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Table 3

### Severity of injury

#### Introduction

These risk assessment guidelines distinguish between four levels of injury severity. It is important to realise that severity should be assessed completely objectively. The aim is to compare the severity of different scenarios and to set priorities, not to judge the acceptability of a single injury at this stage. Any injury that could easily have been avoided will be difficult to accept for a consumer. However, authorities can justifiably invest more effort into avoiding irreversible consequences than into preventing temporary discomfort.

In order to assess the severity of the consequences (acute injury or other damage to health), objective criteria can be found, on the one hand, in the level of medical intervention, and, on the other hand, in the consequences to the further functioning of the victim. Both could be expressed as cost, but the costs of consequences of health damage may be difficult to quantify.

Combining these criteria, the four levels may be defined as follows:

1. Injury or consequence that after basic treatment (first aid, normally not by a doctor) does not substantially hamper functioning or cause excessive pain; usually the consequences are completely reversible.
2. Injury or consequence for which a visit to A&E may be necessary, but in general, hospitalisation is not required. Functioning may be affected for a limited period, not more than about 6 months, and recovery is more or less complete.
3. Injury or consequence that normally requires hospitalisation and will affect functioning for more than 6 months or lead to a permanent loss of function.
4. Injury or consequence that is or could be fatal, including brain death; consequences that affect reproduction or offspring; severe loss of limbs and/or function, leading to more than approximately 10 % of disability.

The following table, which should be considered as a guide rather than prescriptive or complete, provides examples of injuries at all four levels. National differences may exist, either cultural or caused by different systems of health care and financial arrangements. However, deviating from the proposed classification in the table will affect uniform assessment of risks in the EU; this should be clearly stated and explained in the risk assessment report, and reasons should be given.

Type of injury	Severity of injury			
	1	2	3	4
Laceration, cut	Superficial	External (deep) (> 10 cm long on body) (> 5 cm long on face) requiring stitches Tendon or into joint White of eye or cornea	Optic nerve Neck artery Trachea Internal organs	Bronchial tube Oesophagus Aorta Spinal cord (low) Deep laceration of internal organs Severed high spinal cord Brain (severe lesion/dysfunction)
Bruising (abrasion/contusion, swelling, oedema)	Superficial ≤25 cm <sup>2</sup> on face ≤50 cm <sup>2</sup> on body	Major > 25 cm <sup>2</sup> on face > 50 cm <sup>2</sup> on body	Trachea Internal organs (minor) Heart Brain Lung, with blood or air in chest	Brain stem Spinal cord causing paralysis
Concussion	—	Very short unconsciousness (minutes)	Prolonged unconsciousness	Coma
Entrapment/pinching	Minor pinching	—	(Use as appropriate the final outcomes of bruising, crushing, fracture, dislocation, amputation, as applicable.)	(Same outcome as for suffocation/strangulation.)
Sprain, strain, musculoskeletal disorder	Extremities Joints Spine (no dislocation or fracture)	Knee ligaments strain	Ligament or tendon rupture/tear Muscle tear Whiplash	—
Dislocation	—	Extremities (finger, toe, hand, foot) Elbow Jaw Loosening of tooth	Ankle Wrist Shoulder Hip Knee Spine	Spinal column
Fracture	—	Extremities (finger, toe, hand, foot) Wrist Arm Rib Sternum Nose Tooth Jaw Bones around eye	Ankle Leg (femur and lower leg) Hip Thigh Skull Spine (minor compression fracture) Jaw (severe) Larynx Multiple rib fractures Blood or air in chest	Neck Spinal column

Type of injury	Severity of injury			
	1	2	3	4
Crushing	—	—	Extremities (fingers, toe, hand, foot) Elbow Ankle Wrist Forearm Leg Shoulder Trachea Larynx Pelvis	Spinal cord Mid-low neck Chest (massive crushing) Brain stem
Amputation	—	—	Finger(s) Toe(s) Hand Foot (Part of) Arm Leg Eye	Both extremities
Piercing, puncturing	Limited depth, only skin involved	Deeper than skin Abdominal wall (no organ involvement)	Eye Internal organs Chest wall	Aorta Heart Bronchial tube Deep injuries in organs (liver, kidney, bowel, etc.)
Ingestion	—	—	Internal organ injury (Refer also to internal airway obstruction where the ingested object gets stuck high in the oesophagus.)	Permanent damage to internal organ
Internal airway obstruction	—	—	Oxygen flow to brain blocked without permanent consequences	Oxygen flow to brain blocked with permanent consequences
Suffocation/ Strangulation	—	—	Oxygen flow to brain blocked without permanent consequences	Fatal suffocation/ strangulation
Submersion/ Drowning	—	—	—	Fatal drowning
Burn/Scald (by heat, cold, or chemical substance)	1°, up to 100 % of body surface 2°, < 6 % of body surface	2°, 6-15 % of body surface	2°, 16-35 % of body surface, or 3°, up to 35 % of body surface Inhalation burn	2° or 3°, > 35 % of body surface Inhalation burn requiring respiratory assistance
Electric shock	(See also under burns as electric current can cause burns.)	Local effects (temporary cramp or muscle paralysis)	—	Electrocution
Neurological disorders	—	—	Triggered epileptic seizure	—

Type of injury	Severity of injury			
	1	2	3	4
Eye injury, foreign body in eye	Temporary pain in eye without need for treatment	Temporary loss of sight	Partial loss of sight Permanent loss of sight (one eye)	Permanent loss of sight (both eyes)
Hearing injury, foreign body in ear	Temporary pain in ear without need for treatment	Temporary impairment of hearing	Partial loss of hearing Complete loss of hearing (one ear)	Complete loss of hearing (both ears)
Poisoning from substances (ingestion, inhalation, dermal)	Diarrhoea, vomiting, local symptoms	Reversible damage to internal organs, e.g. liver, kidney, slight haemolytic anaemia	Irreversible damage to internal organs, e.g. oesophagus, stomach, liver, kidney, haemolytic anaemia, reversible damage to nerve system	Irreversible damage to nerve system Fatality
Irritation, dermatitis, inflammation or corrosive effect of substances (inhalation, dermal)	Local slight irritation	Reversible eye damage Reversible systemic effects Inflammatory effects	Lungs, respiratory insufficiency, chemical pneumonia Irreversible systemic effects Partial loss of sight Corrosive effects	Lungs, requiring respiratory assistance Asphyxia
Allergic reaction or sensitisation	Mild or local allergic reaction	Allergic reaction, widespread allergic contact dermatitis	Strong sensitisation, provoking allergies to multiple substances	Anaphylactic reaction, shock Fatality
Long-term damage from contact with substances or from exposure to radiation	Diarrhoea, vomiting, local symptoms	Reversible damage to internal organs, e.g. liver, kidney, slight haemolytic anaemia	Damage to nervous system, e.g. Organic Psycho Syndrome (OPS; also called Chronic Toxic Encephalopathy, also known as 'painters' disease'). Irreversible damage to internal organs, e.g. oesophagus, stomach, liver, kidney, haemolytic anaemia, reversible damage to nervous system	Cancer (leukaemia) Effects on reproduction Effects on offspring CNS depression
Microbiological infection		Reversible damage	Irreversible effects	Infection requiring prolonged hospitalisation, antibiotics-resistant organisms Fatality