

## THE ELBOW AND FOREARM—Continued

	Rating	
	Dominant	Nondominant
The hand fixed in full pronation (at 80 degrees of pronation) .....	30	20
The hand fixed at 40 to 45 degrees of pronation .....	20	20
(2) Limitation of pronation:		
Pronation limited to 40 degrees .....	30	20
Pronation limited to 60 degrees .....	20	20
(3) Limitation of supination: Supination limited to 30 degrees .....	10	10
<b>Note:</b> Evaluations for forearm and wrist injuries, diagnostic codes 5205 through 5213, will be combined with separate evaluations for limitation of motion of the fingers, subject to the provisions of § 4.68.		

## THE WRIST

	Rating	
	Dominant	Nondominant
5214 Ankylosis of the wrist:		
Unfavorable, meaning fixed in any degree of palmar flexion, or with ulnar or radial deviation .....	50	40
Intermediate, meaning fixed in any position other than that for favorable or unfavorable .....	40	30
Favorable, meaning fixed in 20 degrees to 30 degrees dorsiflexion, without ulnar or radial deviation .....	30	20
5215 Limitation of motion of wrist:		
Dorsiflexion limited to 14 degrees, or palmar flexion limited to zero degrees (no palmar flexion possible) ...	10	10
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5231 Fracture of phalanx of finger or thumb:		
Evaluate based on residuals, such as limitation of motion or ankylosis of digit under the appropriate code(s), and combine with an evaluation for pain under § 4.59 when appropriate.		
5232 Fracture of carpal or metacarpal bone:		
Evaluate based on residuals under the appropriate code(s), such as limitation of motion or ankylosis of wrist, and combine with an evaluation for pain under § 4.59 when appropriate.		
5233 Fracture of phalanx of toe:		
Evaluate based on residuals under the appropriate code(s), such as limitation of motion or ankylosis of toe (for example, using criteria for diagnostic codes 5278 through 5283), and combine with an evaluation for pain under § 4.59 when appropriate.		

## THE HIP AND THIGH

	Rating
5250 Ankylosis of hip:	
Unfavorable ankylosis, meaning fixed in more than 60 degrees of flexion so that the foot cannot reach the ground, and crutches are required for ambulation .....	190
Intermediate ankylosis, meaning fixed in 40 to 60 degrees of flexion, and assistive devices may be needed .....	70
Favorable ankylosis, meaning fixed in 20 degrees to 39 degrees of flexion, in slight adduction or abduction, and assistive devices are not required .....	60
5251 Limitation of extension of hip (normal full extension is zero degrees):	
If there is limitation of extension of the affected hip that is at least 10 degrees more than the limitation of extension of the non-affected hip, and there is a positive Thomas test (test for flexion contracture of hip) .....	10
5252 Limitation of flexion of hip:	
Flexion limited to 10 degrees .....	40
Flexion limited to 20 degrees .....	30
Flexion limited to 30 degrees .....	20
Flexion limited to 45 degrees .....	10
5253 Limitation of abduction, adduction, or rotation of hip:	
Abduction limited to 10 degrees .....	20
Adduction limited, so that cannot cross legs; or rotation limited, so that cannot toe-out more than 15 degrees .....	10
5254 Resection arthroplasty of hip (removal of femoral head and neck without replacement by a prosthesis) .....	80
5255 Residuals of fracture of femur:	
Fracture of the femoral neck, intertrochanteric area, or shaft with symptomatic malunion or symptomatic non-union .....	60
Fracture of the femoral neck, intertrochanteric area, or shaft with asymptomatic non-union; or fracture of the femoral head or subcapital area with excision of 25% or more of the weightbearing portion .....	40
Fracture of the femoral shaft with symptomatic malunion and either more than 10 degrees of angulation in the varus-valgus plane or more than 15 degrees of angulation in the anterior-posterior plane .....	30
<b>Note (1):</b> Evaluate fracture of the femoral head or subcapital area with excision of less than 25% of the weightbearing portion as aseptic necrosis of the femoral head, diagnostic code 5265.	
<b>Note (2):</b> Malunion of an intertrochanteric fracture is indicated by a varus deformity, shortening, or rotation.	

<sup>1</sup> Review for entitlement of special monthly compensation. Refer to § 3.350 for specific instructions regarding claims involving loss or loss of use of limbs.