

**TABLE 6. NUMBER OF DISABLING CLAIMS BY PART OF BODY AND NATURE OF INJURY OR DISEASE,
OREGON, 1999**

PART OF BODY AFFECTED ¹	Total	NATURE OF INJURY OR DISEASE									
		DISLO- CATION	FRAC- TURE	SPRAIN, STRAIN, TEAR	AMPUTA- TION	CUT, LACERA- TION	BUISE, CONTU- SION	BURN	CARPAL TUNNEL SYND.	MUSCULO. DISEASE	ALL OTHER
TOTAL	25,802	1,016	2,511	12,888	268	1,403	1,591	379	876	1,205	3,665
HEAD	702	1	79	4	-	96	82	36	-	-	404
BRAIN	134	-	-	-	-	-	-	-	-	-	134
SCALP	32	-	-	-	-	20	8	-	-	-	4
SKULL	10	-	7	-	-	-	3	-	-	-	-
EAR(S)	73	-	-	-	-	4	-	2	-	-	67
EYE(S)	219	-	-	2	-	30	17	23	-	-	147
NOSE	37	-	32	-	-	-	4	-	-	-	1
MOUTH	16	-	11	-	-	3	-	-	-	-	2
MULTIPLE HEAD LOCATIONS	49	-	13	1	-	13	4	6	-	-	12
OTHER, UNS. HEAD LOCATIONS	134	1	17	2	-	26	46	5	-	-	37
NECK, INCLUDING THROAT	547	68	8	417	-	-	15	-	-	6	33
TRUNK	9,961	433	321	7,299	-	12	396	17	-	309	1,174
SHOULDER	1,710	98	56	1,166	-	3	57	2	-	243	85
CHEST, INCL. INTERNAL LOC.	378	2	121	86	-	2	112	5	-	5	45
BACK, INCLUDING SPINE	6,401	329	80	5,487	-	1	137	4	-	50	313
ABDOMEN, INCL. INTERNAL LOC.	223	-	-	71	-	1	5	-	-	-	146
PELVIC REGION	895	4	40	254	-	4	49	3	-	8	533
MULTIPLE TRUNK LOCATIONS	341	-	24	233	-	1	34	1	-	3	45
NEC, UNS. TRUNK LOCATIONS	13	-	-	2	-	-	2	2	-	-	7
UPPER EXTREMITIES	6,358	44	1,007	1,059	255	1,127	302	170	876	739	779
UPPER ARM(S)	134	1	21	86	-	1	5	-	-	13	7
ELBOW(S)	602	16	80	138	-	12	68	3	-	249	36
FOREARM(S)	221	-	51	42	1	28	24	17	-	32	26
WRIST(S)	1,826	5	187	402	-	36	39	2	876	212	67
HAND(S), EXCEPT FINGER(S)	786	-	103	64	4	213	93	81	-	31	197
FINGER(S), FINGERNAIL(S)	2,097	22	462	118	249	789	44	16	-	72	325
MULTIPLE UPPER EXT.	454	-	52	122	-	34	14	41	-	100	91
NEC, UNS. UPPER EXT.	238	-	51	87	1	14	15	10	-	30	30
LOWER EXTREMITIES	5,392	456	892	2,604	13	146	602	83	-	107	489
THIGH(S)	101	-	16	27	-	21	24	2	-	-	11
KNEE(S)	2,466	443	65	1,426	-	32	246	2	-	71	181
LOWER LEG(S)	285	-	93	57	3	39	45	9	-	1	38
ANKLE(S)	1,143	10	253	779	-	7	33	11	-	15	35
FOOT(FEET), EXCEPT TOE(S)	705	-	229	127	2	21	163	39	-	17	107
TOE(S), TOENAIL(S)	234	2	139	9	6	7	36	1	-	2	32
MULTIPLE LOWER EXTREMITIES	264	1	57	122	-	5	27	13	-	-	39
NEC, UNS. LOWER EXTREMITIES	194	-	40	57	2	14	28	6	-	1	46
BODY SYSTEMS	194	-	-	-	-	-	-	-	-	-	194
MULTIPLE BODY PARTS	2,636	14	204	1,505	-	22	194	73	-	43	581
PROSTHETIC DEVICES	2	-	-	-	-	-	-	-	-	-	2
NONCLASSIFIABLE	10	-	-	-	-	-	-	-	-	1	9

¹ CLAIMS ARE LISTED ACCORDING TO THE OCCUPATIONAL INJURY AND ILLNESS CLASSIFICATION SYSTEM (OIICS).

NOTE: NEC = NOT ELSEWHERE CLASSIFIED.

UNS = UNSPECIFIED. INFORMATION NOT AVAILABLE TO CLASSIFY AT A MORE DETAILED LEVEL.

- DASHES INDICATE NO CLAIMS WERE RECEIVED.

SOURCE: RESEARCH AND ANALYSIS SECTION, OREGON DEPARTMENT OF CONSUMER AND BUSINESS SERVICES.