## 5223.0420 PERIPHERAL NERVOUS SYSTEM; LOWER EXTREMITY-MOTOR LOSS.

- Subpart 1. **Total loss.** For permanent partial impairment to the peripheral nerves, plexuses, and nerve roots of the lower extremity resulting from nerve injury or disease, and if there is loss of motor function for those particular portions of the body served by the peripheral nerve, plexus, or nerve root, disability to the whole body is as provided in subparts 2 to 6.
- A. Total or complete motor loss in the lower extremity means that motor function is less than or equal to muscle strength grade 2/5.
- B. If injury to nerve, plexus, or nerve root results in sensory loss alone, the rating is as provided in part 5223.0430.
- C. If motor loss occurs together with sensory loss, the rating under this part may be combined as described in part 5223.0300, subpart 3, item E, with the rating under part 5223.0430.
- D. The ratings in this part include the rating of the impairment due to any restriction of range of motion or ankylosis of any joint of the affected member that is strictly the result of the nerve lesion and no further rating for those losses shall be combined with ratings under this part.
- Subp. 2. **Peripheral nerve.** There is total or complete motor loss of the peripheral nerve, and signs or symptoms of organic disease or injury are present, and there is anatomic loss or alteration:

## A femoral:

- (1) entire motor distribution involved, 17 percent;
- (2) iliacus spared, 14 percent;
- B. obturator nerve:
  - (1) entire motor distribution, four percent;
  - (2) only adductor magnus involved, zero percent;
- C. inferior gluteal, six percent;
- D. superior gluteal, eight percent;
- E. sciatic, entire motor distribution involved, 30 percent;
- F. common peroneal, 14 percent;
- G. deep peroneal:
  - (1) entire motor distribution involved, ten percent;

- (2) only the peroneus tertius and extensor digitorum brevis involved, two percent;
  - H. superficial peroneal, four percent;
  - I. tibial nerve:
    - (1) entire motor distribution involved, 14 percent;
    - (2) gastrocnemius innervation spared, eight percent;
    - (3) gastrocnemius and soleus innervation spared, six percent;
    - (4) lateral plantar branch, two percent;
    - (5) medial plantar branch, two percent.
- Subp. 3. **Lumbosacral plexus.** There is total or complete motor loss of the lumbosacral plexus, and signs or symptoms of organic disease or injury are present, and there is anatomic loss or alteration: entire lumbosacral plexus, unilateral, 50 percent.
- Subp. 4. **Nerve root.** There is total or complete motor loss of the nerve root, and signs or symptoms of organic disease or injury are present, and there is anatomic loss or alteration:
  - A. L3 nerve root, eight percent;
  - B. L4 nerve root, 14 percent;
  - C. L5 nerve root, 15 percent;
  - D. S1 nerve root, 12 percent.
- Subp. 5. **Incomplete loss.** Incomplete loss means that motor function is less than normal but at least antigravity. Motor function is measured in the specific muscles innervated by the injured nerve, plexus, or nerve root, and muscle strength is graded as follows:
- A. 5/5: majority of the tested muscles able to sustain contraction against expected resistance;
- B. 4/5: majority of the tested muscles unable to sustain contraction against expected resistance but able to sustain contraction against some applied resistance;
- C. 3/5: majority of the tested muscles unable to sustain contraction against any applied resistance but able to move part through full range of motion against gravity;
- D. 2/5: majority of the tested muscles able to move part through full range of motion with gravity eliminated.

The rating for incomplete loss is made on the muscle strength grade of the majority of the affected muscles:

- (1) muscle strength grade 5/5, zero percent;
- (2) muscle strength grade 4/5, 25 percent of rating assigned in subpart 2, 3, or 4;
- (3) muscle strength grade 3/5, 50 percent of rating assigned in subpart 2, 3, or 4;
- (4) muscle strength grade 2/5 or less, 100 percent of rating assigned in subpart 2, 3, or 4.
- Subp. 6. Reflex sympathetic dystrophy, causalgia, and cognate conditions. This subpart applies to dates of injury from July 1, 1993, through August 8, 2010. For dates of injury on or after August 9, 2010, rate complex regional pain syndrome, reflex sympathetic dystrophy, causalgia, and cognate conditions as provided under part 5223.0435. For purposes of rating under this part, reflex sympathetic dystrophy, causalgia, and cognate conditions are deemed to occur in a member if at least five of the following conditions persist concurrently in that member: edema, local skin color change of red or purple, osteoporosis in underlying bony structures demonstrated by radiograph, local dyshidrosis, local abnormality of skin temperature regulation, reduced passive range of motion in contiguous or contained joints, local alteration of skin texture of smooth or shiny, or typical findings of reflex sympathetic dystrophy on bone scan.

If reflex sympathetic dystrophy is present and persistent despite treatment, the permanent partial disability, rating from the most proximal joint of the involved member, is:

- A. mild: meets the requirements of this subpart, 25 percent of the rating for the appropriate category in part 5223.0550;
- B. moderate: meets the requirements of this subpart and the individual can ambulate only with assistive devices or special shoes, 50 percent of the rating for the appropriate category in part 5223.0550;
- C. severe: meets the requirements of this subpart and the individual is unable to weight-bear to effectively perform most of the activities of daily living, 75 percent of the rating for the appropriate category in part 5223.0550.

**Statutory Authority:** MS s 176.105

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