of the dominant upper limb.			
101	Serious wrist injury			
	Examples of the injury	16	24	
	 An injury causing significant permanent loss of wrist function, for example, severe problems with gripping or pushing objects, but with some useful movement remaining 			
	Non-union of a carpal fracture			
	Severe carpal instability			
	Additional comment about appropriate level of ISV An ISV at or near the top of the range will be appropriate if there is whole person impairment for the injury of 20% and the injury is to the wrist of the dominant upper limb.			
102	Moderate wrist injury			
102.1	Examples of the injury A wrist injury, confirmed from imaging that causes some permanent disability, for example, some persisting pain and stiffness:	11	15	

Item No	Injury		Rai	nge
	•	Persisting radio-ulnar instability		
	•	Moderate Carpal instability		
	•	Recurrent tendon subluxation or entrapment		
	An ISV u	hal comment about appropriate level of ISV under this item will be appropriate if there is a whole person impairment jury of greater than or equal to 10%		
102.2	A wrist in	es of the injury njury, that is not serious and causes some permanent disability, for some persisting pain and stiffness—	6	10
	•	Persisting radio-ulnar instability		
	•	Carpal instability		
	•	Recurrent tendon subluxation or entrapment		
	An ISV u	nt about this level of ISV under this item will be appropriate if there is a whole person impairment jury of less than 10%		
103	Minor w	rist injury		
	Example	es of the injury	0	5
	•	A fracture from which the injured person almost fully recovers		
	•	A soft tissue injury, for example, severe bruising		
	•	Continued pain following carpal tunnel release		
Division 7	—Hand i	njuries	1	
		comment for items 104 to 115 e cosmetically and functionally the most important part of the upper		
	Commer	nt about appropriate level of ISV for items 104 to 115		
	•	The appropriate ISV for loss of a hand is only a little less than the appropriate ISV for the loss of the relevant arm		
	•	An ISV at or near the top of the range will generally be appropriate if the injury is to the dominant hand.		
104	Total or	effective loss of both hands	1	
		e of the injury s injury causing extensive damage to both hands making them little more ess	51	75
	Example	es of factors affecting ISV scale		
	•	The level of residual capacity left in either hand		
	•	Severity of any phantom pains if there has been an amputation or amputations		
	Addition	nal comment about appropriate level of ISV		
	•	An ISV at or near the bottom of the range will be appropriate if both hands remain attached to the forearms and are of some cosmetic importance		
	•	An ISV at or near the top of the range will be appropriate if both hands		

Item No	Injury	Ra	nge
	are amputated through the wrist.		
105	Serious injury to both hands	ı	
	Comment The injury will involve significant loss of function in both hands, for example, loss of 50% or more of the use of each hand.	40	50
106	Total or effective loss of 1 hand		
	Examples of the injury	35	60
	 A crushed hand that has been surgically amputated or rendered functionally useless 		
	 Traumatic amputation of all fingers and most of the palm 		
	Example of factor affecting ISV scale Severity of any phantom pain if there has been an amputation		
	Additional comment about appropriate level of ISV		
	 An ISV at or near the bottom of the range will be appropriate if there has been an amputation of the fingers at the metacarpophalangeal joints, but the thumb remains, and there is whole person impairment for the injury of 32% 		
	 An ISV at or near the top of the range will be appropriate if— 		
	(a) there has been amputation of the dominant hand at the wrist; and		
	(b) there is residual severe pain in the stump and ongoing complications, for example, chronic regional pain syndrome or neuroma formation.		
107	Amputation of the thumb or part of the thumb		
	Examples of factors affecting ISV scale	15	28
	• The level of amputation, for example, at carpo metacarpal (CMC) joint, through the distal third of the thumb metacarpal, at the metacarpophalangeal (MCP) joint or thumb interphalangeal (IP) joint		
	Whether the injury is to the dominant hand		
	 The extent of any damage to the fingers 		
	Additional comment about appropriate level of ISV		
	 An ISV at or near the bottom of the range will be appropriate if— 		
	(a) there has been an amputation through the interphalangeal joint of the thumb; and		
	(b) there is whole person impairment for the injury of 11%.		
	 An ISV at or near the middle of the range will be appropriate if there has been an amputation through the proximal phalanx 		
	An ISV at or near the top of the range will be appropriate if—		
	(a) there has been an amputation at the base of the thumb at the carpometacarpal (CMC) joint level of the dominant hand; and		
	(b) there are ongoing debilitating complications.		

Item No	Injury		Ra	nge
108	Amputa	tion of index, middle and ring fingers, or any 2 of them		
		nt putation will cause complete loss or nearly complete loss of 2 or all of the g fingers of the hand—	15	30
	•	index finger		
	•	middle finger		
	•	ring finger		
	•	little finger		
	The leve	e of factor affecting ISV scale of the amputation, for example, whether the hand has been made to be ittle use and any remaining grip is very weak		
	Addition	nal comment about appropriate level of ISV		
	•	An ISV at or near the bottom of the range will be appropriate if 2 fingers, whether index, middle or ring fingers, are amputated at the level of the proximal interphalangeal joints		
	•	An ISV at or near the middle of the range will be appropriate if there is whole person impairment for the injury of 19%		
	•	An ISV at or near the top of the range will be appropriate if—		
		(a) the index, middle and ring fingers are amputated at the level of the metacarpophalangeal joint (MCP joint) or there is whole person impairment for the injury of at least 27%; and		
		(b) the injury is to the dominant hand.		
109	Amputa	tion of individual fingers		
	Example	es of factors affecting ISV scale	5	20
	•	Whether the amputation was of the index or middle finger		
	•	The level of the amputation		
	•	Any damage to other fingers short of amputation		
	Addition	nal comment about appropriate level of ISV		
	•	An ISV at or near the top of the range will be applicable if there is complete loss of the index or middle finger of the dominant hand, and serious impairment of the remaining fingers causing whole person impairment of at least 15%		
	•	An ISV of not more than 10 will be applicable if—		
		(a) there has been an amputation of the index or middle finger at the proximal interphalangeal joint (PIP joint); or		
		(b) there is whole person impairment for the injury of 8%.		
	•	An ISV at or near the bottom of the range will be applicable if—		
		(a) there has been an amputation at the level of the distal interphalangeal joint of the little or ring finger; or		
		(b) there is whole person impairment for the injury of 3%.		

Item No	Injury	Ra	nge
110	Amputation of thumb and all fingers		
	Comment		
	As the injury will cause effective loss of the hand, see item 106.		
111	Any other injury to 1 or more of the fingers or the thumb	1	
	Comment about appropriate level of ISV for items under 111 An ISV of not more than 5 will be appropriate if substantial function of the hand remains.		
	Examples of factors affecting ISV		
	• Whether the injury is to the thumb, or index or middle finger		
	Any damage to other fingers		
	Whether the injury is to the dominant hand		
111.1	Extreme injury to 1 or more of the fingers or the thumb		
	Example of the injury Total loss of function of 1 or more of the fingers, with the joints ankylosed in non-functional positions	16	25
	Comment about appropriate level of ISV		
	 An ISV at or near the bottom of the range will be appropriate if there is whole person impairment for the injury of 14% 		
	 An ISV at or near the top of the range will be appropriate if there is an injury to the thumb of the dominant hand causing total loss of function of the thumb 		
111.2	Serious injury to 1 or more of the fingers or the thumb		
	Examples of the injury	12	15
	A severe crush injury causing ankylosis of the fingers		
	A bursting wound, or an injury causing severe finger damage, causing residual scarring and dysfunction		
	An injury leaving a digit that interferes with the remaining function of the hand		
	 Division of 1 or more of the long flexor tendons of the finger, with unsuccessful repair 		
111.3	Moderate injury to 1 or more of the fingers or the thumb		
	Comment There will be permanent discomfort, pain or sensitive scarring	6	11
	Examples of the injury		
	 Moderate injury to the thumb or index finger causing loss of movement or dexterity 		
	A crush injury causing multiple fractures of 2 or more fingers		
	Division of 1 or more of the long flexor tendons of the finger, with moderately successful repair		
	Additional comment about appropriate level of ISV An ISV under this item will be appropriate if there is whole person impairment for the injury of 8% and the injury is to the dominant hand.		

Item No	Injury	Ra	nge		
111.4	Minor injury to 1 or more of the fingers or the thumb				
	Example of the injury An uncomplicated fracture or soft tissue injury that has healed with minimal residual symptoms	0	5		
	Additional comment about appropriate level of ISV				
	 An ISV at or near the bottom of the range will be appropriate if there is a straight forward fracture of 1 or more of the fingers, with complete resolution within a short time 				
	 An ISV at or near the top of the range will be appropriate if there has been— 				
	(a) a fracture causing minor angular or rotational malunion of the thumb, or index or middle finger, of the dominant hand; or				
	(b) some adherence of a tendon following surgical repair, limiting full function of the digit				
112	Extreme hand injury				
	Comment	31	45		
	 The injury will involve a severe traumatic injury to the hand that may include amputation of part of the hand, causing gross impairment of the hand 				
	 A hand injury causing whole person impairment for the injury of 35% will generally fall within this item 				
	Examples of the injury				
	 An injury reducing a hand's capacity to 50% or less 				
	 An injury involving the amputation of several fingers that are re-joined to the hand leaving it clawed, clumsy and unsightly 				
	 An amputation of some fingers and part of the palm causing grossly reduced grip and dexterity and gross disfigurement 				
	Additional comment about appropriate level of ISV				
	 An ISV at or near the bottom of the range will be appropriate if the injured hand has some residual usefulness for performing activities of daily living 				
	 An ISV at or near the top of the range will be appropriate if the injured hand— 				
	(a) has little or no residual usefulness for performing activities of daily living; and				
	(b) is the dominant hand				
113	Serious hand injury	- I			
	Examples of the injury	16	30		
	 A severe crush injury causing significantly impaired function despite surgery 				
	Serious permanent tendon damage				
	Serious nerve damage				

Item No	Injury	Rai	nge
	Additional comment about appropriate level of ISV An ISV at or near the top of the range will be appropriate if there is whole person impairment for the injury of 20%		
114	Moderate hand injury		
	Examples of the injury	6	15
	A crush injury, penetrating wound or deep laceration, requiring surgery		
	 Moderately serious tendon or nerve damage 		
	 A hand injury causing whole person impairment for the injury of between 5% and 12% 		
115	Minor hand injury		
	Examples of the injury A soft tissue injury, minor fracture or an injury that does not require surgery, with nearly full recovery of hand function	0	5
Division 8	3—Upper limb injuries other than shoulder, amputation, elbow, wrist or hand in	ijuries	
	Comment about appropriate level of ISV for items 116 to 119 An ISV at or near the top of the range will generally only be appropriate if the injury is to the dominant upper limb.		
116	Extreme upper limb injury, other than an injury mentioned in items 90 to 115		
	Comment The injury will involve an extremely serious upper limb injury, falling short of amputation leaving the injured person little better off than if the whole arm had been lost.	36	65
	Examples of the injury		
	 A serious brachial plexus injury affecting peripheral nerve function 		
	 A non-union of a fracture, with peripheral nerve damage to the extent that an arm is nearly useless 		
	Additional comment about appropriate level of ISV		
	 An ISV at or near the bottom of the range will be appropriate if there is whole person impairment for the injury of 31% 		
	 An ISV at or near the top of the range will be appropriate if— 		
	(a) there is a complete brachial plexus lesion shown by a flail arm and paralysis of all muscles of the hand; and		
	(b) the injury is to the dominant limb.		
	 An ISV at or near the top of the range will also be appropriate if there is a serious crush injury that causes whole person impairment for the injury of 55% 		
117	Serious upper limb injury, other than an injury mentioned in items 90 to 115		
	Examples of the injury	21	35
	 A serious fracture of the humerus, radius or ulna, or any combination of the humerus, radius and ulna, if there is significant permanent residual impairment of function 		
	 A brachial plexus injury requiring nerve grafts with partial recovery of shoulder and elbow function and normal hand function 		

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	Addition	nal comment about appropriate level of ISV		
	•	An ISV at or near the bottom of the range will be appropriate if there is whole person impairment for the injury of 16%		
	•	An ISV at or near the top of the range will be appropriate if there is an injury to the dominant limb causing whole person impairment of 30%.		
118	Modera	te upper limb injury, other than an injury mentioned in items 90 to 11:	5	
	Exampl	es of the injury		
	•	A fracture that causes impairment of associated soft tissues, including nerves and blood vessels		
	•	A fracture with delayed union or infection		
	•	Multiple fractures of the humerus, radius or ulna, or multiple fractures of any combination of the humerus, radius and ulna		
118.1	An ISV significa	nt about appropriate level of ISV under this item will be applicable if there is a crush injury causing ant skin or muscle loss with permanent residual impairment, or there is erson impairment for the injury of 15%	11	20
118.2	Comme	nt about appropriate level of ISV	6	10
	•	An ISV at or near the bottom of the range will be appropriate if there is whole person impairment for the injury of 6%		
	•	An ISV in the lower half of the range will be appropriate if there is a complicated fracture of the humerus, radius or ulna, or any combination of the humerus, radius and ulna—		
		(a) requiring open reduction and internal fixation; and		
		(b) from which the injured person has recovered or is expected to recover.		
119	Minor u	pper limb injury, other than an injury mentioned in items 90 to 115		
	An unco	e of the injury mplicated fracture of the humerus, radius or ulna, or any combination of erus, radius and ulna, from which the injured person has fully recovered short time	0	5
	Addition	nal comment about appropriate level of ISV		
	•	An ISV at or near the bottom of the range will be appropriate if there are soft tissue injuries, lacerations, abrasions and contusions, from which the injured person will fully or almost fully recover		
	•	An ISV at or near the top of the range will be appropriate if there is a brachial plexus injury from which the injured person has substantially recovered within a few weeks, leaving some minor functional impairment.		
Division 9	—Pelvis	or hip injuries		
	General	comment for items 120 to 123		
	•	The most serious injuries to the pelvis or hips can be as devastating as a leg amputation and will have similar ISVs		
	•	However, the appropriate ISV for other injuries to the pelvis or hips will generally be no higher than about 20.		

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	Examples of factors affecting ISV assessment for items 120 to 123		
	 Exceptionally severe specific sequelae will increase the level of ISV 		
	 The availability of remedies, for example, a total hip replacement is an important factor in assessing an ISV 		
	• Age		
120	Extreme pelvis or hip injury		
	Examples of the injury	46	65
	An extensive pelvis fracture		
	• Degloving		
	Permanent nerve palsies		
	Comment about appropriate level of ISV		
	• An ISV at or near the bottom of the range will be appropriate if there is whole person impairment for the injury of 40%		
	 An ISV at or near the top of the range will be appropriate if the injured person is not able to mobilise without a wheelchair and is relatively young. 		
121	Serious pelvis or hip injury		
	Comment There will be substantial residual disability, for example, severe lack of bladder and bowel control, sexual dysfunction, or deformity making the use of 2 canes or crutches routine.	26	45
	Examples of the injury		
	 A fracture dislocation of the pelvis involving both ischial and pubic rami 		
	 Traumatic myositis ossificans with formation of ectopic bone around the hip 		
	 A fracture of the acetabulum leading to degenerative changes and leg instability requiring an osteotomy, with the likelihood of future hip replacement surgery 		
	Comment about appropriate level of ISV An ISV at or near the bottom of the range will be appropriate for an injury causing whole person impairment for the injury of 20%.		
122	Moderate pelvis or hip injury		
	Examples of the injury	11	25
	A significant pelvis or hip injury, with no major permanent disability		
	A hip fracture requiring a hip replacement		
	 A fracture of the sacrum extending into the sacro-iliac joint causing ongoing significant symptoms and whole person impairment of at least 10% 		

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	Comment about appropriate level of ISV An ISV for this item will be appropriate if there is a fracture requiring a hip replacement that is only partially successful, so that there is a clear risk of the need for revision surgery.		
	An ISV in this range will be appropriate if there is whole person impairment for the injury of 10%.		
123	Minor pelvis or hip injury		
	Examples of the injury	0	10
	• An uncomplicated fracture of 1 or more of the bones of the pelvis or hip that does not require surgery or cause permanent impairment		
	Undisplaced coccygeal fractures		
	 Undisplaced or healed pubic rami fractures 		
	 An injury to the coccyx requiring surgery, that is successful. 		
	Comment about appropriate level of ISV		
	 An ISV at or near the bottom of the range will be appropriate if there is a soft tissue injury from which the injured person fully recovers 		
	• An ISV of not more than 7 will be appropriate if there is whole person impairment for the injury of 5%		
	 An ISV at or near the top of the range will be appropriate if the person has ongoing coccydynia and difficulties with sitting. 		
Division 1	0—Amputation of lower limbs		
Subdivisi	on 1—Amputation of both lower limbs		
	Examples of factors affecting ISV assessment for items 124 and 125		
	The level of each amputation		
	Severity of any phantom pain		
	• Pain in the stumps		
	Extent of any ongoing symptoms		
124	Loss of both lower limbs above or through the knee	1	
	Comment about appropriate level of ISV An ISV at or near the top of the range will be appropriate if each amputation is near the hips so neither stump can be used with a prosthesis.	55	70
125	Below the knee amputation of both lower limbs		
	Comment about appropriate level of ISV	50	65
	• An ISV at or near the bottom of the range will be appropriate if there is whole person impairment for the injury of 48%		
	• An ISV at or near the top of the range will be appropriate if—		
	 (a) both legs are amputated just below the knees leaving little or no stumps for use with prostheses; 		
	(b) there is poor quality skin cover; and		
	(c) there is a chronic regional pain syndrome.		

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Subdivisi	on 2—Amputation of 1 lower limb		
	Examples of factors affecting ISV assessment for items 126 and 127		
	The level of the amputation		
	Severity of any phantom pain		
	• Whether there have been problems with a prosthesis, for example, pain and further damage to the stump		
126	Above or through the knee amputation of 1 lower limb		
	Comment about appropriate level of ISV	35	50
	 An ISV at or near the bottom of the range will be appropriate if the amputation is through or just above the knee 		
	 An ISV at or near the top of the range will be appropriate if the amputation is near the hip and a prosthesis cannot be used. 		
127	Below the knee amputation of 1 lower limb		
	Comment about appropriate level of ISV	31	45
	 An ISV at or near the bottom of the range will be appropriate in a straightforward case of a below-knee amputation with no complications 		
	 An ISV at or near the top of the range will be appropriate if there is an amputation close to the knee joint, leaving little or no stump for use with a prosthesis. 		
Division 1	1—Lower limb injuries other than items 120 to 127 and 132 to 149		
128	Extreme lower limb injury, other than an injury mentioned in items 120 to 127	and 1	32 to
	Comment These are the most severe injuries short of amputation; leaving the injured person little better off than if the whole leg had been lost.	31	55
	Examples of the injury		
	• Extensive degloving of the lower limb		
	 An injury causing gross shortening of the lower limb 		
	A fracture that has not united despite extensive bone grafting		
	Serious neurovascular injury		
	A lower limb injury causing whole person impairment of 40%		
129	Serious lower limb injury, other than an injury mentioned in items 120 to 127 to 149	and 13	2 to
	Comment	21	30
	 Removal of extensive muscle tissue and extensive scarring may have a significant enough impact to fall within this item 		
	 An injury to multiple joints or ligaments causing instability, prolonged treatment and a long period of non-weight-bearing may have a significant enough impact to fall within this item, but generally only if those results are combined. 		
	Example of the injury Multiple complex fractures of the lower limb that are expected to take years to		

Item No	Injury	Ra	nge
	heal and cause serious deformity and serious limitation of mobility		
	Comment about appropriate level of ISV		
	 An ISV at or near the bottom of the range will be appropriate if there is whole person impairment for the injury of 16% 		
	 An ISV at or near the top of the range will be appropriate if there is whole person impairment for the injury of 25%. 		
130	Moderate lower limb injury, other than an injury mentioned in items 120 to 12 to 149	27 and	132
	Examples of the injury	11	20
	 A fracture causing impairment of associated soft tissues, including nerves and blood vessels 		
	A fracture with delayed union or infection		
	 Multiple fractures of the femur, tibia or fibula, or multiple fractures of any combination of the femur, tibia and fibula 		
	Examples of factors affecting ISV scale		
	Period of non-weight-bearing		
	Presence or risk of degenerative change		
	Imperfect union of a fracture		
	Muscle wasting		
	Limited joint movement		
	Unsightly scarring		
	 Permanently increased vulnerability to future damage 		
	Comment about appropriate level of ISV An ISV at or near the top of the range will be applicable if there is a deep vein thrombosis requiring treatment for life; or if there is whole person impairment for the injury of 15%.		
	An ISV at or near the bottom of the range will be applicable if there is whole person impairment for the injury of 10%.		
131	Minor lower limb injury, other than an injury mentioned in items 120 to 127 a 149	nd 132	to
	Example of the injury An uncomplicated fracture of the femur, tibia or fibula, from which the injured person has fully recovered	0	10
	Comment about appropriate level of ISV		
	• An ISV at or near the bottom of the range will be appropriate if there is a deep vein thrombosis requiring treatment for less than 6 months, from which the injured person will fully recover		
	• An ISV at or near the bottom of the range will also be appropriate if—		
	(a) there are soft tissue injuries, lacerations, cuts, bruising or contusions, from which the injured person will fully or almost fully recover; and		
	(b) any residual disability will be minor.		
	• An ISV at or near the top of the range will be appropriate if there is a		

Item No	Injury	Ra	nge
	deep vein thrombosis requiring treatment for at least 1 year		
	 An ISV at or near the top of the range will also be appropriate if the injured person is left with impaired mobility or a defective gait 		
	 An ISV at or near the top of the range will also be appropriate if there is whole person impairment for the injury of 9%. 		
Division	2—Knee injuries		
	General comment for items 132 to 135 The availability of remedies, for example, a total knee replacement is an important factor in assessing an ISV under this Division.		
132	Extreme knee injury		
	Example of the injury A severe knee injury if there is a disruption of the joint, gross ligamentous damage, loss of function after unsuccessful surgery, lengthy treatment and considerable pain	25	40
	Comment about appropriate level of ISV		
	 An ISV at or near the bottom of the range will be appropriate if there is whole person impairment for the injury of 20% 		
	 An ISV at or near the top of the range will be appropriate if a total knee replacement was needed and— 		
	(a) it is very likely that the knee replacement will need to be repeated; or		
	(b) there are ongoing severe symptoms, poor function and whole person impairment for the injury of more than 30%.		
133	Serious knee injury		
	Comment The injury may involve—	11	24
	(a) ongoing pain, discomfort, limitation of movement, instability or deformity; and		
	(b) a risk, in the long-term, of degenerative changes caused by damage to the joint surfaces, muscular wasting or ligamentous or meniscal injury.		
	Example of the injury A leg fracture extending into the knee joint, causing pain that is constant, permanent and limits movement or impairs agility		
	Comment about appropriate level of ISV An ISV at or near the middle of the range will be appropriate if there is a ligamentous injury, that required surgery and prolonged rehabilitation, causing whole person impairment of 15% and functional limitation.		
134	Moderate knee injury		
	Examples of the injury A dislocation or torn cartilage or meniscus causing ongoing minor instability, wasting and weakness	6	10
	Comment about appropriate level of ISV An ISV at or near the top of the range will be appropriate if there is whole person impairment for the injury of 8%		

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135	Minor k	anee injury		
	Exampl	es of the injury	0	5
	•	A partial cartilage, meniscal or ligamentous tear, that recovers with or without surgery		
	•	A laceration		
	•	A twisting or bruising injury		
Division 1	13—Ankl	e Injuries		
		nt about appropriate level of ISV for items 136 to 139 ropriate ISV for the vast majority of ankle injuries is 1 or 2.		
136	Extreme	e ankle injury		
	Exampl	es of the injury	21	35
	•	A transmalleolar fracture of the ankle with extensive soft tissue damage causing 1 or more of the following—		
		(a) severe deformity with varus or valgus malalignment;		
		(b) a risk that any future injury to the relevant leg may lead to a below-knee amputation of the leg;		
		(c) marked reduction in walking ability with constant dependence on walking aids;		
		(d) inability to place the relevant foot for even load-bearing distribution.		
	•	An ankylosed ankle in a severely misaligned position with severe ongoing pain and other debilitating complications		
	•	Whole person impairment for the injury of more than 20%		
	Exampl	es of factors affecting ISV scale		
	•	A failed arthrodesis		
	•	Regular disturbance of sleep		
	•	Need for an orthosis for load bearing and walking		
137	Serious	ankle injury	T	1
	An injur	e of the injury y requiring a long period of treatment, a long time in plaster or insertion and plates, if—	11	20
	(a)	there is permanent significant ankle instability; or		
	(b)	the ability to walk is severely limited on a permanent basis		
	Exampl	es of factors affecting ISV scale		
	•	Unsightly scarring		
	•	The significance of any malunion		
	•	A requirement for modified footwear		
	•	Whether, and to what degree, there is swelling following activity		
		nal comment about appropriate level of ISV under this item will be applicable if there is whole person impairment for		

Item No	Injury	Ra	nge
	the injury of 10-19%		
138	Moderate ankle injury		
	Examples of the injury A fracture, ligamentous tear or similar injury, as evidenced by imaging and causing moderate disability, for example—	6	10
	 difficulty in walking on uneven ground 		
	awkwardness on stairs		
	irritation from metal plates		
	residual scarring		
	Additional comment about appropriate level of ISV An ISV in this range will be appropriate if there is whole person impairment for the injury of 6-9%		
139	Minor ankle injury	ī	
	Examples of the injury A sprain, ligamentous or soft tissue injury or minor or undisplaced fracture	0	5
	Examples of factors affecting ISV scale		
	 Whether the injured person has fully recovered from the injury, and if not, whether there is any tendency for the ankle to give way 		
	Whether there is scarring, aching or discomfort		
Division 1	14—Foot Injuries		
Subdivisi	on 1—Amputations		
140	Amputation of both feet		
	Examples of factors affecting ISV scale	32	65
	Severity of any phantom pain		
	• Pain in the stumps		
	 Extent of any ongoing symptoms 		
	Comment about appropriate level of ISV		
	 An ISV at or near the bottom of the range will be appropriate if there are amputations of both feet at the forefoot (transmetatarsal level amputations) 		
	• An ISV of about 40 will be appropriate if there are amputations of both feet at the mid foot (tarsometatarsal level or Lisfranc amputations)		
	 An ISV at or near the top of the range will be appropriate if each amputation is at the level of the ankle (Syme's amputation) and the stumps cannot be used with prostheses. 		
141	Amputation of 1 foot		
	Examples of factors affecting ISV scale	20	35
	Severity of any phantom pain		
	• Pain in the stump		
	Extent of any ongoing symptoms		
		1	

Item No	Injury	Ra	nge
	 An ISV at or near the bottom of the range will be appropriate if the amputation is at the forefoot (transmetatarsal level amputation) 		
	 An ISV of about 26 will be appropriate if the amputation is at the mid foot (tarsometatarsal level or Lisfranc amputation) 		
	 An ISV at or near the top of the range will be appropriate if the amputation is at the level of the ankle (Syme's amputation) and the stump cannot be used with a prosthesis. 		
Subdivisi	on 2—Other foot injuries		
142	Extreme foot injury		
	Comment There will be permanent and severe pain or very serious permanent disability.	13	25
	Example of the injury An unusually severe foot injury causing whole person impairment of 15% or more, for example, a heel fusion or loss of the tibia-calcaneum angle		
	Comment about appropriate level of ISV An ISV at or near the top of the range will be appropriate if there is subtalar fibrous ankylosis in a severely malaligned position, ongoing pain and whole person impairment for the injury of 24%.		
143	Serious foot injury		
	Examples of the injury	8	12
	A severe midfoot deformity causing whole person impairment of 8%		
	A lower level loss of the tibia-calcaneum angle		
144	Moderate foot injury	Ī	
	Example of the injury A displaced metatarsal fracture causing permanent deformity, with ongoing symptoms of minor severity, for example, a limp that does not prevent the injured person engaging in most daily activities	4	7
145	Minor foot injury		
	Examples of the injury A simple metatarsal fracture, ruptured ligament, puncture wound or similar injury	0	3
	Comment about appropriate level of ISV An ISV of 2 or less will be appropriate if there is a straightforward foot injury, for example, a fracture, laceration or contusions, from which the injured person will fully recover.		
Division 1	15—Toe injuries		
146	Extreme toe injury	Ī	
	Examples of factors affecting ISV assessment for items 146 to 149		
	Whether the amputation was traumatic or surgical		
	• Extent of the loss of the forefoot		
	Residual effects on mobility		
146.1	Amputation of all toes		
	Comment about appropriate level of ISV	8	20

Item No	Injury	Ra	nge
	 An ISV at or near the middle of the range will be appropriate if the amputation is through the metatarsophalangeal joints (MTP joints) of all toes 		
	 An ISV at or near the top of the range will be appropriate if there is complete amputation of all toes and amputation of a substantial part of the forefoot. 		
146.2	Amputation of the great toe		
	Example of factors affecting ISV The level at which the amputation happens or any ongoing symptoms	6	12
	Comment about appropriate level of ISV An ISV at or near the top of the range will be appropriate if there is complete loss of the great toe and ball of the foot caused by an amputation through the first metatarsal bone.		
146.3	Amputation of individual lesser toes		
	Example of factors affecting ISV The level at which the amputation happens or any ongoing symptoms	3	5
	Comment about appropriate level of ISV		
	• An ISV at or near the bottom of the range will be appropriate if there is an amputation of 1 lesser toe and—		
	(a) there is no ongoing pain; and		
	(b) there is little or no loss of function of the foot; and		
	(c) the cosmetic effect of the amputation is minor.		
	 An ISV at or near the top of the range will be appropriate if there is complete amputation of all lesser toes and part of the forefoot. 		
147	Serious toe injury		
	Comment The injury will cause serious and permanent disability.	8	12
	Examples of the injury		
	A severe crush injury causing ankylosis of the toes		
	A bursting wound, or an injury causing severe toe damage, with significant symptoms		
148	Moderate toe injury		
	Comment There will be permanent discomfort, pain or sensitive scarring.	4	7
	Examples of the injury		
	A moderate injury to the great toe		
	• A crush injury causing multiple fractures of 2 or more toes		
	Comment about appropriate level of ISV An ISV at or near the top of the range will be appropriate if there has been more than 1 unsuccessful operation, or there are persisting stabbing pains, impaired gait or similar effects.		

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149	Minor t	oe injury		
	Exampl	les of the injury	0	3
		vely straightforward fracture or soft tissue injury		
	An ISV	ent about appropriate level of ISV of 1 will be appropriate if there is a straightforward fracture of 1 or more h complete resolution within a short time.		
Division 1	16—Limb	disorders	T.	
150	Genera	l comment		
	The ISV schedule	for a limb disorder must be assessed having regard to the item of this e that—		
	(a)	relates to the part of the body affected by the disorder; and		
	(b)	is for an injury that has a similar level of adverse impact to the disorder.		
	Exampl	les of a limb disorder		
	•	Tenosynovitis (inflammation of synovial sheaths of tendons usually resolving with rest over a short period and sometimes leading to ongoing symptoms of loss of grip and dexterity)		
	•	Peripheral nerve injury (the constriction of the motor or sensory nerves or thickening of surrounding tissue, for example, carpal tunnel syndrome or sciatica)		
	•	Epicondylitis (inflammation around the elbow joint, for example, medially (golfer's elbow) or laterally (tennis elbow))		
	•	Vascular disorders, for example, deep vein thrombosis		
	Exampl	les of factors affecting ISV assessment		
	•	Whether the disorder is bilateral or one sided		
	•	The level of pain, swelling, tenderness or crepitus or other symptoms		
	•	The capacity to avoid a recurrence of symptoms		
	•	The ability to engage in daily activities		
	•	The availability and likely benefit of surgery		
	•	Whether the disorder is to a dominant or non-dominant limb		
Part 7—S	Scarring t	to parts of the body other than the face		
	Genera	l comment		
	•	This Part applies to external appearance and physical condition of the skin only, and includes scarring to the scalp, trunk and limbs		
	•	Facial scarring must be assessed under Part 3, Division 3		
	•	This Part does not apply to adhesions, or scarring, of internal organs		
	•	This Part will usually apply to an injury involving skeletal damage only if the skeletal damage is minor		
	•	Many of the physical injuries mentioned in this schedule involve some scarring from the initial injury and subsequent surgery, including skin grafting, to repair the injury and this has been taken into account in fixing the range of ISVs for the injuries.		

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	Example— The ISV range for an injury causing a closed fracture of a limb takes into account the potential need for open reduction and internal fixation of the fracture and the resulting surgical wound and scar.		
	Examples of factors affecting ISV assessment for items 151 to 154		
	Location of a scar		
	• Age		
	Consequential mental harm		
	Likelihood of a scar fading or becoming less noticeable over time		
151	Extreme scarring to a part of the body other than the face		
	Comment about appropriate level of ISV	20	25
	 An ISV at or near the bottom of the range will be appropriate if there is— (a) extensive scarring to 1 or more of the limbs and significant 		
	cosmetic disfigurement; and		
	(b) either—		
	(i) the need to keep the limb or limbs covered or wear special clothing; or		
	 (ii) ongoing limitation in the ability to participate in activities because of cosmetic disfigurement or functional impairment. 		
	 An ISV at or near the top of the range will be appropriate if there is gross permanent scarring over an extensive area or areas of the body, with ongoing pain and other symptoms. 		
152	Serious scarring to a part of the body other than the face		
	Comment There is serious scarring—	12	19
	(a) requiring extensive medical treatment or surgery; and		
	(b) causing significant ongoing limitation in the ability to participate in activities because of cosmetic disfigurement or functional impairment.		
	Examples of the injury		
	 Significant scarring over the upper and lower arm requiring skin grafting if— 		
	 there are post-operative complications requiring additional medical treatment for up to 18 months; and 		
	(b) there is maximum medical improvement within 2 years after the scarring is caused.		
	• Hypertrophic (keloid) scarring caused by a burn to the front of the neck, with an intermittent sensation of burning, itching or irritation.		

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153	Moderate scarring to a part of the body other than the fac	ce	
	Examples of the injury	8	11
	Several noticeable scars that are hypertrophic (kelo	id)	
	 A significant linear scar in an area of major cosmet example, the front of the neck 	ic importance, for	
154	Minor scarring to a part of the body other than the face		
	Examples of the injury	0	7
	 Scarring caused by a superficial burn that heals with causes some minor change of pigmentation in a not 		
	 A single noticeable scar, or several superficial scars legs, arms or hands, with some minor cosmetic dam 		
Part 8—I	Injuries affecting the hair		
155	Extreme injury affecting head hair		
	Example of the injury Total permanent loss of head hair	11	15
156	Serious injury affecting head hair		
	Example of the injury Damage to head hair—	4	10
	(a) the physical effect of the damage is—		
	(i) dermatitis; or		
	(ii) tingling or burning of the scalp, causing d breaks off or falls out, or both; and	lry, brittle hair that	
	(b) the physical effect leads to depression, loss of confisocial life	idence and inhibited	
	Comment about appropriate level of ISV An ISV under this item will be appropriate if—		
	(a) thinning continues and prospects of regrowth are po	oor; or	
	(b) there is a partial loss of areas of hair and regrowth i	is slow.	
157	Moderate injury affecting head hair or loss of body hair		
	Examples of the injury	0	3
	Hair that has been pulled out leaving bald patches		
	 The same example applies as for item 156 but with moderate symptoms 	fewer or only	
	Example of factor affecting ISV scale Length of time before regrowth		
Part 9—I	Burn injuries	1	
	Mapped to max body part		
	General comment		
	 The ISV for a burn injury must be assessed having this schedule that— 	regard to the item of	

Item No	Injury		Range
		(a) relates to the part of the body affected by the burn injury; and	
		(b) is for an injury that has a similar level of adverse impact to the burn injury.	
	•	Burns to the face must be assessed under the section on scarring to the face	
	•	In burns cases, the ISV for an injury to a part of the body causing functional impairment will generally be at or near the top of the range for an injury to that part of the body	
	•	In serious burns cases, the effects of scarring are more comprehensive and less able to be remedied than the effects of scarring from other causes.	

Schedule 2—Revocation of Civil Liability Regulations 2007

The Civil Liability Regulations 2007 are revoked.

Note-

As required by section 10AA(2) of the *Subordinate Legislation Act 1978*, the Minister has certified that, in the Minister's opinion, it is necessary or appropriate that these regulations come into operation as set out in these regulations.

Made by the Governor

on the recommendation of the designated Minister and with the advice and consent of the Executive Council on 20 June 2013

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T&F13/021CS