5223.0590 GASTROINTESTINAL TRACT.

- Subpart 1. **General.** This part provides the percentage of disability of the whole body for permanent partial impairment of the gastrointestinal tract. For evaluative purposes, the gastrointestinal tract has been divided into:
- A. the upper digestive tract including the esophagus, stomach, duodenum, small intestine, and pancreas;
 - B. the colon and rectum;
 - C. the anus;
 - D. the liver;
 - E. the biliary tract;
 - F. enterocutaneous fistulas.

The ratings determined under subparts 2 to 7 may be combined as described in part 5223.0300, subpart 3, item E.

- Subp. 2. **Upper digestive tract.** Esophagus, stomach, duodenum, small intestine, and pancreas.
- A. Class 1, two percent. Signs or symptoms of organic upper digestive tract disorder are present; there is anatomic loss or alteration, but treatment is not required; and weight can be maintained at the desirable level, as defined in part 5223.0310, subpart 20, by oral diet.
- B. Class 2, 15 percent. Signs or symptoms of organic upper digestive tract disorder are present; there is anatomic loss or alteration; treatment with dietary restriction and drugs is required for control of symptoms, signs, or nutritional deficiency; and there is loss of weight below the desirable weight which does not exceed ten percent on oral diet.

C. Class 3, 35 percent:

- (1) signs or symptoms of organic upper digestive tract disorder are present; there is anatomic loss or alteration; treatment with dietary restrictions and drugs does not completely control symptoms, signs, or nutritional state; and there is loss of weight below the desirable weight which is greater than ten percent but does not exceed 20 percent on oral diet; or
- (2) signs or symptoms of organic upper digestive tract disorder are present; there is anatomic loss or alteration; intravenous hyperalimentation is required for therapy; and weight loss does not exceed 20 percent of the desirable weight.
- D. Class 4, 65 percent. Signs or symptoms of organic upper digestive tract disorder are present; there is anatomic loss or alteration; continuous treatment with dietary

restrictions and drugs does not completely control symptoms, signs, or nutritional state; and there is loss of weight below the desirable weight which is greater than 20 percent regardless of whether on oral diet or intravenous hyperalimentation.

- E. Surgical removal or alteration of all or part of the esophagus, stomach, duodenum, small intestine, or pancreas, not otherwise ratable under this subpart or subpart 7 or part 5223.0620, zero percent.
- Subp. 3. Colon and rectum. Fiber supplements are not to be considered a special diet or a restriction of diet.
- A. Class 1, two percent. Signs or symptoms of organic colonic or rectal disorder are infrequent; limitation of activities, special diet, or medication is not required; no systemic manifestations are present; and weight can be maintained at the desirable level, as defined in part 5223.0310, subpart 20.
- B. Class 2, 15 percent. Signs or symptoms of organic colonic or rectal disorder are frequent; there is anatomic loss or alteration; there is intermittent disturbance of bowel function, accompanied by periodic or continual pain; no continuous restriction of diet or symptomatic therapy is necessary; and weight can be maintained at desirable weight.
- C. Class 3, 30 percent. Signs or symptoms of organic colonic or rectal disorder are very frequent; there is anatomic loss or alteration; there are moderate to severe exacerbations of disturbance of bowel function, accompanied by periodic or continual pain; treatment with restriction of activity, special diet, and drugs is required during episodes of symptoms; and there is loss of weight below the desirable weight or anemia due to blood loss.
- D. Class 4, 50 percent. Signs or symptoms of organic colonic and rectal disorder are continuous; there is anatomic loss or alteration; there are persistent disturbances of bowel function with severe persistent pain; treatment with complete limitation of activity, restriction of diet, and medication is required and does not entirely control the symptoms; and there is loss of weight below the desirable weight or anemia due to blood loss.
- E. Surgical removal or alteration of all or part of the colon and rectum, not otherwise ratable under this subpart or subpart 7, zero percent.

Subp. 4. Anus.

A. Class 1, two percent:

- (1) signs of organic anal disorder are present and there is anatomic loss or alteration, or there is an objectively demonstrated neurological lesion known to interfere with anal function and there is mild incontinence involving gas or liquid stool;
- (2) signs of organic anal disorder are present, and there is anatomic loss or alteration, and anal symptoms are mild, intermittent, and controlled by treatment.

B. Class 2, 12 percent:

- (1) signs of organic anal disorder are present and there is anatomic loss or alteration, or there is an objectively demonstrated neurological lesion known to interfere with anal function, and moderate but partial fecal incontinence is present, and treatment is required;
- (2) signs of organic anal disorder are present, there is anatomic loss or alteration, and continual anal symptoms are present and incompletely controlled by treatment

C. Class 3, 22 percent:

- (1) signs of organic anal disorder are present and there is anatomic loss or alteration, or there is an objectively demonstrated neurological lesion known to interfere with anal function and complete fecal incontinence is present in spite of continuous treatment;
- (2) signs of organic anal disorder are present, there is anatomic loss or alteration, and continued anal symptoms are present and completely unresponsive or not amenable to therapy.

Subp. 5. Liver.

A. Class 1, five percent:

- (1) there is objective evidence of persistent liver disorder even though no symptoms of liver disorder are present; there is no history of ascites, jaundice, or bleeding esophageal varices within five years; weight can be maintained at the desirable level, as defined in part 5223.0310, subpart 20; and biochemical studies, that is, SGOT or SGPT, are less than four times the upper limit of normal;
 - (2) primary disorders of bilirubin metabolism are present.
- B. Class 2, 20 percent. There is objective evidence of persistent liver disorder even though no symptoms of liver disease are present; there is no history of ascites, jaundice, or bleeding esophageal varices within five years; weight can be maintained at the desirable level; and biochemical studies, that is, SGOT or SGPT, are more than four times the upper limit of normal.
- C. Class 3, 40 percent. There is objective evidence of persistent liver disorder; there is a history of jaundice, ascites, or bleeding esophageal or gastric varices within the past year; and there are intermittent symptoms of portosystemic encephalopathy.
- D. Class 4, 75 percent. There is objective evidence of persistent liver disorder; there is persistent ascites, jaundice, or bleeding esophageal or gastric varices; there are

central nervous system manifestations of hepatic insufficiency; and there is loss of lean body weight below the desirable weight which is greater than ten percent.

E. Surgical removal or alteration of part of the liver, not otherwise ratable under this subpart or subpart 7, zero percent.

Subp. 6. Biliary tract.

- A. Class 1, five percent. There are less than four episodes in a 12-month period of biliary tract dysfunction.
- B. Class 2, 20 percent. There are more than four episodes in a 12-month period of biliary tract dysfunction, and symptoms are unresponsive or unamenable to treatment.
- C. Class 3, 40 percent. There is irreparable persisting obstruction of the bile tract with recurrent cholangitis.
- D. Class 4, 75 percent. There is persistent jaundice and liver disorder due to obstruction of the common bile duct, and the liver disease is as described in subpart 5, item D.
- E. Surgical removal or alteration of all or part of the biliary tract or gallbladder, not otherwise ratable under this subpart or subpart 7, zero percent.

Subp. 7. Enterocutaneous fistulas.

- A. Esophagostomy, as defined in part 5223.0310, subpart 24, ten percent.
- B. Gastrostomy, as defined in part 5223.0310, subpart 31, ten percent.
- C. Jejunostomy, as defined in part 5223.0310, subpart 34, 15 percent.
- D. Ileostomy, as defined in part 5223.0310, subpart 33, 15 percent.
- E. Colostomy, as defined in part 5223.0310, subpart 15, five percent.

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