

3.6.3.20 Guidelines to Table 2 - Upper Limb Function

Summary

Table 2 is used to assess functional impairment when performing activities requiring the use of hands or arms.

The diagnosis of the condition must be made by an appropriately qualified medical practitioner. This includes a general practitioner or medical specialists such as a rheumatologist or rehabilitation physician.

Table 2 specifies that the upper limbs extend from the shoulder to the fingers.

If the person has and usually uses an upper limb prosthesis, the assessment under Table 2 must be undertaken considering what the person can do or has difficulty doing while using this prosthesis.

If a person has an amputation of an upper limb and does not use a prosthesis, consideration must be given to what the person can do or has difficulty doing with their remaining limb. In some cases the person may have made adaptations in using their remaining limb and may be able to undertake activities with minimal difficulties.

Act reference: [Social Security \(Tables for the Assessment of Work-related Impairment for Disability Support Pension\) Determination 2011](#) Table 2 - Upper Limb Function

Determining the level of functional impact

When determining which impairment rating applies to a person the rating that best describes the person's abilities or difficulties must be applied. The descriptors for 5, 10 and 20 points state that most of the points must apply to the person.

Where the descriptor refers to most of the following, most is taken to be more than half.

The 20 point rating in Table 2 uses the term 'assistance' in descriptor (1) (e) 'the person has severe difficulty turning the pages of a book without assistance'. 'Assistance' means assistance from another person, rather than any aids or equipment the person has and usually uses (see [3.6.3.05](#) (E) Use of aids, equipment & assistive technology).

Determination of the descriptor that best fits the person's impairment level must be based on the available medical evidence including the person's medical history, investigation results and clinical findings. A person's self-reported symptoms must not solely be relied on. It would be inappropriate to apply an impairment rating based solely on a person's self-reported functional history if this level of functional impairment is not consistent with the medical evidence available.

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The descriptors are to be considered in relation to impairment to either hands or arms. The person may have one hand or one arm affected or both hands or both arms. In either circumstance, the descriptors are based on the activities the person can do or has difficulty doing. An activity listed under a descriptor is not taken as being able to be performed if it can only be done once or rarely, it needs to be able to be undertaken repetitively.

Several of the points within the descriptors specify that either both hands or both arms need to be affected in order to satisfy the point. The descriptor for 20 points (1)(a) specifies that the person has limited movement or coordination in both arms or both hands. Also, the 30 points descriptor states the person is unable to perform any activities requiring the use of both hands or both arms.

To satisfy the 30 point descriptor the person would have incapacity in the use of either:

- both of their hands, or
- both of their arms.

See [example 2](#) below.

For bilateral conditions where both upper limbs are affected, a single impairment rating under Table 2 should be determined based on the resulting combined functional impairment.

To avoid double-counting (see [3.6.3.05 \(F\)](#) Selecting the applicable Table & assessing impairments), upper limb impairment resulting from a spinal condition, which restricts overhead tasks, should be rated under Table 4 - Spinal Function only. Restrictions on overhead tasks which result from conditions of the shoulder should be rated under Table 2 only.

In determining the functional impact on activities using hands or arms, consideration should be given to the impact of pain on the person's ability to undertake these activities. For example, a person may have difficulty using their hands or arms on a repetitive basis due to the chronic pain they experience on doing so. This chronic pain could be either a symptom of a permanent condition impacting upper limbs or a permanent condition itself.

When assessing chronic pain under Table 2, refer to [3.6.3.05 \(B\)](#) Assessing functional impact of pain.

Act reference: [Social Security \(Tables for the Assessment of Work-related Impairment for Disability Support Pension\) Determination 2011](#) Table 4 - Spinal Function, Table 2 - Upper Limb Function

Some conditions causing impairment commonly assessed using Table 2

These include but are not limited to:

- upper limb musculoskeletal conditions including specific degenerative joint disease (osteoarthritis),
- other permanent forms of arthritis or chronic rotator cuff lesions,

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- neurological conditions including cerebrovascular accident (CVA or stroke) or other brain or nerve injury causing paralysis or loss of strength or sensation,
- cerebral palsy or other condition affecting upper limb coordination ,
- inflammation or injury of the muscles or tendons of the upper limbs,
- upper limb amputations or absence of whole or part of upper limb,
- chronic carpal tunnel syndrome,
- ulnar nerve palsies.

Example 1: *A 54 year old man has been diagnosed with arthritis in the elbow of each arm and in his right hand. He finds it difficult to pick up heavy objects due to pain in these areas. He also has some difficulty holding small objects and doing up buttons with his right hand, as he has lost some dexterity in his fingers. He is still able to complete his personal care routine, such as dressing without assistance and can undertake most household tasks (with the exception of heavy tasks like moving furniture).*

The condition is considered fully diagnosed, treated and stabilised and under Table 2, the man would receive an impairment rating of 5 points due to the mild impact on his ability to function. Under the 5 point descriptor the man would meet (1)(a), (b) and (c).

Example 2: *A 35 year old woman has been diagnosed with cerebral palsy, which affects her upper limb function. This condition has a significant impact on the functioning of both hands and as a result she is unable to undertake any activities with either of her hands.*

The condition is considered fully diagnosed, treated and stabilised and under Table 2, the woman would receive an impairment rating of 30 points due the extreme impact on her ability to function. Under the 30 point descriptor the woman would meet (1).

Example 3: *A 40 year old man has undergone an amputation of one of his arms. He does not use a prosthesis. Since the amputation he has adapted to the way he uses his remaining arm and is able to undertake many daily activities involving upper limb function. He has adapted to type on a computer keyboard with his remaining hand and can use a pencil to write. He has difficulty picking up bulky objects and cannot pick up heavier objects such as a 1 litre carton of liquid. He has difficulty with tasks like tying shoelaces and unscrewing lids and needs assistance with these tasks.*

The condition is considered fully diagnosed, treated and stabilised and under Table 2, the man would receive an impairment rating of 10 points due to the moderate difficulties he still has, despite the adaptations he has made since undergoing the amputation of his arm. Under the 10 point descriptor the man would meet (1)(a), (b), (d) and (f).

Act reference: [Social Security \(Tables for the Assessment of Work-related Impairment for Disability Support Pension\) Determination 2011](#) Table 2 - Upper Limb Function

Impairments that should not be assessed using Table 2

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Difficulties handling and manipulating objects due to severe visual impairment should not be assessed under Table 2 if there are no inherent medical conditions affecting the upper limbs. Such impairment should be assessed under Table 12 - Visual Function.

Act reference: [Social Security \(Tables for the Assessment of Work-related Impairment for Disability Support Pension\) Determination 2011](#) Table 2 - Upper Limb Function, Table 12 - Visual Function