

SCHEDULE 4

Article 14

THE TARIFF

Table 1 – Burns(*)

<i>Item</i>	<i>Column (a) Level</i>	<i>Column (b) Injury</i>
1.	4	Burns, with deep second degree, third degree, or full thickness burns affecting 70 per cent or more of whole body surface area.
2.	5	Burns, with deep second degree, third degree, or full thickness burns affecting 50 to 69 per cent of whole body surface area.
3.	6	Burns, with deep second degree, third degree, or full thickness burns affecting 15 to 49 per cent of whole body surface area.
4.	7	Burns, with deep second degree, third degree, or full thickness burns to the face or face and neck resulting in or expected to result in residual scarring and poor cosmetic results despite treatment and camouflage.
5.	8	Burns, with deep second degree, third degree, or full thickness burns affecting 9 to 14.9 per cent of whole body surface area.
6.	9	Burns, with deep second degree, third degree, or full thickness burns to the face or face and neck resulting in or expected to result in residual scarring and satisfactory cosmetic results with camouflage.

(*) Awards for all burns include compensation for any residual scarring or pigmentation.

(*) Awards for deep second degree, third degree or full thickness burns include compensation for actual or expected metabolic or cardiovascular consequences.

(*) Awards for injuries in this table include compensation for any associated psychological effects short of a distinct diagnosable disorder.

Status: Point in time view as at 30/06/2006.

Changes to legislation: There are currently no known outstanding effects for the The Armed Forces and Reserve Forces (Compensation Scheme) Order 2005, SCHEDULE 4. (See end of Document for details)

7.	11	Burns, with deep second degree, third degree, or full thickness burns affecting 4.5 to 8.9 per cent of whole body surface area.
8.	12	Burns, with deep second degree, third degree, or full thickness burns affecting less than 4.5 per cent of whole body surface area.
9.	12	Burns, with first degree or superficial second degree burns affecting more than 15 percent of whole body surface area.
10.	13	Burns, with first degree or superficial second degree burns to the face or face and neck.
11.	14	Burns, with first degree or superficial second degree burns affecting 4.5 to 15 percent of whole body surface area.
12.	15	Burns, with first degree or superficial second degree burns affecting 1 to 4.4 per cent of whole body surface area.

(*) Awards for all burns include compensation for any residual scarring or pigmentation.

(*) Awards for deep second degree, third degree or full thickness burns include compensation for actual or expected metabolic or cardiovascular consequences.

(*) Awards for injuries in this table include compensation for any associated psychological effects short of a distinct diagnosable disorder.

Table 2 – Injury, Wounds and Scarring(*)

<i>Item</i>	<i>Column (a) Level</i>	<i>Column (b) Injury</i>
1.	5	Complex injury covering all or most of the area from thigh to ankle or shoulder to wrist, with complications, causing permanent functional limitation and restriction.
2.	5	Loss of both kidneys or chronic renal failure.

Status: Point in time view as at 30/06/2006.

Changes to legislation: There are currently no known outstanding effects for the The Armed Forces and Reserve Forces (Compensation Scheme) Order 2005, SCHEDULE 4. (See end of Document for details)

3.	6	Complex injury covering all or most of the area from thigh to knee, knee to ankle, shoulder to elbow or elbow to wrist, with complications, causing permanent functional limitation and restriction.
4.	6	Injury covering all or most of the area from thigh to ankle or shoulder to wrist, with complications, causing permanent functional limitation and restriction.
5.	6	Complex injury to chest, with complications, causing permanent functional limitation and restriction.
6.	7	Complex injury covering all or most of the area from thigh to ankle or shoulder to wrist, causing permanent functional limitation and restriction.
7.	7	Injury covering all of the area from thigh to knee, knee to ankle, shoulder to elbow or elbow to wrist, with complications, causing permanent functional limitation and restriction.
8.	7	Injury to chest, with complications, causing permanent functional limitation and restriction.
9.	7	Complex injury to abdomen, including pelvis, with complications, causing permanent functional limitation and restriction.
10.	8	Injury covering all or most of the area from thigh to ankle or shoulder to wrist, causing permanent functional limitation and restriction.
11.	8	Complex injury covering all or most of the area from thigh to knee, knee to ankle, shoulder to elbow or elbow to wrist,

Status: Point in time view as at 30/06/2006.

Changes to legislation: There are currently no known outstanding effects for the The Armed Forces and Reserve Forces (Compensation Scheme) Order 2005, SCHEDULE 4. (See end of Document for details)

		causing permanent functional limitation and restriction.
12.	8	Severe facial lacerations which produce poor cosmetic result despite camouflage and have required, or are expected to require, operative treatment.
13.	8	Injury to abdomen, including pelvis, with complications, causing permanent functional limitation and restriction.
14.	8	Injury to chest, causing permanent major functional limitation and restriction.
15.	9	Injury to abdomen, including pelvis, causing permanent functional limitation and restriction.
16.	9	Injury covering all or most of the area from thigh to knee, knee to ankle, shoulder to elbow or elbow to wrist, causing permanent functional limitation and restriction.
17.	10	Serious permanent damage to, or loss of, one kidney.
18.	10	Severe facial lacerations, which have required, or are expected to require, operative treatment resulting in or expected to result in a satisfactory cosmetic result.
19.	11	Complex injury covering all or most of the area from thigh to ankle or shoulder to wrist, causing or expected to cause functional limitation and restriction at 26 weeks with substantial recovery beyond that date.
20.	11	Traumatic damage to spleen which has required splenectomy and where there is, or where there is a high risk of, overwhelming post-splenectomy infection.

Status: Point in time view as at 30/06/2006.

Changes to legislation: There are currently no known outstanding effects for the The Armed Forces and Reserve Forces (Compensation Scheme) Order 2005, SCHEDULE 4. (See end of Document for details)

21.	11	Severe facial scarring which produces a poor cosmetic result despite camouflage.
22.	12	Complex injury covering all or most of the area from thigh to knee, knee to ankle, shoulder to elbow or elbow to wrist, causing or expected to cause functional limitation and restriction at 26 weeks with substantial recovery beyond that date.
23.	12	Severe scarring of face, or face and neck, or neck, scalp, torso or limb, where camouflage produces a good cosmetic result.
24.	12	Injury to chest with complications, causing or expected to cause functional limitation and restriction at 26 weeks, with substantial recovery beyond that date.
25.	12	Injury covering all or most of the area thigh to ankle or shoulder to wrist, causing or expected to cause functional limitation and restriction at 26 weeks, with substantial recovery beyond that date.
26.	12	High velocity gun shot wound affecting skin, subcutaneous tissue and muscle of the abdomen, chest or limbs.
27.	12	Traumatic injury to genitalia requiring treatment resulting in severe permanent damage or loss.
28.	13	Injury to abdomen including pelvis, with complications, causing or expected to cause functional limitation and restriction at 26 weeks with substantial recovery beyond that date.
29.	13	Injury to all or most of the area from thigh to knee, knee to ankle, shoulder to elbow or elbow to wrist, causing or

Status: Point in time view as at 30/06/2006.

Changes to legislation: There are currently no known outstanding effects for the The Armed Forces and Reserve Forces (Compensation Scheme) Order 2005, SCHEDULE 4. (See end of Document for details)

		expected to cause functional limitation and restriction at 26 weeks, with substantial recovery beyond that date.
30.	13	Injury to chest, causing or expected to cause functional limitation and restriction at 26 weeks, where the claimant has made or is expected to make a substantial recovery beyond that date.
31.	13	Moderate facial scarring where camouflage produces a good cosmetic result.
32.	13	Lung damage due to toxic fumes, smoke inhalation or blast, where symptoms have continued, or are expected to continue beyond 6 weeks and where the claimant has made or is expected to make a substantial recovery within 26 weeks.
33.	13	Traumatic tension or open pneumothorax.
34.	14	Injury to abdomen including pelvis, causing or expected to cause functional limitation and restriction at 26 weeks, with substantial recovery beyond that date.
35.	14	Moderate scarring of scalp, neck, torso or limbs where camouflage produces a good cosmetic result.
36.	14	Minor facial scarring.
37.	14	Flesh wound which has required, or is expected to require operative treatment.
38.	14	Fractured tooth which has required, or is expected to require root resection.
39.	14	Loss of two or more front teeth.
40.	14	Traumatic injury to genitalia requiring treatment resulting in moderate permanent damage.

Status: Point in time view as at 30/06/2006.

Changes to legislation: There are currently no known outstanding effects for the The Armed Forces and Reserve Forces (Compensation Scheme) Order 2005, SCHEDULE 4. (See end of Document for details)

41.	15	Minor scarring of scalp, neck, torso or limbs.
42.	15	Damage to one front tooth which has required, or is expected to require a crown or root canal surgery.
43.	15	Damage to two or more teeth other than front which has required, or is expected to require crowns or root canal surgery.
44.	15	Loss of one front tooth.
45.	15	Loss of two or more teeth other than front.
46.	15	Injury to abdomen including pelvis, causing or expected to cause functional limitation and restriction at 13 weeks, with substantial recovery within 26 weeks.

(* When applied to limb injuries the expression “complex injury” means that the injury affects all or most of the following structures: skin, subcutaneous tissues, muscle, bone, blood vessels and nerves.

(* When applied to limb injuries the expression “with complications” means that the injury is complicated by at least one of septicaemia, osteomyelitis, vascular or neurological injury, avascular necrosis, gross shortening of the limb, mal-united or non-united fracture, or the fact that the claimant has required, or is expected to require a bone or skin graft.

(* When applied to chest and abdominal (including pelvis) injuries the expression “complex injury” means that there is damage to vital structures and organs including two or more of the following: trachea, lungs, heart, oesophagus, great vessels, diaphragm, chest or abdominal wall, liver, kidneys, spleen or ovaries.

(* When applied to chest and abdominal (including pelvis) injuries the expression “with complications” means that management of the injury has required two or more of the following: resuscitation, ventilation, thoracic or abdominal drainage or a laparotomy with repair and/or removal of organs and structure.

(* Any award for injury to limbs, chest or abdomen includes compensation for related scarring and damage to, or removal of structures (including skin, subcutaneous tissue, muscle, bone, blood vessels and nerves).

(* Any references to duration of effects in column (b) are from date of injury or onset of illness.

(* Awards for injuries in this table include compensation for any associated psychological effects short of a distinct diagnosable disorder.

Table 3– Mental disorders(*)

<i>Item</i>	<i>Column (a) Level</i>	<i>Column (b) Injury</i>
(*) In assessing functional limitation and restriction for mental disorders account shall be taken of psychological, social and occupational function.		
(*) Functional limitation and restriction is likely to be severe where symptoms or behaviours include mania, delusions, hallucinations, severe depression with suicidal preoccupations or abnormal rituals.		
(*) Mental disorders must be diagnosed by a relevant accredited medical specialist.		
(*) Any references to duration of effects in column (b) are from date of injury or onset of illness.		

Status: Point in time view as at 30/06/2006.

Changes to legislation: There are currently no known outstanding effects for the The Armed Forces and Reserve Forces (Compensation Scheme) Order 2005, SCHEDULE 4. (See end of Document for details)

1.	8	Permanent mental disorder, causing severe functional limitation and restriction.
2.	10	Permanent mental disorder, causing moderate functional limitation and restriction.
3.	11	Mental disorder, causing functional limitation and restriction, which has continued, or is expected to continue for 5 years.
4.	12	Mental disorder, which has caused or is expected to cause functional limitation and restriction at 2 years, from which the claimant has made or is expected to make a substantial recovery within 5 years.
5.	13	Mental disorder, which has caused, or is expected to cause, functional limitation and restriction, at 26 weeks, from which the claimant has made, or is expected to make a substantial recovery within 2 years.
6.	14	Mental disorder, which has caused or is expected to cause, functional limitation and restriction at 6 weeks, from which the claimant has made, or is expected to make a substantial recovery within 26 weeks.

(* In assessing functional limitation and restriction for mental disorders account shall be taken of psychological, social and occupational function.

(* Functional limitation and restriction is likely to be severe where symptoms or behaviours include mania, delusions, hallucinations, severe depression with suicidal preoccupations or abnormal rituals.

(* Mental disorders must be diagnosed by a relevant accredited medical specialist.

(* Any references to duration of effects in column (b) are from date of injury or onset of illness.

Table 4 – Physical disorders including infectious diseases(*)

<i>Item</i>	<i>Column (a) Level</i>	<i>Column (b) Injury</i>
(* Any references to duration of effects in column (b) are from date of injury or onset of illness.		
(* Awards for injuries in this table include compensation for any associated psychological effects short of a distinct diagnosable disorder.		

Status: Point in time view as at 30/06/2006.

Changes to legislation: There are currently no known outstanding effects for the The Armed Forces and Reserve Forces (Compensation Scheme) Order 2005, SCHEDULE 4. (See end of Document for details)

1.	6	Physical disorder causing severe functional limitation and restriction where life expectancy is less than five years.
2.	7	Physical disorder causing severe functional limitation and restriction where life expectancy is reduced, but is more than 5 years.
3.	8	Infertility.
4.	9	Physical disorder causing permanent severe functional limitation and restriction.
5.	11	Physical disorder which has caused, or is expected to cause severe functional limitation and restriction at 26 weeks where the claimant has made, or is expected to make, a substantial recovery beyond that date.
6.	11	Physical disorder causing permanent moderate functional limitation and restriction.
7.	13	Physical disorder which has caused, or is expected to cause, severe functional limitation and restriction at 6 weeks, from which the claimant has made, or is expected to make, a substantial recovery within 26 weeks.
8.	13	Physical disorder which has caused, or is expected to cause, moderate functional limitation and restriction at 26 weeks, from which the claimant has made, or is expected to make, a substantial recovery beyond that date.
9.	14	Physical disorder which has caused, or is expected to cause, severe functional limitation and restriction at 6 weeks,

(*) Any references to duration of effects in column (b) are from date of injury or onset of illness.

(*) Awards for injuries in this table include compensation for any associated psychological effects short of a distinct diagnosable disorder.

Status: Point in time view as at 30/06/2006.

Changes to legislation: There are currently no known outstanding effects for the The Armed Forces and Reserve Forces (Compensation Scheme) Order 2005, SCHEDULE 4. (See end of Document for details)

10.	14	from which the claimant has made, or is expected to make, a substantial recovery within 13 weeks.
		Physical disorder which has caused, or is expected to cause, moderate functional limitation and restriction at 13 weeks, from which the claimant has made, or is expected to make, a substantial recovery within 26 weeks.
11.	15	Physical disorder which has caused, or is expected to cause, moderate functional limitation and restriction at 6 weeks, from which the claimant has made, or is expected to make, a substantial recovery within 13 weeks.

(*) Any references to duration of effects in column (b) are from date of injury or onset of illness.

(*) Awards for injuries in this table include compensation for any associated psychological effects short of a distinct diagnosable disorder.

Table 5 – Amputations(*)

<i>Item</i>	<i>Column (a) Level</i>	<i>Column (b) Injury</i>
1.	1	Loss of both legs (above or below knee) and both arms (above or below elbow).
2.	1	Loss of both eyes or sight in both eyes and loss of either both legs (above or below knee), or both arms (above or below elbow).
3.	1	Total deafness and loss of either both legs or both arms.
4.	2	Loss of both legs above knee (hip disarticulation or hemipelvectomy).

(*) Loss of a finger means that amputation has taken place at the metacarpophalangeal joint.

(*) Loss of a toe means that amputation has taken place at the metatarsophalangeal joint.

(*) Any references to duration of effects in column (b) are from date of injury or onset of illness.

(*) Awards for injuries in this table include compensation for any associated psychological effects short of a distinct diagnosable disorder.

Status: Point in time view as at 30/06/2006.

Changes to legislation: There are currently no known outstanding effects for the The Armed Forces and Reserve Forces (Compensation Scheme) Order 2005, SCHEDULE 4. (See end of Document for details)

5.	2	Loss of both arms above elbow (shoulder disarticulation or forequarter).
6.	2	Loss of both legs (above or below knee) and one arm (above or below elbow).
7.	2	Loss of both arms (above or below elbow) and one leg (above or below knee).
8.	3	Loss of both legs at or above knee (trans-femoral or knee disarticulation).
9.	3	Loss of both arms at or above elbow (trans-humeral or elbow disarticulation).
10.	3	Loss of one leg above knee (hip disarticulation or hemipelvectomy).
11.	3	Loss of one arm above elbow (shoulder disarticulation or forequarter).
12.	3	Loss of one leg at or above knee and one arm at or above elbow.
13.	4	Loss of both legs below knee (trans-tibial).
14.	4	Loss of both arms below elbow (trans-radial).
15.	4	Loss of both hands (wrist disarticulation).
16.	4	Loss of one leg at or above knee and one leg below knee.
17.	4	Loss of one arm at or above elbow, and one arm below elbow.
18.	4	Loss of one leg at or above knee and one arm below elbow.
19.	4	Loss of one arm at or above elbow and one leg below knee.

(*) Loss of a finger means that amputation has taken place at the metacarpophalangeal joint.

(*) Loss of a toe means that amputation has taken place at the metatarsophalangeal joint.

(*) Any references to duration of effects in column (b) are from date of injury or onset of illness.

(*) Awards for injuries in this table include compensation for any associated psychological effects short of a distinct diagnosable disorder.

Status: Point in time view as at 30/06/2006.

Changes to legislation: There are currently no known outstanding effects for the The Armed Forces and Reserve Forces (Compensation Scheme) Order 2005, SCHEDULE 4. (See end of Document for details)

20.	5	Loss of both feet at ankle.
21.	5	Loss of one leg at or above knee (trans-femoral or knee disarticulation).
22.	5	Loss of one arm at or above elbow (trans-humeral or elbow disarticulation).
23.	5	Loss of one leg below knee and one arm below elbow.
24.	6	Loss of one leg below knee (trans-tibial).
25.	6	Loss of one arm below elbow (trans-radial).
26.	6	Loss of one hand (wrist disarticulation).
27.	7	Loss of both thumbs.
28.	8	Loss of one foot at ankle.
29.	10	Loss of both great toes.
30.	10	Loss of thumb.
31.	10	Loss of both index fingers.
32.	10	Loss of two or more fingers, other than thumb or index finger, from each hand.
33.	10	Partial loss of thumb and index finger from each hand
34.	11	Loss of two or more fingers other than thumb or index finger from one hand.
35.	12	Loss of great toe.
36.	12	Loss of two or more toes, other than great toe, from each foot.
37.	12	Loss of index finger from one hand.
38.	12	Partial loss of thumb and index finger from one hand.

(*) Loss of a finger means that amputation has taken place at the metacarpophalangeal joint.

(*) Loss of a toe means that amputation has taken place at the metatarsophalangeal joint.

(*) Any references to duration of effects in column (b) are from date of injury or onset of illness.

(*) Awards for injuries in this table include compensation for any associated psychological effects short of a distinct diagnosable disorder.

Status: Point in time view as at 30/06/2006.**Changes to legislation:** There are currently no known outstanding effects for the The Armed Forces and Reserve Forces (Compensation Scheme) Order 2005, SCHEDULE 4. (See end of Document for details)

39.	12	Partial loss of two or more fingers, other than thumb or index finger, from each hand.
40.	12	Loss of finger, other than thumb or index finger, from each hand.
41.	12	Partial loss of thumb or index finger from each hand.
42.	12	Persistent phantom limb pain.
43.	12	Stump neuroma with trigger point stump pain.
44.	13	Loss of two or more toes, other than great toe, from one foot.
45.	13	Partial loss of each great toe.
46.	13	Partial loss of one finger, other than thumb or index finger, from each hand.
47.	13	Loss of one finger, other than thumb or index finger, from one hand.
48.	13	Partial loss of two or more fingers, other than thumb or index finger, from one hand.
49.	13	Partial loss of thumb or index finger from one hand.
50.	14	Partial loss of great toe from one foot.
51.	14	Loss of one toe, other than great toe, from each foot.
52.	14	Partial loss of one finger, other than thumb or index finger, from one hand.
53.	15	Loss of one toe, other than great toe, from one foot.

(*) Loss of a finger means that amputation has taken place at the metacarpophalangeal joint.

(*) Loss of a toe means that amputation has taken place at the metatarsophalangeal joint.

(*) Any references to duration of effects in column (b) are from date of injury or onset of illness.

(*) Awards for injuries in this table include compensation for any associated psychological effects short of a distinct diagnosable disorder.

Table 6– Neurological disorders, including spinal cord, head or brain injuries (*)

<i>Item</i>	<i>Column (a) Level</i>	<i>Column (b) Injury</i>
-------------	-----------------------------	------------------------------

Status: Point in time view as at 30/06/2006.

Changes to legislation: There are currently no known outstanding effects for the The Armed Forces and Reserve Forces (Compensation Scheme) Order 2005, SCHEDULE 4. (See end of Document for details)

1.	1	Spinal cord injury, at or above vertebra C3.
2.	1	Brain injury with persistent vegetative state ^a .
3.	1	Brain injury where epilepsy is present (or where there is a high risk of epilepsy) and the claimant has reflex activity but has little or no meaningful response to the environment and requires full-time skilled nursing care ^b .
4.	2	Spinal cord injury at vertebra C4 or C5 or C6.
5.	3	Spinal cord injury at vertebra C7, C8 or T1.
6.	3	Brain injury where epilepsy is present (or where there is a high risk of epilepsy) where the claimant has limited response to environment and substantial physical, sensory, personality, behavioural or cognitive problems and requires regular skilled nursing care ^c .
7.	4	Spinal cord injury at vertebra T2 to T6.
8.	4	Brain injury where epilepsy is either present (or where there is a high risk of epilepsy) where the claimant has some limitation on response to environment and some sensory, personality, behavioural or cognitive problems but does not require skilled nursing care ^d .
9.	5	Spinal cord injury at vertebra T7 to T10.
10.	5	Hemiplegia.
11.	6	Spinal cord injury at vertebra T11 to L1.
12.	6	Uncontrolled post-head-injury epilepsy.

13.	7	Spinal cord injury at vertebra below L1.
14.	9	Permanent upper limb paralysis due to traumatic damage to brachial plexus – pre-ganglionic.
15.	9	Permanent isolated damage to one cranial nerve.
16.	10	Permanent foot or wrist drop.
17.	11	Brain injury from which the claimant has made, or is expected to make, a substantial recovery beyond 26 weeks, except for residual vertigo ^e .
18.	11	Brain haemorrhage or stroke which has caused, or is expected to cause, persistent functional limitation and restriction at 26 weeks, but where there has been, or is expected to be, a substantial recovery beyond that date.
19.	12	Brain injury from which the claimant has made, or is expected to make, a substantial recovery beyond 26 weeks, except for problems with memory or concentration ^f .
20.	12	Controlled post-head-injury epilepsy.
21.	12	Permanent substantial peripheral motor sensory or autonomic nerve damage.
22.	12	Entrapment neuropathy which has not responded to treatment.
23.	12	Permanent upper limb paralysis due to traumatic damage to brachial plexus – post-ganglionic.
24.	13	Permanent facial numbness including lip.
25.	13	Entrapment neuropathy which has responded, or is expected to respond, to treatment.

Status: Point in time view as at 30/06/2006.

Changes to legislation: There are currently no known outstanding effects for the The Armed Forces and Reserve Forces (Compensation Scheme) Order 2005, SCHEDULE 4. (See end of Document for details)

26.	14	Permanent facial numbness which does not include the lip.
27.	14	Minor head injury which has caused or is expected to cause, impaired balance or post-traumatic syndrome for more than 6 weeks from which the claimant has made, or is expected to make, a substantial recovery within 26 weeks.
28.	15	Permanent minor peripheral sensory nerve damage.

(* An award for brain injury in levels 1, 3 or 4 includes compensation for associated epilepsy.

(* Any references to duration of effects in column (b) are from date of injury or onset of illness.

(* Spinal cord injury – the level of spinal cord injury is the lowest intact spinal cord segment. Awards include compensation for long-term neurological consequences, muscle spasms and effects on skin, spine, joints, bladder, bowel and sexual function and the cardiovascular and respiratory systems.

(* Awards for injuries in this table include compensation for any associated psychological effects short of a distinct diagnosable disorder.

(a) The Claimant is likely to have had a post-resuscitation Glasgow Coma scale of less than 5.

(b) The Claimant is likely to have had a post-resuscitation Glasgow Coma scale of less than 5.

(c) The Claimant is likely to have had a post-resuscitation Glasgow Coma scale of less than 6–8.

(d) The Claimant is likely to have had a post-resuscitation Glasgow Coma scale of less than 9–12.

(e) The Claimant is likely to have had a post-resuscitation Glasgow Coma scale of less than 13–15.

(f) The Claimant is likely to have had a post-resuscitation Glasgow Coma scale of less than 13–15.

Table 7 – senses(*)

<i>Item</i>	<i>Column (a) Level</i>	<i>Column (b) Injury</i>
1.	1	Total deafness and loss of both eyes, or total deafness and blindness in both eyes, or total deafness and loss of one eye and blindness in the other eye.
2.	2	Loss of eyes.
3.	2	Blindness in both eyes.
4.	2	Loss of one eye and blindness in the other eye.

(* For the purposes of the scheme the following definitions apply: “Blindness” means that the claimant must have been diagnosed as being blind by an accredited medical specialist, and have a visual acuity of 3/60 or worse in both eyes; and “Total deafness”, means that the claimant’s bilateral average hearing threshold level is 90 dB or more averaged over 1, 2 and 3 kHz as measured by appropriately calibrated equipment meeting British Standards, and using quality assured pure tone audiometry.

(* Any references to duration of effects in column (b) are from date of injury or onset of illness.

(* Awards for injuries in this table include compensation for any associated psychological effects short of a distinct diagnosable disorder.

Status: Point in time view as at 30/06/2006.

Changes to legislation: There are currently no known outstanding effects for the The Armed Forces and Reserve Forces (Compensation Scheme) Order 2005, SCHEDULE 4. (See end of Document for details)

5.	5	Loss of one eye and permanent damage to the other eye, where visual acuity is correctable to 6/36.
6.	6	Deafness in both ears.
7.	8	Loss of one eye or blindness in one eye.
8.	9	Bilateral permanent hearing loss of more than 75dB averaged over 1, 2 and 3kHz, with severe persistent tinnitus.
9.	9	Partial loss of vision where binocular visual acuity is correctable to 6/60.
10.	9	Permanent and inoperable cataracts in both eyes.
11.	10	Deafness in one ear.
12.	10	Partial loss of vision where binocular visual acuity is correctable to 6/36.
13.	10	Bilateral permanent hearing loss of more than 75dB averaged over 1, 2 and 3kHz, with mild or no tinnitus.
14.	11	Detached retina in both eyes.
15.	11	Bilateral permanent hearing loss of 50–75dB averaged over 1, 2 and 3kHz, with severe tinnitus.
16.	11	Partial loss of vision where binocular visual acuity is correctable to 6/24.
17.	12	Partial loss of vision where binocular visual acuity is correctable to 6/18.
18.	12	Permanent and inoperable cataract in one eye.
19.	12	Operable cataracts in both eyes.

(*) For the purposes of the scheme the following definitions apply: “Blindness” means that the claimant must have been diagnosed as being blind by an accredited medical specialist, and have a visual acuity of 3/60 or worse in both eyes; and “Total deafness”, means that the claimant’s bilateral average hearing threshold level is 90 dB or more averaged over 1, 2 and 3 kHz as measured by appropriately calibrated equipment meeting British Standards, and using quality assured pure tone audiometry.

(*) Any references to duration of effects in column (b) are from date of injury or onset of illness.

(*) Awards for injuries in this table include compensation for any associated psychological effects short of a distinct diagnosable disorder.

Status: Point in time view as at 30/06/2006.

Changes to legislation: There are currently no known outstanding effects for the The Armed Forces and Reserve Forces (Compensation Scheme) Order 2005, SCHEDULE 4. (See end of Document for details)

20.	13	Bilateral permanent hearing loss of 50–75dB averaged over 1, 2 and 3kHz, with mild or no tinnitus.
21.	13	Significant penetrating injury to both eyes.
22.	13	Detached retina in one eye.
23.	13	Retinal damage (not detached) to both eyes.
24.	13	Partial loss of vision where binocular visual acuity is correctable to 6/12.
25.	13	Dislocation of lens in one eye.
26.	13	Degeneration of optic nerve in both eyes.
27.	13	Permanent diplopia.
28.	14	Blast injury to ears.
29.	14	Diplopia which is present, or is expected to be present, at 13 weeks, from which the claimant has made, or is expected to make, a substantial recovery beyond that date.
30.	14	Operable cataract in one eye.
31.	14	Corneal abrasions in both eyes.
32.	14	Hyphaema in both eyes which has required, or is expected to require, operative treatment.
33.	14	Retinal damage (not detached) in one eye.
34.	14	Significant penetrating injury in one eye.
35.	14	Degeneration of optic nerve in one eye.
36.	15	Diplopia which is present, or is expected to be present at 6 weeks, from which the claimant has made, or is

(*) For the purposes of the scheme the following definitions apply: “Blindness” means that the claimant must have been diagnosed as being blind by an accredited medical specialist, and have a visual acuity of 3/60 or worse in both eyes; and “Total deafness”, means that the claimant's bilateral average hearing threshold level is 90 dB or more averaged over 1, 2 and 3 kHz as measured by appropriately calibrated equipment meeting British Standards, and using quality assured pure tone audiometry.

(*) Any references to duration of effects in column (b) are from date of injury or onset of illness.

(*) Awards for injuries in this table include compensation for any associated psychological effects short of a distinct diagnosable disorder.

Status: Point in time view as at 30/06/2006.

Changes to legislation: There are currently no known outstanding effects for the The Armed Forces and Reserve Forces (Compensation Scheme) Order 2005, SCHEDULE 4. (See end of Document for details)

		expected to make, a substantial recovery beyond that date.
37.	15	Corneal abrasions in one eye.
38.	15	Hyphaema in one eye which has required, or is expected to require, operative treatment.

(*) For the purposes of the scheme the following definitions apply: “Blindness” means that the claimant must have been diagnosed as being blind by an accredited medical specialist, and have a visual acuity of 3/60 or worse in both eyes; and “Total deafness”, means that the claimant's bilateral average hearing threshold level is 90 dB or more averaged over 1, 2 and 3 kHz as measured by appropriately calibrated equipment meeting British Standards, and using quality assured pure tone audiometry.

(*) Any references to duration of effects in column (b) are from date of injury or onset of illness.

(*) Awards for injuries in this table include compensation for any associated psychological effects short of a distinct diagnosable disorder.

Table 8 –Fractures and dislocations(*)

<i>Item</i>	<i>Column (a) Level</i>	<i>Column (b) Injury</i>
1.	10	Fractured heels of both feet causing permanent significant functional limitation and restriction.
2.	10	Fractures or dislocations or both of both hips, both ankles, both shoulders, both elbows or both wrists causing permanent significant functional limitation and restriction.
3.	10	Multiple face fractures causing permanent significant cosmetic effect and functional limitation and restriction despite treatment.
4.	11	Fractures or dislocations or both of both hips, both ankles, both shoulders, both elbows or both wrists which have caused, or are expected to cause, significant functional limitation and restriction at 26 weeks, from which the claimant has made, or is

(*) The tariff values for fractures refer to closed fractures. Where the fracture is open the award shall be increased by £1,000.

(*) An award for an injury in this table includes compensation for any expected consequential osteoarthritis.

(*) Any references to duration of effects in column (b) are from date of injury or onset of illness.

(*) Awards for injuries in this table include compensation for any associated psychological effects short of a distinct diagnosable disorder.

Status: Point in time view as at 30/06/2006.

Changes to legislation: There are currently no known outstanding effects for the The Armed Forces and Reserve Forces (Compensation Scheme) Order 2005, SCHEDULE 4. (See end of Document for details)

		expected to make a substantial recovery beyond that date.
5.	11	Fractured heel of one foot, causing permanent significant functional limitation and restriction.
6.	11	Fractured heel of each foot which has caused, or is expected to cause, significant functional limitation and restriction beyond 26 weeks.
7.	11	Fracture of pelvis which has caused, or is expected to cause, significant functional limitation and restriction beyond 26 weeks.
8.	11	Fracture or dislocation or both of great toe, of each foot, which has caused, or is expected to cause, significant functional limitation and restriction beyond 26 weeks.
9.	11	Fractured tarsal bones of each foot which has caused, or is expected to cause, significant functional limitation and restriction beyond 26 weeks.
10.	11	Fractures of both femurs, both tibiae, both humeri, both ulnae or both radii which have caused, or are expected to cause, continuing significant functional limitation and restriction beyond 26 weeks.
11.	11	Multiple fractures to face, or face and neck where treatment has led, or is expected to lead, to a good cosmetic and functional outcome.
12.	11	Fracture or dislocation or both of one hip, elbow, wrist, ankle or shoulder causing permanent significant

(*) The tariff values for fractures refer to closed fractures. Where the fracture is open the award shall be increased by £1,000.

(*) An award for an injury in this table includes compensation for any expected consequential osteoarthritis.

(*) Any references to duration of effects in column (b) are from date of injury or onset of illness.

(*) Awards for injuries in this table include compensation for any associated psychological effects short of a distinct diagnosable disorder.

Status: Point in time view as at 30/06/2006.

Changes to legislation: There are currently no known outstanding effects for the The Armed Forces and Reserve Forces (Compensation Scheme) Order 2005, SCHEDULE 4. (See end of Document for details)

		functional limitation and restriction.
13.	12	Fracture of one humerus, femur, radius, ulna or tibia which has caused, or is expected to cause, significant functional limitation and restriction beyond 26 weeks.
14.	12	Fracture of mandible or maxilla which has required or is expected to require operative treatment and which has caused, or is expected to cause, significant functional limitation and restriction beyond 26 weeks.
15.	12	Fracture of each hand which has caused, or is expected to cause, significant functional limitation and restriction beyond 26 weeks.
16.	12	Fracture of each clavicle or each scapula which has caused, or is expected to cause, significant functional limitation and restriction beyond 26 weeks.
17.	12	Fracture of the skull with sub-dural or extra-dural haematoma which has required evacuation, from which the claimant has made, or is expected to make, a substantial functional recovery within 26 weeks.
18.	12	Fracture or dislocation or both of thumb of each hand which has caused, or is expected to cause, significant functional limitation and restriction beyond 26 weeks.
19.	12	Fracture or dislocation or both of one hip, elbow, wrist, ankle or shoulder which has

(* The tariff values for fractures refer to closed fractures. Where the fracture is open the award shall be increased by £1,000.

(* An award for an injury in this table includes compensation for any expected consequential osteoarthritis.

(* Any references to duration of effects in column (b) are from date of injury or onset of illness.

(* Awards for injuries in this table include compensation for any associated psychological effects short of a distinct diagnosable disorder.

Status: Point in time view as at 30/06/2006.

Changes to legislation: There are currently no known outstanding effects for the The Armed Forces and Reserve Forces (Compensation Scheme) Order 2005, SCHEDULE 4. (See end of Document for details)

		caused, or is expected to cause, significant functional limitation and restriction at 26 weeks with recovery thereafter.
20.	12	Fracture or dislocation or both of index finger on each hand which has caused, or is expected to cause, significant functional limitation and restriction beyond 26 weeks.
21.	12	Fracture or dislocation or both of great toe on one foot which has caused, or is expected to cause, significant functional limitation and restriction beyond 26 weeks.
22.	12	Fractured tarsal bones on one foot which have caused, or are expected to cause, significant functional limitation and restriction beyond 26 weeks.
23.	12	Fractured heel of one foot which has caused, or is expected to cause, significant functional limitation and restriction beyond 26 weeks.
24.	12	Fractured heel of each foot from which the claimant has made, or is expected to make, a substantial recovery within 26 weeks.
25.	12	Dislocated patella on each knee which has caused, or is expected to cause, significant functional limitation and restriction beyond 26 weeks.
26.	12	Fractured metatarsal bones on each foot which have caused, or are expected to cause, significant functional limitation and restriction beyond 26 weeks.

(*) The tariff values for fractures refer to closed fractures. Where the fracture is open the award shall be increased by £1,000.

(*) An award for an injury in this table includes compensation for any expected consequential osteoarthritis.

(*) Any references to duration of effects in column (b) are from date of injury or onset of illness.

(*) Awards for injuries in this table include compensation for any associated psychological effects short of a distinct diagnosable disorder.

Status: Point in time view as at 30/06/2006.

Changes to legislation: There are currently no known outstanding effects for the The Armed Forces and Reserve Forces (Compensation Scheme) Order 2005, SCHEDULE 4. (See end of Document for details)

27.	12	Fractures of both femurs, both ulnae, both tibiae, both humeri or both radii from which the claimant has made, or is expected to make a substantial recovery within 26 weeks.
28.	13	Fractured tarsal or metatarsal bones on each foot from which the claimant has made, or is expected to make, a substantial recovery within 26 weeks.
29.	13	Fractured metatarsal bones on one foot which have caused, or are expected to cause, significant functional limitation and restriction beyond 26 weeks.
30.	13	Fracture or dislocation or both of great toe of each foot from which the claimant has made or is expected to make a substantial functional recovery within 26 weeks.
31.	13	Fracture of one femur, ulna, tibia, humerus or radius from which the claimant has made, or is expected to make a substantial recovery within 26 weeks.
32.	13	Fracture of skull with sub-dural or extra-dural haematoma which has not required evacuation.
33.	13	Fracture of ethmoid which has required or is expected to require operative treatment.
34.	13	Fracture of zygoma which has caused, or is expected to cause, significant functional limitation and restriction beyond 26 weeks.
35.	13	Fracture or dislocation or both of one hip, ankle, shoulder,

(*) The tariff values for fractures refer to closed fractures. Where the fracture is open the award shall be increased by £1,000.

(*) An award for an injury in this table includes compensation for any expected consequential osteoarthritis.

(*) Any references to duration of effects in column (b) are from date of injury or onset of illness.

(*) Awards for injuries in this table include compensation for any associated psychological effects short of a distinct diagnosable disorder.

Status: Point in time view as at 30/06/2006.

Changes to legislation: There are currently no known outstanding effects for the The Armed Forces and Reserve Forces (Compensation Scheme) Order 2005, SCHEDULE 4. (See end of Document for details)

		elbow or wrist from which the claimant has made or is expected to make a substantial recovery within 26 weeks.
36.	13	Fracture of one hand which has caused, or is expected to cause, significant functional limitation and restriction beyond 26 weeks.
37.	13	Fractured heel of one foot, from which the claimant has made, or is expected to make a substantial recovery within 26 weeks.
38.	13	Fracture of each hand from which the claimant has made, or is expected to make a substantial recovery within 26 weeks.
39.	13	Blow-out fracture of orbit which has required, or is expected to require, operative treatment.
40.	13	Dislocated jaw which has caused, or is expected to cause, significant functional limitation and restriction beyond 26 weeks.
41.	13	Fracture of scapula or clavicle which has caused, or is expected to cause, significant functional limitation and restriction beyond 26 weeks.
42.	13	Fracture of each clavicle or each scapula from which the claimant has made, or is expected to make, a substantial recovery within 26 weeks.
43.	13	Fracture of pelvis from which the claimant has made, or is expected to make, a substantial recovery within 26 weeks.

(*) The tariff values for fractures refer to closed fractures. Where the fracture is open the award shall be increased by £1,000.

(*) An award for an injury in this table includes compensation for any expected consequential osteoarthritis.

(*) Any references to duration of effects in column (b) are from date of injury or onset of illness.

(*) Awards for injuries in this table include compensation for any associated psychological effects short of a distinct diagnosable disorder.

Status: Point in time view as at 30/06/2006.

Changes to legislation: There are currently no known outstanding effects for the The Armed Forces and Reserve Forces (Compensation Scheme) Order 2005, SCHEDULE 4. (See end of Document for details)

44.	13	Fracture of sternum which has, or is expected to have, symptoms continuing beyond 26 weeks.
45.	13	Fractures or dislocations or both of two or more toes, other than great, of each foot which have caused, or are expected to cause, significant functional limitation and restriction beyond 26 weeks.
46.	13	Fracture or dislocation or both of thumb on one hand which has caused, or is expected to cause, significant functional limitation and restriction beyond 26 weeks.
47.	13	Fracture or dislocation or both of thumb of each hand which has caused, or is expected to cause, significant functional limitation and restriction at 13 weeks from which the claimant has made, or is expected to make a substantial recovery within 26 weeks.
48.	13	Fracture or dislocation or both of index finger on each hand, which have caused, or are expected to cause, significant functional limitation and restriction at 13 weeks, from which the claimant has made, or is expected to make, a substantial recovery within 26 weeks.
49.	13	Fractures or dislocations or both of two or more fingers, other than index, on each hand, which have caused, or are expected to cause, significant functional limitation and restriction beyond 26 weeks.

(*) The tariff values for fractures refer to closed fractures. Where the fracture is open the award shall be increased by £1,000.

(*) An award for an injury in this table includes compensation for any expected consequential osteoarthritis.

(*) Any references to duration of effects in column (b) are from date of injury or onset of illness.

(*) Awards for injuries in this table include compensation for any associated psychological effects short of a distinct diagnosable disorder.

Status: Point in time view as at 30/06/2006.

Changes to legislation: There are currently no known outstanding effects for the The Armed Forces and Reserve Forces (Compensation Scheme) Order 2005, SCHEDULE 4. (See end of Document for details)

50.	13	Fracture or dislocation or both of index finger on one hand which has caused, or is expected to cause, significant functional limitation and restriction beyond 26 weeks.
51.	13	Dislocated patella of one knee which has caused, or is expected to cause significant functional limitation beyond 26 weeks.
52.	14	Dislocated jaw from which the claimant has made, or is expected to make, a substantial recovery within 26 weeks.
53.	14	Fractured zygoma from which the claimant has made, or is expected to make a substantial recovery within 26 weeks.
54.	14	Fractured ethmoid which has not, or is not expected to require operative treatment.
55.	14	Fracture of mandible or maxilla from which the claimant has made, or is expected to make a substantial recovery within 26 weeks.
56.	14	Fracture of hand from which the claimant has made, or is expected to make a substantial recovery within 26 weeks.
57.	14	Deviated nasal septum requiring corrective surgery.
58.	14	Displaced fracture of nasal bones.
59.	14	Simple skull fracture with no brain injury.
60.	14	Fractured fibula which has caused, or is expected to cause, significant functional limitation and restriction beyond 26 weeks.

(*) The tariff values for fractures refer to closed fractures. Where the fracture is open the award shall be increased by £1,000.

(*) An award for an injury in this table includes compensation for any expected consequential osteoarthritis.

(*) Any references to duration of effects in column (b) are from date of injury or onset of illness.

(*) Awards for injuries in this table include compensation for any associated psychological effects short of a distinct diagnosable disorder.

61.	14	Fracture or dislocation or both of thumb on one hand which has caused, or is expected to cause, significant functional limitation and restriction at 13 weeks, from which the claimant has made, or is expected to make, a substantial recovery within 26 weeks.
62.	14	Fracture or dislocation or both of index finger, on one hand, which has caused, or is expected to cause, significant functional limitation and restriction at 13 weeks, from which the claimant has made, or is expected to make, a substantial recovery within 26 weeks.
63.	14	Fracture or dislocation or both of one finger, other than index, on each hand, which has caused, or is expected to cause, significant functional limitation and restriction beyond 26 weeks.
64.	14	Fractures or dislocations or both of two or more fingers, other than index, on one hand, which have caused, or are expected to cause significant functional limitation and restriction beyond 26 weeks.
65.	14	Fractures or dislocations or both of two or more fingers, other than index, on each hand which have caused, or are expected to cause, significant functional limitation and restriction beyond 13 weeks from which the claimant has made, or is expected to make, a substantial recovery within 26 weeks.

(*) The tariff values for fractures refer to closed fractures. Where the fracture is open the award shall be increased by £1,000.

(*) An award for an injury in this table includes compensation for any expected consequential osteoarthritis.

(*) Any references to duration of effects in column (b) are from date of injury or onset of illness.

(*) Awards for injuries in this table include compensation for any associated psychological effects short of a distinct diagnosable disorder.

Status: Point in time view as at 30/06/2006.

Changes to legislation: There are currently no known outstanding effects for the The Armed Forces and Reserve Forces (Compensation Scheme) Order 2005, SCHEDULE 4. (See end of Document for details)

66.	14	Fractures or dislocations or both of two or more toes, other than great toe, on one foot, which have caused, or are expected to cause significant functional limitation and restriction beyond 26 weeks.
67.	14	Fractures or dislocations or both of one toe other than great toe, on each foot, which have caused, or are expected to cause significant functional limitation and restriction beyond 26 weeks.
68.	14	Fractures or dislocations or both of two or more toes, other than great toe, on each foot, from which the claimant has made, or is expected to make a substantial recovery within 26 weeks.
69.	14	Fracture or dislocation or both of great toe from which the claimant has made, or is expected to make a substantial recovery within 26 weeks.
70.	14	Fracture or dislocation or both of index finger on each hand, from which the claimant has made or is expected to make, a substantial recovery within 13 weeks.
71.	14	Fracture or dislocation or both of thumb on each hand, from which the claimant has made or is expected to make, a substantial recovery within 13 weeks.
72.	14	Dislocated acromio-clavicular joint from which the claimant has made, or is expected to make, a substantial recovery within 26 weeks.

(*) The tariff values for fractures refer to closed fractures. Where the fracture is open the award shall be increased by £1,000.

(*) An award for an injury in this table includes compensation for any expected consequential osteoarthritis.

(*) Any references to duration of effects in column (b) are from date of injury or onset of illness.

(*) Awards for injuries in this table include compensation for any associated psychological effects short of a distinct diagnosable disorder.

Status: Point in time view as at 30/06/2006.

Changes to legislation: There are currently no known outstanding effects for the The Armed Forces and Reserve Forces (Compensation Scheme) Order 2005, SCHEDULE 4. (See end of Document for details)

73.	14	Fracture of coccyx from which the claimant has made, or is expected to make, a substantial recovery within 26 weeks.
74.	14	Fracture of clavicle or scapula from which the claimant has made, or is expected to make a substantial recovery within 26 weeks.
75.	14	Fracture of sternum from which the claimant has made, or is expected to make a substantial recovery within 26 weeks.
76.	14	Fractured tarsal or metatarsal bones on one foot which have caused, or are expected to cause significant functional limitation and restriction at 13 weeks from which the claimant has made, or is expected to make a substantial recovery within 26 weeks.
77.	14	Dislocated patella of each knee which has caused, or is expected to cause, significant functional limitation and restriction at 6 weeks, from which the claimant has made, or is expected to make a substantial recovery within 26 weeks.
78.	15	Fracture of mastoid.
79.	15	Undisplaced fracture of nasal bones.
80.	15	Deviated nasal septum which has not required or is not expected to require operative treatment.
81.	15	Dislocated patella of one knee which has caused, or is expected to cause, significant functional limitation and

(*) The tariff values for fractures refer to closed fractures. Where the fracture is open the award shall be increased by £1,000.

(*) An award for an injury in this table includes compensation for any expected consequential osteoarthritis.

(*) Any references to duration of effects in column (b) are from date of injury or onset of illness.

(*) Awards for injuries in this table include compensation for any associated psychological effects short of a distinct diagnosable disorder.

Status: Point in time view as at 30/06/2006.

Changes to legislation: There are currently no known outstanding effects for the The Armed Forces and Reserve Forces (Compensation Scheme) Order 2005, SCHEDULE 4. (See end of Document for details)

		restriction at 6 weeks, from which the claimant has made, or is expected to make, a substantial recovery within 26 weeks.
82.	15	Fracture of three or more ribs.
83.	15	Fractures or dislocations or both of two or more toes, on one foot, which have caused, or are expected to cause significant functional limitation and restriction at 13 weeks from which the claimant has made, or is expected to make a substantial recovery within 26 weeks.
84.	15	Fractures or dislocations of one toe, other than great toe, on each foot, which have caused, or are expected to cause significant functional limitation and restriction at 13 weeks from which the claimant has made, or is expected to make a substantial recovery within 26 weeks.
85	15	Fracture or dislocation or both of thumb from which the claimant has made, or is expected to make, a substantial recovery within 13 weeks.
86.	15	Fractured tarsal or metatarsal bone on one foot, which has caused or is expected to cause significant functional limitation and restriction at 6 weeks, from which the claimant has made, or is expected to make, a substantial recovery within 13 weeks.
87.	15	Stress fracture where symptoms have lasted, or are expected to last, for more than 6 weeks, where the claimant

(*) The tariff values for fractures refer to closed fractures. Where the fracture is open the award shall be increased by £1,000.

(*) An award for an injury in this table includes compensation for any expected consequential osteoarthritis.

(*) Any references to duration of effects in column (b) are from date of injury or onset of illness.

(*) Awards for injuries in this table include compensation for any associated psychological effects short of a distinct diagnosable disorder.

Status: Point in time view as at 30/06/2006.

Changes to legislation: There are currently no known outstanding effects for the The Armed Forces and Reserve Forces (Compensation Scheme) Order 2005, SCHEDULE 4. (See end of Document for details)

		has made, or is expected to make, a substantial recovery within 13 weeks.
88.	15	Fracture or dislocation or both of two or more fingers, other than index, on one hand which has caused, or is expected to cause, significant functional limitation and restriction at 13 weeks, from which the claimant has made, or is expected to make, a substantial recovery within 26 weeks.
89.	15	Fracture or dislocation or both of two or more fingers, other than index, on each hand, from which the claimant has made, or is expected to make, a substantial recovery within 13 weeks.
90.	15	Fracture or dislocation or both of one finger, other than index, on each hand, which has caused, or is expected to cause, significant functional limitation and restriction at 13 weeks from which the claimant has made, or is expected to make, a substantial recovery within 26 weeks.
91.	15	Fracture or dislocation or both of index finger on one hand, from which the claimant has made, or is expected to make, a substantial recovery within 13 weeks.
92.	15	Fracture or dislocation or both of one finger, other than index, on one hand, which has caused or is expected to cause significant functional limitation and restriction beyond 26 weeks.

(*) The tariff values for fractures refer to closed fractures. Where the fracture is open the award shall be increased by £1,000.

(*) An award for an injury in this table includes compensation for any expected consequential osteoarthritis.

(*) Any references to duration of effects in column (b) are from date of injury or onset of illness.

(*) Awards for injuries in this table include compensation for any associated psychological effects short of a distinct diagnosable disorder.

Status: Point in time view as at 30/06/2006.

Changes to legislation: There are currently no known outstanding effects for the The Armed Forces and Reserve Forces (Compensation Scheme) Order 2005, SCHEDULE 4. (See end of Document for details)

93.	15	Fractured fibula from which the claimant has made, or is expected to make, a substantial recovery within 26 weeks.
94.	15	Fractured patella of one knee.

(* The tariff values for fractures refer to closed fractures. Where the fracture is open the award shall be increased by £1,000.

(* An award for an injury in this table includes compensation for any expected consequential osteoarthritis.

(* Any references to duration of effects in column (b) are from date of injury or onset of illness.

(* Awards for injuries in this table include compensation for any associated psychological effects short of a distinct diagnosable disorder.

Table 9 – Muscoskeletal disorders(*)

<i>Item</i>	<i>Column (a) Level</i>	<i>Column (b) Injury</i>
1.	10	Permanent severely impaired grip in both hands.
2.	10	Ligament injury which has resulted in rupture, affecting both knees, ankles, shoulders or elbows, causing permanent significant functional limitation and restriction.
3.	11	Ligament injury which has resulted in rupture, affecting one knee, ankle, shoulder or elbow, causing permanent significant functional limitation and restriction.
4.	11	Ligament injury which has resulted in rupture, affecting both knees, both ankles, both shoulders or both elbows, which has caused, or is expected to cause significant functional limitation and restriction at 26 weeks, from which the claimant is expected to make a substantial recovery beyond that date.
5.	11	Traumatic back injury (with medically verified neurological signs and vertebral damage)

(* Award for an injury in this table includes any expected consequential osteoarthritis.

(* Any references to duration of effects in column (b) are from date of injury or onset of illness.

(* References to back in this table include cervical, thoracic, lumbar or sacral segments.

(* Awards for injuries in this table include compensation for any associated psychological effects short of a distinct diagnosable disorder.

Status: Point in time view as at 30/06/2006.

Changes to legislation: There are currently no known outstanding effects for the The Armed Forces and Reserve Forces (Compensation Scheme) Order 2005, SCHEDULE 4. (See end of Document for details)

		extending over several levels of vertebrae, which has required, or is expected to require operative treatment and which has caused, or is expected to cause, significant functional limitation and restriction beyond 26 weeks.
6.	11	Radiologically confirmed juxta-articular aseptic necrosis of hip or shoulder.
7.	11	Ligament injury short of rupture, to both knees, ankles, shoulders or elbows, causing permanent significant functional limitation and restriction.
8.	12	Two frozen shoulders which have caused, or are expected to cause, significant functional limitation and restriction beyond 26 weeks.
9.	12	Ligament injury short of rupture, to both knees, ankles, shoulders or elbows, which has caused, or is expected to cause, significant functional limitation and restriction at 26 weeks, from which the claimant has made or is expected to make a substantial recovery beyond that date.
10.	12	Ligament injury short of rupture, to one knee, ankle, shoulder or elbow, causing permanent significant functional limitation and restriction.
11.	12	Ligament injury which has resulted in rupture, affecting one knee, ankle, shoulder or elbow, which has caused, or is expected to cause, significant functional limitation at

(*) Award for an injury in this table includes any expected consequential osteoarthritis.

(*) Any references to duration of effects in column (b) are from date of injury or onset of illness.

(*) References to back in this table include cervical, thoracic, lumbar or sacral segments.

(*) Awards for injuries in this table include compensation for any associated psychological effects short of a distinct diagnosable disorder.

Status: Point in time view as at 30/06/2006.

Changes to legislation: There are currently no known outstanding effects for the The Armed Forces and Reserve Forces (Compensation Scheme) Order 2005, SCHEDULE 4. (See end of Document for details)

		26 weeks, from which the claimant has made, or is expected to make a substantial recovery beyond that date.
12.	12	Full thickness muscle or tendon unit rupture which has caused, or is expected to cause, significant functional limitation and restriction beyond 26 weeks.
13.	12	Traumatic back injury including prolapsed intervertebral discs (with medically verified neurological signs and vertebral damage), which has caused, or is expected to cause, significant functional limitation and restriction beyond 26 weeks.
14.	12	Radiologically confirmed osteoarthritis of both knees, hips, ankles, shoulders or elbows (caused by a repetitive or attrition injury), causing permanent significant functional limitation and restriction.
15.	12	Permanent severely impaired grip in one hand.
16.	13	Frozen shoulder, which has caused, or is expected to cause, continuing significant functional limitation and restriction beyond 26 weeks.
17.	13	Two frozen shoulders, which have caused or are expected to cause significant functional limitation at 6 weeks from which the claimant has made, or is expected to make, a substantial recovery within 26 weeks.
18.	13	Ligament injury short of rupture, to both knees, ankles,

(*) Award for an injury in this table includes any expected consequential osteoarthritis.

(*) Any references to duration of effects in column (b) are from date of injury or onset of illness.

(*) References to back in this table include cervical, thoracic, lumbar or sacral segments.

(*) Awards for injuries in this table include compensation for any associated psychological effects short of a distinct diagnosable disorder.

Status: Point in time view as at 30/06/2006.

Changes to legislation: There are currently no known outstanding effects for the The Armed Forces and Reserve Forces (Compensation Scheme) Order 2005, SCHEDULE 4. (See end of Document for details)

		shoulders or elbows from which the claimant has made, or is expected to make, a substantial recovery within 26 weeks.
19.	13	Muscle or tendon unit injury short of full thickness rupture, which has caused, or is expected to cause, significant functional limitation and restriction beyond 26 weeks.
20.	13	Two muscle or tendon unit injuries, short of full thickness rupture, from which the claimant has made, or is expected to make, a substantial recovery within 26 weeks.
21.	13	Full thickness muscle or tendon unit rupture from which the claimant has made, or is expected to make a substantial recovery within 26 weeks.
22.	13	Ligament injury short of rupture, to one knee, shoulder, ankle or elbow which has caused, or is expected to cause, significant functional limitation and restriction at 26 weeks with substantial recovery beyond that date.
23.	13	Back sprain or strain, with either more than one inter-vertebral disc prolapse, or more than one vertebral fracture, which has caused, or is expected to cause, significant functional limitation and restriction beyond 26 weeks.
24.	13	Radiologically confirmed osteoarthritis of knee, hip, ankle, shoulder or elbow (caused by repetitive and attrition injury) causing

(*) Award for an injury in this table includes any expected consequential osteoarthritis.

(*) Any references to duration of effects in column (b) are from date of injury or onset of illness.

(*) References to back in this table include cervical, thoracic, lumbar or sacral segments.

(*) Awards for injuries in this table include compensation for any associated psychological effects short of a distinct diagnosable disorder.

Status: Point in time view as at 30/06/2006.

Changes to legislation: There are currently no known outstanding effects for the The Armed Forces and Reserve Forces (Compensation Scheme) Order 2005, SCHEDULE 4. (See end of Document for details)

		permanent significant functional limitation and restriction.
25.	13	Compartment syndrome which has lasted, or is expected to last, beyond 6 weeks and which has required, or is expected to require, operative treatment.
26.	14	Frozen shoulder which has caused, or is expected to cause, significant functional limitation at 6 weeks from which the claimant has made, or is expected to make a substantial recovery within 26 weeks.
27.	14	Ligament injury short of rupture to one knee, ankle, shoulder or elbow, which has caused or is expected to cause, significant functional limitation and restriction at 13 weeks, from which the claimant has made, or is expected to make, a substantial recovery within 26 weeks.
28.	14	Muscle or tendon unit injury short of full thickness rupture from which the claimant has made, or is expected to make, a substantial recovery within 26 weeks.
29.	14	Knee meniscus injury, or other knee pathology, which has required, or is expected to require, operative management.
30.	14	Tendon rupture of finger or thumb which has required, or is expected to require, operative reconstruction.
31.	14	Back sprain or strain, with one prolapsed disc or vertebral

(*) Award for an injury in this table includes any expected consequential osteoarthritis.

(*) Any references to duration of effects in column (b) are from date of injury or onset of illness.

(*) References to back in this table include cervical, thoracic, lumbar or sacral segments.

(*) Awards for injuries in this table include compensation for any associated psychological effects short of a distinct diagnosable disorder.

Status: Point in time view as at 30/06/2006.

Changes to legislation: There are currently no known outstanding effects for the The Armed Forces and Reserve Forces (Compensation Scheme) Order 2005, SCHEDULE 4. (See end of Document for details)

		fracture, which has caused, or is expected to cause significant functional limitation and restriction at 13 weeks, from which the claimant has made, or is expected to make a substantial recovery within 2 years.
32.	14	Low back or neck pain syndrome.
33.	14	Anterior knee pain syndrome in both knees which has caused, or is expected to cause significant functional restriction and limitation at 6 weeks, from which the claimant has made, or is expected to make, a substantial recovery within 26 weeks.
34.	15	Knee meniscus injury which has caused, or is expected to cause, significant functional limitation and restriction at 6 weeks, from which the claimant has made, or is expected to make, a substantial recovery within 26 weeks.
35.	15	Anterior knee pain syndrome in one knee which has caused, or is expected to cause, significant functional restriction and limitation at 6 weeks, from which the claimant has made, or is expected to make, a substantial recovery within 26 weeks.
36.	15	Direct hernia which has required operative treatment.
37.	15	Frozen shoulder which has caused, or is expected to cause, significant functional limitation at 6 weeks from which the claimant has made, or is expected to make, a

(*) Award for an injury in this table includes any expected consequential osteoarthritis.

(*) Any references to duration of effects in column (b) are from date of injury or onset of illness.

(*) References to back in this table include cervical, thoracic, lumbar or sacral segments.

(*) Awards for injuries in this table include compensation for any associated psychological effects short of a distinct diagnosable disorder.

Status: Point in time view as at 30/06/2006.

Changes to legislation: There are currently no known outstanding effects for the The Armed Forces and Reserve Forces (Compensation Scheme) Order 2005, SCHEDULE 4. (See end of Document for details)

38.	15	<p>substantial recovery within 13 weeks.</p> <p>Ligament injury, short of rupture, to one knee, ankle, shoulder or elbow, which has caused, or is expected to cause, significant functional limitation and restriction at 6 weeks, from which the claimant has made, or is expected to make, a substantial recovery within 13 weeks.</p>
-----	----	--

(*) Award for an injury in this table includes any expected consequential osteoarthritis.

(*) Any references to duration of effects in column (b) are from date of injury or onset of illness.

(*) References to back in this table include cervical, thoracic, lumbar or sacral segments.

(*) Awards for injuries in this table include compensation for any associated psychological effects short of a distinct diagnosable disorder.

Table 10

<i>Column (a)</i> <i>Level</i>	<i>Column (b)</i> <i>Injury</i>
1	£285,000
2	£201,250
3	£115,000
4	£86,250
5	£57,500
6	£46,000
7	£34,500
8	£28,750
9	£22,000
10	£16,500
11	£11,000
12	£8,250
13	£5,250
14	£2,625
15	£1,050

Status:

Point in time view as at 30/06/2006.

Changes to legislation:

There are currently no known outstanding effects for the The Armed Forces and Reserve Forces (Compensation Scheme) Order 2005, SCHEDULE 4.