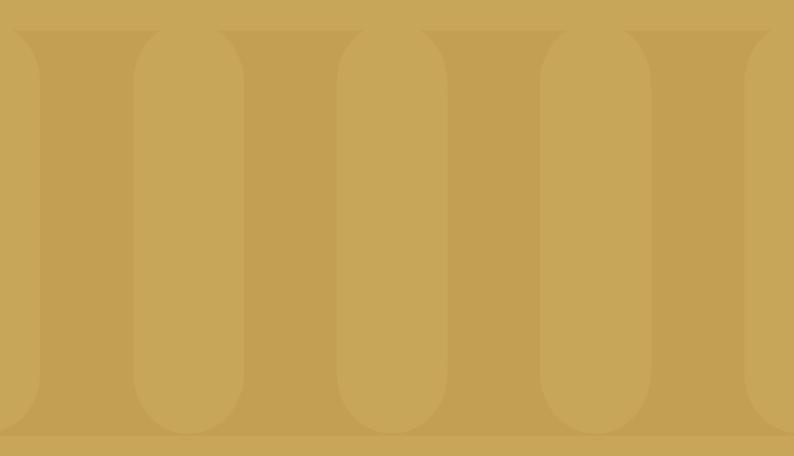
Comhairle na mBreithiúna The Judicial Council

PERSONAL INJURIES GUIDELINES



Adopted by The Judicial Council on the 6th of March 2021



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INTRODUCTION

The within Personal Injuries Guidelines ("the Guidelines") were adopted by the Judicial Council under s. 7 of the Judicial Council Act 2019 ("the 2019 Act") on the 6th day of March 2021. They follow from draft Guidelines prepared by the Personal Injuries Guidelines Committee ("the Committee"), established under s. 18 of the 2019 Act, which catalogued the level of damages which it considered might fairly and justly be awarded in respect of varying types of personal injury.

It is widely accepted that the making of an award of general damages for pain and suffering is a somewhat artificial task. It involves the judge seeking to convert the pain and suffering of a given claimant into a monetary award which he or she considers to be reasonable by way of compensation. That is a difficult task and one which has historically led to judges making widely varying awards of damages in respect of relatively comparable injuries, a result which not only offends the principle of equality before the law but results in unnecessary appeals and the incurring of additional costs, apart altogether from the burden that such appeals place on the Courts' own scarce resources.

These Guidelines seek to promote a better understanding of the principles governing the assessment and award of damages for personal injuries with a view to achieving greater consistency in awards notwithstanding that cases will invariably have their own unique features.

It is important to record that the Guidelines were prepared, as required, having regard to the matters set out in s. 90(3) of the 2019 Act, namely:

- (i) the level of damages awarded for personal injuries by courts in the State;
- (ii) the level of damages awarded for personal injuries by courts in such places outside the State as the Committee considered relevant;
- (iii) the principles for the assessment and award of damages for personal injuries as determined by the High Court, Court of Appeal and Supreme Court;
- (iv) guidelines relating to the classification of personal injuries;
- (v) the need to promote consistency in the level of damages awarded for personal injuries; and,
- (vi) the other factors referred to in the Report of the Committee forwarded to the Board with the draft Personal Injuries Guidelines on the 9th day of December 2020.

It is also relevant to note that s. 99 of the 2019 Act amends s. 22 of the Civil Liability and Courts Act 2004 so as to provide:

- "(1) The court shall, in assessing damages in a personal injuries action—
 - (a) have regard to the personal injuries guidelines (within the meaning of section 2 of the Judicial Council Act 2019), and

(b) where it departs from those guidelines, state the reasons for such departure in giving its decision."

Accordingly, whilst the Court retains its independence and discretion when it comes to making an award of general damages, it is mandatory for the Court to make its assessment having regard to the Guidelines subject always to the proviso that where it chooses to depart from the Guidelines it should detail, in its judgment, the considerations which warranted that departure.

What follows is a brief summary of how the Guidelines should be employed.

General principles

To the forefront to the mind of every trial judge when making an award of general damages should be the principles which underlie the Court's jurisdiction. Those principles require awards of damages to be fair and reasonable to both claimant and defendant. Awards must be proportionate to the injuries sustained and must also be proportionate when viewed in the context of awards of damages commonly made in cases involving injuries of a greater or lesser magnitude (*per* Denham J. in *M.N. v. S.M.* [2005] IESC 17 and Clarke C.J. in *Morrissey v. HSE* [2020] IESC 6). Important in this regard is the fact that in these Guidelines the most devastating and catastrophic of injuries will attract an award of general damages of in or about €550,000.

Use of Guidelines

At the conclusion of every case the trial judge should ask each party to identify, by reference to the dominant injury sustained, the relevant damages bracket in the Guidelines which most closely matches that supported by the evidence. Brief submissions should also be made as to where, within the relevant bracket of damages, the claimant's injuries should be located in terms of severity i.e. top, middle or bottom, having regard to the evidence, the presence or absence of other lesser injuries and all relevant considerations.

Having considered the evidence in a careful and sensitive manner the trial judge should reach his or her findings of fact concerning the claimant's injury and should then proceed to consider how, in light of those findings and the submissions made, the Guidelines should impact on the Court's award. The obligation on the part of the trial judge to have regard to the Guidelines is mandatory as is his or her obligation, should he or she consider that the justice of the case warrants an award above the level of damages proposed for that or a similar injury in the Guidelines, to state his or her reasons for so departing.

Multiple injuries

The assessment of general damages in cases involving multiple injuries gives rise to special difficulty given that in these Guidelines each injury is valued separately. The principal difficulty stems from the fact that there will usually be a temporal overlap in the injuries sustained such that if each injury was to be valued separately the claimant would be overcompensated to the

point that the award would be unjust to the defendant and disproportionate when compared with other awards commonly made for other greater or lesser injuries. Each injury will, of course, cause additional pain and suffering which must be reflected in the award, but the question is how to ensure that the award will be just in light of the overlap of the injuries.

In a case of multiple injuries, the appropriate approach for the trial judge is, where possible, to identify the injury and the bracket of damages within the Guidelines that best resembles the most significant of the claimant's injuries. The trial judge should then value that injury and thereafter uplift the value to ensure that the claimant is fairly and justly compensated for all of the additional pain, discomfort and limitations arising from their lesser injury/injuries. It is of the utmost importance that the overall award of damages made in a case involving multiple injuries should be proportionate and just when considered in light of the severity of other injuries which attract an equivalent award under the Guidelines.

Pre-existing condition

If a claimant has a pre-existing condition that is aggravated by an injury for which the court is assessing compensation, it should have regard <u>only</u> to the extent to which the condition had been made worse and the duration of any increased symptomology.

Injuries which do not fall within identified categories within the Guidelines

It is conceivable that courts will encounter claims in respect of injuries which are not included in these Guidelines. This is due to the methodology adopted by the Committee which was to draw up the Guidelines based on data assembled from awards of damages made for particular types of injuries in this and other comparable jurisdictions. Where there was either no data or insufficient data in respect of a particular type of injury it was considered inadvisable to depart from the agreed methodology to propose brackets of damages for such injuries. For this reason, the Guidelines do not include many rarely encountered injuries such as the loss of an ovary, the severance of a nerve or artery or female genital mutilation, to name but a few. In any such case the structure established by the Guidelines may nonetheless provide assistance. A court when dealing with a novel or infrequent injury should seek to value the injury by reference to the damages guided for equally significant injuries in the Guidelines to ensure that the award made will be fair, just and proportionate within the scheme of damages therein provided for. Finally, all awards of damages made in respect of injuries not specifically covered by these Guidelines will bear upon the review of the Guidelines which is required to take place within three years of their adoption by the Council.

1. INJURIES RESULTING IN FORESHORTENED LIFE EXPECTANCY

In this jurisdiction, where a cause of action survives for the benefit of the estate of a deceased person, the damages recoverable for the benefit of that estate are not to include damages for loss or diminution of expectation of life or happiness.

Accordingly, this Chapter applies only to cases where the injured party remains alive and commences a claim for those injuries including their loss of expectation of life.

Cases falling within this category will include those relating to undiagnosed cancers or terminal illnesses contracted through workplace negligence (e.g. asbestosis). Apart from compensation in respect of loss of life, compensation must be awarded for the pain and suffering referable to the injury itself.

Considerations affecting the level of the award:

- (i) Age;
- (ii) Reduction in normal life expectancy;
- (iii) Nature, extent and duration of treatment, e.g. surgery, chemotherapy, radiation or other medication;
- (iv) Impact on work;1
- (v) Interference with quality of life including social, familial and other relationships;
- (vi) Psychological sequelae including depression.

1 Where the phrase "impact on work" appears in these Guidelines it does not include such damages for loss of job opportunity/loss of earning capacity which may be recoverable in accordance with established legal principles.

At the top of the range will be those who will experience significant pain and suffering as a result of the injury and consequential treatment, live with the anticipated loss of children and partner, and will have a substantially foreshortened life expectancy. A trauma such as severe burns with lung damage causing excruciating pain for a significant period would attract a high award.

At the bottom range will be the person who has no insight into their loss, will endure little by way of pain and suffering or where the loss of life will be minimal.

Each case will call for a careful assessment by the court of all the Up to €550,000 circumstances to arrive at a fair and just award.

2. INJURIES INVOLVING PARALYSIS

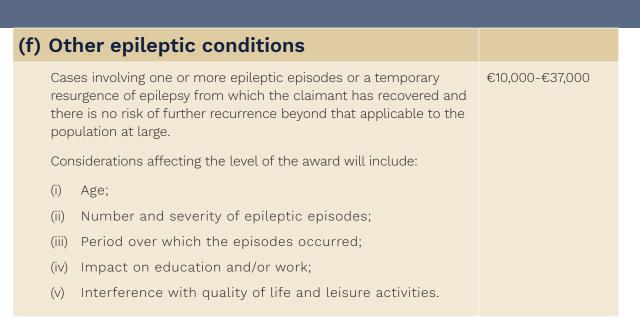
(a)	-	adriplegia siderations affecting the level of the award:	€400,000-€550,000
	(i)	Age;	
	(ii)	Life expectancy;	
	(iii)	Extent of residual movement;	
	(i∨)	Pain;	
	(v)	Effect on other senses;	
	(vi)	Psychological sequelae including depression;	
	(vii)	Effect on familial and other relationships.	
(b)	Par	aplegia	€320,000-€450,000
	Con	siderations affecting the level of the award:	
	(i)	Age;	
	(ii)	Extent of residual movement;	
	(iii)	Pain;	
	(i∨)	Effect on other senses;	
	(v)	Psychological sequelae including depression;	
	(vi)	Effect on familial and other relationships;	
	(vii)	Level of independence.	

3. HEAD INJURIES

		at a success la sette al successo	
(a)	IVI O	st severe brain damage	
	In the most severe cases the claimant will be in a vegetative state; there may be recovery of eye opening and some return of sleep and waking rhythm and postural reflex movements; no evidence of meaningful response to environment. Unable to obey commands; no language functions and need for 24-hour nursing care.		Up to €550,000
	Con	siderations affecting the level of the award will include:	
	(i)	Age;	
	(ii)	Life expectancy;	
	(iii)	Insight – low or complete loss of insight or awareness will diminish general damages;	
	(i∨)	Extent of physical limitations.	
	0		
(b)	Sev	vere brain damage	
	cons invo	ere disability. Conscious, but total dependency and requiring stant care. Disabilities in most cases will be cognitive and lve marked impairment of intellect and personality, but may include physical disabilities, e.g. limb paralysis.	€300,000-€400,000
	Con	siderations affecting the level of the award will include:	
	(i)	Age;	
	(ii)	Life expectancy;	
	(iii)	Insight – low or complete loss of insight will diminish general damages;	
	(i∨)	Extent of physical limitations;	
	(v)	Psychological sequelae including depression;	
	(vi)	Presence and severity of consequential epilepsy.	

(c)	Sei	rious and moderate brain damage	
	(i)	Moderate to severe intellectual deficit where the claimant will not be totally dependent but will require constant care. Disabilities may include personality change, effect on sight, speech and senses and epilepsy or risk of epilepsy.	€200,000-€350,000
	(ii)	Modest to moderate intellectual deficit. Claimant will not be totally dependent or require constant care. Will retain some independence, the ability to work is greatly reduced if not lost, there may be some modest physical symptoms and a risk of epilepsy.	€120,000-€220,000
	(iii)	A good recovery will have been made. The claimant will be able to participate in normal social life and return to some form of work, but restoration of all normal function is not implicit. There may still be persistent defects such as poor concentration and memory or disinhibition of mood which may interfere with lifestyle, leisure activity, relationships and future work prospects. Cases involving one or two discrete epileptic episodes or a temporary resurgence of epilepsy, but there is no risk of further recurrence beyond that applicable to the population at large, fall into this category.	€60,000-€140,000
	(i∨)	Brain damage similar to (iii) above but where the claimant is able to return to a level of work materially similar or the same to that which he/she was able to carry out prior to the injury.	€25,000-€60,000
	Cons	siderations affecting the level of the award will include:	
	(i)	Age;	
	(ii)	Extent and severity of initial injury;	
	(iii)	Duration of symptoms;	
	(i∨)	Extent and nature of treatment and/or medication;	
	(v)	Extent of any continuing and possibly permanent disability;	
	(vi)	Extent of any personality change;	
		Impact upon education and/or work;	
	(viii)	Interference with quality of life and leisure activities;	
	(ix)	Impact on familial and other relationships.	

(d) Mi	nor brain damage or head injury	
	In t	nese cases, the brain damage, if any, will have been minimal.	
	Cor	siderations affecting the level of the award will be:	
	•	Severity of initial injury;	
	•	Period taken to recover from any symptoms;	
	•	The extent of any continuing symptoms such as headaches or dizziness.	
	(i)	Where a substantial recovery takes place in two to five years	€12,000-€25,000
	(ii)	Where a substantial recovery takes place in one to two years	€6,000-€12,000
	(iii)	Where a substantial recovery takes place in six months to one year	€3,000-€6,000
	(i∨)	Substantial recovery within six months.	€500-€3,000
(e) Es	tablished epilepsy	
	This	includes both Grand mal and Petit mal.	
	Cor	siderations affecting the level of the award will include:	
	(i)	Age;	
	(ii)	Existence of other associated behavioural problems;	
	(iii)	Whether attacks are successfully controlled by medication;	
	(i∨)	Impact on education and/or work;	
	(v)	Interference with quality of life and leisure activities;	
	(vi)	Impact on familial and other relationships;	
	(vii)	Extent to which quality of life may be blunted by medication.	
		Grand mal:	€120,000-€180,000
		Petit mal:	€70,000-€140,000



4. PSYCHIATRIC DAMAGE

It is important for judges in all courts to remember that not all damage warrants an award of compensation. In the absence of physical injury, recovery is permitted only in respect of recognisable psychiatric injury (see: *Kelly v. Hennessy* [1995] 3 I.R. 253). For example, upset, distress, grief, disappointment and humiliation, do not attract compensation (see for example: *Knowles v. Minister for Defence* [2002] IEHC 39, *O'Connor v. Lenihan* [2005] IEHC 176, *Hegarty v. Mercy University Hospital* [2011] IEHC 435).

Grief, if experienced by a dependent, may attract an award of damages under Part IV of the Civil Liability Act 1961.

Considerations affecting the level of the award will include:

- (i) Age;
- (ii) Interference with quality of life and education;
- (iii) Impact on work;
- (iv) Impact on interpersonal relationships;
- (v) Whether medical assistance has been sought;
- (vi) Nature, extent and duration of treatment undertaken and/or medication prescribed;
- (vii) Likely success of treatment;
- (viii) Prognosis, to include any future vulnerability;
- (ix) The extent and/or nature of any associated physical injuries.

A. Psychiatric damage generally

(a) Severe psychiatric damage

In these cases, the injured person will have marked problems with respect to factors 4(ii) and (iii) above and the prognosis will be very poor. €170,000

(b) Serious psychiatric damage

In these cases there will be significant problems associated with factors 4(ii) and (iii) above but the prognosis will be more optimistic than in 4A(a) above. €40,000-€80,000

(c) Moderate psychiatric damage

While there may have been problems of the sort associated €15,000-€40,000 with factors 4(ii) and (iii) above, there will have been marked improvement by the date of the trial and the prognosis will be good.

(d)	Minor psychiatric damage	
	A full recovery will have been achieved.	€500-€15,000
	Considerations affecting the level of the award should include those listed above. In cases where only modest or no intervention was required in terms of treatment, damages should be very much to the lower end of the bracket.	
	Other considerations affecting the level of award will include:	
	(i) Duration of injury;	
	(ii) Impact of the injury on daily activities;	
	(iii) Extent of any treatment undertaken;	
	(iv) Whether sleep was affected and if so to what extent.	
в.	Post-Traumatic Stress Disorder (PTSD)	
a sp eve exp dist slee hyp	tes within this category are confined to those in which there is becific diagnosis of a reactive psychiatric disorder following an nt which creates psychological trauma in response to either eriencing or witnessing a terrifying event. Symptoms may include tressing memories of the traumatic event, nightmares, flashbacks, ep disturbance, avoidance, mood disorder, suicidal ideation and erarousal. Symptoms of hyperarousal can affect basic functions h as breathing, pulse rate, and bowel and/or bladder control.	
(a)	Severe PTSD	
	Such cases will involve permanent effects which prevent the injured party from working at all or at least from functioning at anything approaching pre-trauma level. All aspects of the life will be badly affected.	€60,000-€120,000
(b)	Serious PTSD	
	This category is distinct from (a) above because of a prognosis projecting some recovery with professional help. However, the effects are still likely to cause significant disability for the foreseeable future.	€35,000- €80,000
(c)	Moderate PTSD	
	In these cases, the injured person will have largely recovered, and any continuing effects will not be grossly disabling.	€10,000-€35,000
	Minor PTSD	
(a)		
(a)	In these cases, the symptoms will have resolved within 2 years.	€500-€10,000

5. INJURIES AFFECTING THE SENSES

Loss of or damage to senses may be restricted to one particular sense e.g. injury to the eye or olfactory system. Sometimes more than one of the senses may be affected, and the injury sustained in the context of other injuries. In the latter case, damages should be awarded in accordance with the principles which apply to compensation for multiple injuries.

Considerations affecting the level of the award:

- (i) Age;
- (ii) Interference with quality of life and leisure activities;
- (iii) Impact on work;
- (iv) Effect on familial and other relationships;
- (v) Impact on independence;
- (vi) Cosmetic sequelae;
- (vii) Psychiatric sequelae.

A. Injuries affecting sight (a) Total blindness and deafness €400,000-€500,000 (b) Total blindness €270,000-€400,000 (c) Loss of sight in one eye/loss of one eye - with €120,000-€300,000 reduced vision in the remaining eye. €80,000-€120,000 (d) Loss of one eye/loss of sight in one eye (e) Serious but incomplete loss of vision in one eye €45,000-€70,000 Additional considerations affecting the level of the award will be: The extent to which the loss of vision may be rectified or (i) reduced by ophthalmic intervention of any sort; The presence of blurred or double vision and sensitivity to (ii) light. (f) Minor but permanent impairment of vision in one eye €15,000-€45,000 This bracket includes cases of double vision where double vision

is not constant and cases of sensitivity to bright light where the sensitivity does not require that dark glasses be worn on a constant basis.

(g)	This inclu sou was	For eye injuries bracket includes all cases of minor injuries to the eye uding those sustained as a result of direct trauma from any rce, but which have recovered by date of trial. Where the injury no more than transient, an award at the lower end of the eket is warranted.	€500-€15,000
в.	De	afness	
The loss		d "deafness" is used to embrace both total and partial hearing	
		on to those set forth at 5 above, considerations affecting the he award in respect of deafness will include:	
	(i)	Whether the injury is one which had an immediate effect allowing the claimant no opportunity to adapt or whether it occurred over a period of time, as in the case of deafness caused by noise exposure;	
	(ii)	Effect of injury on speech;	
	(iii)	Whether the injury affects balance;	
	(i∨)	Extent to which injury can be improved by technology or treatment;	
	(∨)	Whether the injury is accompanied by tinnitus and if so the severity of that condition.	
(a)	im The	al deafness and loss of speech or gross pairment of speech lower end of the bracket is appropriate if there is no or little ech deficit or tinnitus.	€200,000-€350,000
(b)	Tot	al deafness	€150,000-€220,000
(c)	The	al loss of hearing in one ear higher end of the bracket is appropriate in the presence of itus, dizziness, headaches or like sequelae.	€55,000-€80,000

(d) I	Partial hearing loss/tinnitus	
(Severe tinnitus and partial hearing loss, depending upon the severity of the hearing loss, 	€35,000-€55,000
(Moderate tinnitus and partial hearing loss, depending upon the severity of the hearing loss. 	€18,000-€35,000
((iii) Mild or occasional tinnitus with hearing loss, depending upon the severity of the hearing loss.	€500-€18,000
C. I	mpairment of taste and smell	
with k	of or interference with taste and/or smell are usually associated brain injury or infection in which case these injuries may be dealt within the guidelines for those injuries.	
The h	arly all cases of loss of smell there is some impairment of taste. igher end of the range will be appropriate in cases of total loss of with significant loss of taste.	
(a) ⁻	Total loss of smell and taste	€60,000-€80,000
[Significant loss of smell and taste Damages should diminish the greater the residual sense of smell and taste.	€40,000-€60,000
	Total loss of smell This injury will normally involve some loss of taste.	€30,000-€45,000
	Partial loss of smell Damages should diminish the greater the residual sense of smell.	€10,000-€25,000
t	Total loss of taste The higher range will be more suitable to a case of total loss of taste with damages diminishing the greater the residual sense of taste.	€20,000-€35,000
(f)	Partial loss of taste	€7,500-€20,000

6. INJURIES TO INTERNAL ORGANS

A. Chest injuries of traumatic origin

This is an especially difficult area because the vast majority of cases relate to industrial disease (see B below) as distinct from traumatic injury.

Considerations affecting the level of award for traumatic injury will include:

- (i) Age;
- (ii) Extent of any consequential scarring;
- (iii) Nature, severity and duration of interference with lung function;
- (iv) Nature, severity and duration of physical discomfort and residual symptomology, if any;
- (v) Extent, severity and duration of all or any treatment or medication;
- (vi) Impact on work;
- (vii) Interference with quality of life and leisure activities;
- (viii) Long term prognosis and effect on life expectancy.
- (a) The most serious injuries will include the total removal of one lung and/or serious heart damage with serious prolonged pain and suffering and permanent scarring, physical disability and reduction in life expectancy. Where loss of life expectancy will be significant, the injury is to be compensated in accordance with Chapter 1.
 (b) Traumatic injuries to chest, lung(s) and/or heart causing permanent damage, impairment of function, physical disability and possible modest reduction of life expectancy.
 (c) Damage to chest and lung(s) causing continuing disability. €30,000-€90,000
- (d) A relatively simple injury (such as a single penetrating wound) causing some permanent damage to tissue but with no significant long-term effect on lung function. €15,000-€30,000
- (e) Damage from smoke inhalation which is not serious enough to interfere permanently with lung function.

Where the sequelae are more serious and/or more long-term, the damages will fall to be assessed by reference to the damages at (c) above.

(f)	-	ies leading to collapsed lung from which a full and omplicated recovery is made within a relatively short period.	€1,000-€15,000
(g)	disa of ri be ii Long upp	tures of ribs or soft tissue injuries causing serious pain and bility of short duration. Relevant factors will be the number bs involved (on the assumption that no more than 3 ribs will nvolved), the degree and nature of the pain and discomfort. g-term or permanent pain will attract an award in excess of the er figure. At the lower end will be fractures which fully resolve in a number of months.	€1,000-€15,000
в.	Lu	ng disease	
seve risk Part Non	of th icula ethel	opriate level of award for lung disease should reflect the of the disease, its frequently worsening condition and/or the e development of secondary sequelae such as mesothelioma. r injuries may not fit neatly within the following categories. ess, the categories identified should provide meaningful as to the appropriate level of damages in any such case.	
Con	sider	ations affecting the award may include:	
	(i)	Age;	
	(ii)	Level of activity and previous state of health;	
	(iii)	Nature, severity and duration of injury and consequential symptoms;	
	(i∨)	Extent and effects of invasive investigations, radical surgery, chemotherapy and radiotherapy;	
	(v)	Whether the tumour has spread and whether other organs have become involved;	
	(vi)	Impact on work;	
	(vii)	Interference with quality of life and leisure activities;	
	(∨iii)	Impact on familial and other relationships;	
	(ix)	Anticipated extent of life loss and the concern for spouse and/or children following death.	
(a)	prok Whe	a young person with serious disability where there is a pability of progressive worsening leading to premature death. are loss of life expectancy will be significant, the injury is to be appensated in accordance with Chapter 1.	€150,000-€210,000

	(b) Lung Cancer (typically in an older person) causing severe pain and impairment both of function and of quality of life. Practitioners may find some of the factors set out in (c) below as useful in determining where within the bracket the injuries should be placed.		€100,000-€175,000
1	(c)	Lung disease causing emphysema, deterioration in lung function, impairment of breathing, prolonged and/or frequent coughing, sleep disturbance and/or restriction of physical activity.	€60,000-€120,000
	(d) Moderate to severe asbestosis with considerable impairment of function and quality of life. In this wide bracket, awards at the t end will likely apply where the condition will significantly impair mobility and quality of life, and respiratory disability will likely exceed 50%. In the mid-range, respiratory impairment will be 30 50% and at the lower end 10%-30%. Where loss of life expectance will be significant, the injury is to be compensated in accordance with Chapter 1.		€60,000-€120,000
	(e)	Minimal to mild asbestosis involving at most mild impairment of function and reduction in quality of life. Respiratory impairment will be expected to be in the range of 1%-10%.	€20,000-€60,000
	(f)	Pleural thickening with functional impairment. The award will be at the top end where there is a significant risk of subsequent developments adversely affecting the respiratory condition such as further pleural thickening, asbestosis, mesothelioma and lung cancer.	€40,000-€120,000
		Where the extent of the respiratory disability is considered to be within the 10%-30% range, the award should be at the lower end of the bracket. Between 30% and 50%, the award should be in the middle of the bracket and if above 50%, at the higher end.	
	(g)	Pleural plaques	€500-€2,000
	Ast	hma and other respiratory conditions	
	(h)	Severe and disabling asthma causing prolonged and regular coughing, sleep disturbance, severe impairment of physical activity and enjoyment of life.	€60,000-€120,000
	(i)	Chronic asthma causing breathing difficulties and the need to use an inhaler from time to time.	€30,000-€60,000
	(j)	Relatively mild asthma-like symptoms, often brought about as a result of exposure to harmful toxins. Included in this bracket are cases involving aggravation of a pre-existing constitutional asthma.	€12,500-€30,000

(k)	Disease causing breathing difficulties (short of disabling breathlessness) requiring fairly frequent use of an inhaler; where there is inability to tolerate a smoky environment; or where there is some effect on the claimant's work and social life.	€30,000-€60,000
(l)	Bronchitis and/or wheezing not causing serious symptoms with full or substantial recovery; little or no serious or permanent effect on working or social life.	€10,000-€20,000
(m)	Mild respiratory conditions, including mild bronchitis not requiring specialist intervention and resolving within twelve months.	€3,500-€7,500
C .	Digestive system	
orga	to be noted that the risk of associated damage to the reproductive ans is frequently encountered in cases of this nature and will require arate consideration.	
(a)	Traumatic injury causing serious damage with continuing pain or discomfort.	€45,000-€85,000
(b)	Serious non-penetrating injury causing long-term or permanent complications e.g. severe indigestion, aggravated by physical strain.	€20,000- €45,000
(c)	Penetrating stab wounds or industrial laceration.	€8,000-€20,000
(d)	Illness/damage resulting from non-traumatic injury e.g. food poisoning.	
	A marked distinction should be drawn between cases having a longstanding or permanent effect on quality of life and those in which the only continuing symptoms may be allergy to specific foods and the attendant risk of short-term illness.	
	Contributing factors may include:	
	• Disturbance of bowel function;	
	• Impact on sex life;	
	Enjoyment of food.	
	 Severe toxicosis causing serious acute pain, vomiting, diarrhoea and fever, requiring hospital admission for some days or weeks and some continuing incontinence, haemorrhoids and Irritable Bowel Syndrome, having a significant ongoing impact on work and enjoyment of life. 	€50,000-€100,000

	(ii) (iii)	Food poisoning causing moderate symptoms including vomiting, discomfort, stomach cramps, alteration of bowel function and fatigue. Symptoms severe enough to warrant hospital admission lasting some days but with a complete recovery within twelve months. Where hospitalisation is required, an award should be made towards the top of the bracket. Varying degrees of disabling pain, cramps and diarrhoea	€6,000-€20,000
		continuing for some days or weeks.	
D.	Re	productive system: male	
Thes	se inj	uries include:	
	(a)	Total loss of reproductive organs;	
	(b)	Impotence and loss of sexual function;	
	(C)	Infertility;	
	(d)	Loss of testicle.	
Con	sider	ations affecting the level of awards will include:	
	(i)	Age;	
	(ii)	Extent of scarring or other cosmetic sequelae;	
	(iii)	Extent of any psychological sequelae including depression;	
	(iv)	Impact on personal relationships;	
	(v)	Whether the injury is total or partial and its effect on sexual function;	
	(vi)	Whether the injury is permanent;	
	(vii)	Whether the affected man already has children and/or whether his intended family was complete.	
(a)	Tot	al loss of reproductive organs	€150,000-€250,000
(b)	Case	es of testicle es of orchidectomy with some psychological sequelae but nout loss of sexual function or impotence.	€24,000-€30,000

(c)	Imp	ootence and loss of sexual function	
	(i)	Young man with permanent total impotence, loss of sexual function and sterility.	€135,000-€190,000
	(ii)	Total permanent impotence for middle aged man with children.	€50,000-€100,000
	(iii)	Total permanent impotence for older man	€10,000-€50,000
(d)	Case trau	ertility/sterility without impotence es of sterility may be traumatic (caused by assault) or non- matic (caused by surgery, chemicals or disease) and are often avated by scarring.	
	(i)	The most serious cases, which will invariably relate to young men.	€100,000-€150,000
	(ii)	A less serious case perhaps involving a family man who might have intended to have more children.	€40,000-€80,000
	(iii)	At the lower level of the range will be cases of an older man with children.	€10,000-€20,000
	(i∨)	Cases where the sterility amounts to little more than an "insult".	€5,000-€10,000
Ε.	Re	productive system: female	
		ations affecting the award, apart from those specifically I in respect of any particular bracket, may include:	
	(i)	Age;	
	(ii)	Whether or not the affected woman already has children and/or whether the intended family was complete;	
	(iii)	Presence or absence of scarring;	
	(i∨)	Interference with sexual function;	
	(v)	Impact on personal relationships;	
	(∨i)	Impact on menopause or hormonal function;	
	(∨ii)	Whether injury may be corrected by surgery;	
	(∨iii)	Extent of any psychological sequelae including depression;	
	(ix)	Whether a foetus was aborted.	

(a)	Infertility whether by reason of injury or disease, with severe depression and anxiety and possible pain and scarring or other medical complications and where the claimant has no children.	€150,000-€250,000
(b)	Infertility whether by reason of injury or disease, with severe depression and anxiety and possible pain and scarring or other medical complications and where the claimant has children.	€50,000-€150,000
(c)	Infertility where the claimant would not have had children in any event.	€8,000-€17,000
(d)	Failed sterilisation leading to unwanted pregnancy where there is no serious psychological impact or depression.	€17,500-€30,000
(e)	Where delay in diagnosing ectopic pregnancy but fertility not affected. Award dependant on extent of pain, suffering, bleeding, whether blood transfusion required, anxiety and adjustment disorder and whether there is resultant removal of one of the fallopian tubes.	€5,000-€27,000
F.	Kidney	
	siderations affecting the level of the award, apart from those cifically identified in respect of any particular bracket, may include:	
	 (i) Age; (ii) Extent of medical intervention and treatment required; (iii) Scarring; (iv) Impact on work; (v) Interference with quality of life and leisure activities; (vi) Impact on personal relationships; (vii) Psychological sequelae including depression; (viii) Prognosis. 	
(a)	Serious and permanent damage to or loss of both kidneys.	€170,000-€240,000
(b)	Serious injury resulting in a significant risk of total loss of natural kidney function.	€80,000-€120,000
(c)	Loss of one kidney with no damage to the other.	€36,000-€55,000

G.	Bowel	
Сс	nsiderations affecting the level of the award will include:	
	(i) Age;	
	(ii) Extent of medical intervention and treatment required;	
	(iii) Scarring;	
	(iv) Impact on work;	
	(v) Interference with quality of life and leisure activities;	
	(vi) Impact on personal relationships;	
	(vii) Psychological sequelae including depression;	
	(viii) Prognosis.	
(a)	In cases involving double incontinence, namely loss of natural bowel function and complete loss of urinary function and control, together with other medical complications.	€150,000-€250,000
(b)	Total loss of natural function and dependence on colostomy.	€115,000-€185,000
(c)	Faecal urgency and passive incontinence persisting after surgery and causing embarrassment and distress, typically following injury giving birth. Only if the symptoms are severe and permanent should the award be in the top of the bracket.	€55,000-€95,000
(d)	Severe abdominal injury causing impairment of function and often necessitating temporary colostomy (leaving disfiguring scars) and/ or impact on work and on diet.	€55,000-€80,000
(e)	Other bowel injuries including penetrating injuries causing some permanent damage but with an eventual return to natural function and control.	€10,000-€25,000
H.	Bladder	
	nsiderations affecting the level of the award, apart from those ecifically identified in respect of any particular bracket, will include:	
	(i) Age;	
	(ii) Nature, extent and duration of all treatment and medication required;	
	(iii) Impact on work;	
	(iv) Interference with enjoyment of life and leisure activities;	

	(v) Impact on personal relationships;	
	(vi) Psychological sequelae including depression;	
	(vii) Prognosis.	
(a)	Complete loss of function and control.	€115,000-€160,000
(b)	Serious impairment of control with some pain and incontinence.	€50,000- €90,000
(c)	Where there has been an incomplete recovery with long-term interference with natural function.	€23,000-€40,000
I.	Spleen	
(a)	Loss of spleen where there is continuing risk of internal infection and disorders due to the damage to the immune system.	€28,000-€40,000
(b)	Where the above risks are not present or are minimal.	€5,000-€12,000
J.	Hernia	
(a)	Hernia resulting in continuing pain and/or limitations on physical activities, sport or employment, after repair.	€25,000-€50,000
(b)	Direct inguinal hernia with some risk of recurrence after repair.	€12,000-€20,000
(c)	Uncomplicated indirect inguinal hernia with no other associated abdominal injury or damage.	€4,000-€12,000

7. ORTHOPAEDIC INJURIES

A. Neck injuries

There is a wide range of neck injuries. Many are found in conjunction with back and shoulder problems. Some are grossly disabling involving significant ongoing pain and disability. Others are of modest duration and severity in terms of pain and their impact on quality of life. It is important that the award made be proportionate to the severity of the injury and proportionate to the level of awards guided for other more or less severe injuries identified in these guidelines.

The assessment of damages for whiplash injuries requires particular care. Allegations of such injuries are easily made and not easily disproved. Medical experts are reliant on the honesty of claimants. The evidence relating to such a claim requires careful scrutiny.

The court should make its findings of fact on the issues of:

- (i) Whether a whiplash injury was sustained; and,
- (ii) If so, the nature and extent of the injury.

The court should avoid simply making a small award to avoid the necessity of making its findings on (i) and (ii) above.

Considerations affecting the level of the award for neck injuries, apart from those specifically identified in respect of any particular bracket, will include:

- (i) Age;
- (ii) Nature, severity and duration of injury and consequential symptoms;
- (iii) Extent of required medical intervention and treatment;
- (iv) Presence or risk of degenerative changes;
- (v) Impact on work;
- (vi) Interference with quality of life and leisure activities;
- (vii) Impact on personal relationships;
- (viii) Prognosis.

(a) Most severe neck injuries (i) Neck injury associated with incomplete paraplegia or resulting in permanent spastic quadriparesis or where despite the wearing of a collar 24 hours a day for a period of years, the neck could still not move, and severe headaches have proved intractable.

(ii)	the seve perr mov	ries, usually involving serious fractures or damage to discs in cervical spine, which give rise to disabilities of considerable erity, but which fall short of those arising in (i) above; manent damage to the brachial plexus or substantial loss of rement in the neck combined with loss of function in one or re limbs.	€100,000-€150,000
(b)	Sev	ere and serious neck injuries	
(i)	disla soft	ies causing very severe symptoms from fractures or ocations that may require spinal fusion, or severe damage to tissues and/or ruptured tendons leading to chronic conditions significant disability of a permanent nature.	€70,000-€100,000
(ii)	abo	ries involving less serious fractures and dislocations than at (i) ve, but which nonetheless cause severe symptoms and/or pain ch will be permanent or recurring.	€50,000-€70,000
(iii)	of tł limi [.] or d	es involving soft tissue or wrenching type injury and disc lesion ne more severe type resulting in cervical spondylosis, serious tation of movement, permanent or recurring pain, stiffness iscomfort and the possible need for further surgery with eased vulnerability to trauma.	€35,000-€50,000
(c)	Мо	derate neck injuries	
	exis five injui and	ries which may have accelerated and/or exacerbated a pre- ting condition over a shorter period of time, usually less than years. This bracket will also apply to moderate soft tissue ries where the period of recovery has been relatively protracted where there remains an increased vulnerability to further ma or permanent minimal symptoms.	€12,000-€23,000
(d)	Mir	or neck injuries	
	(i)	Injuries where a substantial recovery takes place within one to two years. This bracket will also apply to short term acceleration and/or exacerbation of pre-existing condition, usually between one and two years.	€6,000-€12,000
	(ii)	Where a substantial recovery takes place between six months to one year. This bracket will also apply to short- term acceleration and/or exacerbation of pre-existing injuries, usually less than one year.	€3,000-€6,000
	(iii)	Where a substantial recovery is made within six months.	€500-€3,000

B. Back injuries

Considerations affecting the level of the award for all back injuries, apart from those specifically identified in respect of any particular bracket, will include: (i) Age; (ii) Nature, severity and duration of injury and consequential symptoms such as pain; (iii) Extent of required medical intervention and/or treatment; (iv) Presence or risk of degenerative changes; (v) Impact upon work; (vi) Interference with quality of life and leisure activities; (vii) Effect on personal relationships; (viii) Psychological sequelae including depression; (ix) Prognosis. (a) Most severe back injuries The most severe back injuries which fall short of paralysis but €150,000-€300,000 involve damage to the spinal cord and nerve roots leading to serious consequences not normally found in cases of back injury. There will be severe pain and disability with a combination of incomplete paralysis and significantly impaired bladder, bowel and sexual function. (b) Severe and serious back injuries (i) Cases less severe than those at (a) above but which have special €90,000-€140,000 features taking them outside any lower bracket of back injury. Such features include nerve root damage with associated loss of sensation, impaired mobility, impaired bladder and bowel function, impaired sexual function, depression, personality change, addiction issues, impact on work and possible unsightly scarring.

(ii) Disc lesions, fractures of discs or of vertebral bodies or soft tissue injuries leading to chronic conditions where, despite treatment (usually involving surgery), there remain disabilities such as continuing severe pain and discomfort, impaired agility and the risk of arthritis.

(c)	Moderate back injuries	
(i)	This bracket applies to a wide variety of injuries where the claimant will have residual disability albeit of less severity than in the higher brackets. Examples include:	€35,000-€55,000
	• A compression/crush fracture of the lumbar vertebrae with a substantial risk of osteoarthritis and a significant level of ongoing pain and discomfort;	
	 Traumatic spondylolisthesis with continuous pain and a probability that spinal fusion will be necessary; 	
	 Prolapsed intervertebral disc requiring surgery; 	
	• Damage to an intervertebral disc with nerve root irritation and reduced mobility.	
(ii)	Injuries to the back less severe than those included in the higher brackets. These will include injuries causing disturbance of ligaments and muscles causing pain and discomfort, soft tissue injuries resulting in a prolonged acceleration and/or exacerbation of a pre-existing back condition, usually by five years or more.	€20,000- €35,000
(d)	Minor back injuries	
	This bracket includes injuries such as sprains, strains and soft tissue injuries which are less serious. As with minor neck injuries, whilst the duration of symptoms will always be important, the considerations set out at 7.B. above will guide whether the award should be in the higher or lower category.	
	(i) Where a substantial recovery without surgery takes place within two to five years.	€12,000-€20,000
	 Where a substantial recovery or a recovery to nuisance level takes place without surgery within one to two years. This bracket will also apply to short term acceleration and/or exacerbation injuries lasting between one and two years. 	€6,000-€12,000
	 Where a substantial recovery takes place without surgery between six months and one year. This bracket will also apply to short-term acceleration and/or exacerbation injuries, lasting between six months and one year. 	€3,000-€6,000
	(iv) Where a substantial recovery is made within six months.	€500-€3,000

C. Pelvis and hips

С.	re	ivis and hips	
inju	nsider ries, a ticula		
	(i)	Age;	
	(ii)	Nature, severity and duration of injury and consequential symptoms;	
	(iii)	Extent of required medical intervention and treatment;	
	(i∨)	Presence or risk of degenerative changes;	
	(∨)	Impact upon working capacity;	
	(∨i)	Effect on enjoyment of life, leisure activities and inter personal relationships;	
	(vii)	Presence of pre-existing degenerative changes;	
	(viii)	Psychological sequelae including depression;	
	(ix)	Prognosis.	
(a)	Sev	ere pelvis and hip injuries	
	of a resu pair	ensive fractures of the pelvis involving, for example, dislocation low back joint and a ruptured bladder or a hip injury Ilting in spondylolisthesis of a low back joint with significant necessitating spinal fusion and other substantial residual bilities.	€100,000-€165,000
(b)	Ser	ious pelvis and hip injuries	
(i)		njuries less severe than at (a) above but with particular inguishing features lifting them above any lower bracket.	€75,000-€100,000
(ii)	-	ry to the hip or pelvis less complicated than those in (a) or (b) pove. Examples include:	€50,000-€75,000
		fracture to the acetabulum leading to degenerative changes and leg instability requiring an osteotomy and likelihood of future hip replacement;	
		fracture of an arthritic femur or hip necessitating hip replacement;	
		fracture resulting in a hip replacement which is only partly successful so there is a clear risk of needing future revision surgery.	

(c)	Мо	derate pelvis and hip injuries	
	0	ificant injury to the pelvis or hip but permanent disability is not or and any future risk not great. These cases may involve hip replacement or other surgery. Where recovery has not been wholly successful the award will tend to the top of the bracket. Also included will be cases where hip replacement may be necessary in the foreseeable future or where there are more than minimal ongoing symptoms.	€30,000-€65,000
	(ii)	Injuries to the pelvis interfering with natural childbirth and requiring Caesarean Section. Where the claimant has not had any children at the time of the injury, an award towards the top end of the bracket should be made.	€30,000-€45,000
(d)	Mir	or pelvis and hip injuries	
	(i)	Where a substantial recovery takes place within two to five years.	€12,000-€20,000
	(ii)	Where a substantial recovery takes place within one to two years.	€6,000-€12,000
	(iii)	Where a substantial recovery takes place between six months and one year.	€3,000-€6,000
	(i∨)	Where a substantial recovery is made within six months.	€500-€3,000
D.	Sh	oulder injuries	
Considerations affecting the level of the award for shoulder injuries, apart from those specifically identified in respect of any particular bracket, will include:			
	(i)	Age;	
	(ii)	Nature, severity and duration of injury and consequential symptoms;	
	(iii)	Whether the injury is to the shoulder of the dominant upper limb;	
	(i∨)	Presence or risk of degenerative changes;	
	(∨)	Extent of required medical intervention and treatment;	

	 (vi) Impact upon work; (vii) Interference with quality of life and leisure activities; (viii) Impact on personal relationships; (ix) Prognosis. 	
(a)	Severe shoulder injuries	
	The most severe shoulder injuries, such as those involving damage to the brachial plexus nerves and which may result in paralysis of the arm, lack of muscle control in the arm, hand or wrist or other symptoms causing significant disability.	€100,000-€150,000
(b)	Serious shoulder injuries	
	Injuries in this bracket will include:	€40,000-€75,000
	 Dislocation of the shoulder and damage to the lower part of the brachial plexus causing pain in shoulder and neck, aching elbow, sensory symptoms in the forearm and hand and weakness of grip; 	
	 (ii) Fractured humerus leading to permanently restricted shoulder movement; 	
	(iii) Rotator cuff injury with persisting symptoms notwithstanding surgery.	
(c)	Moderate shoulder injuries	
	Frozen shoulder with limitation of movement and discomfort with symptoms persisting for some years and other soft tissue injuries where intrusive symptoms will be permanent.	€18,000-€35,000
(d)	Minor shoulder injuries	
	 Examples of cases within this bracket will include soft tissue injury to the shoulder causing considerable pain but where there has been an almost complete recovery and a simple fracture of the clavicle with good recovery. (i) Where a substantial recovery takes place within two years. (ii) Where a substantial recovery takes place within one year. 	€6,000-€12,000 €3,000-€6,000
	(iii) Where a substantial recovery takes place within six months.	€500-€3,000

Ε.	Amputation of arm	
	isiderations which will affect the level of the award in respect of	
arrı	outation and other severe arm injuries will include:	
	(i) Age;	
	(ii) Extent and intensity of any ongoing pain;	
	(iii) Level of the amputation, if required;(iv) Whather any static if a second is to the allocation of the second seco	
	 (iv) Whether amputation, if required, is to the dominant arm; (i) The automatical interaction if applies his constants. 	
	(v) The extent to which prosthetics, if applicable, can restore function;	
	 (vi) Extent, nature and duration of all treatment required e.g. surgery, physiotherapy and medication; 	
	(vii) Cosmetic impact;	
	(viii) Impact on work;	
	(ix) Interference with quality of life and leisure activities;	
	(x) Impact on independence and ability to self-care;	
	(xi) Psychological sequelae including depression.	
(a)	Loss of both arms	€300,000-€475,000
(b)	Loss of one arm	
	(i) Loss of arm amputated at shoulder.	€140,000-€230,000
	(ii) Above elbow amputation.	€120,000-€175,000
	(iii) Below elbow amputation.	€100,000-€150,000
F.	Other arm injuries	
(a)	Other arm injuries (severe)	
(i)	Injuries which fall short of amputation, but which are extremely serious and leave the injured person with little or no use of the arm.	€100,000-€150,000
(ii)	Injuries resulting in permanent and substantial disablement. Serious fractures of one or both forearms where there is significant permanent residual disability whether functional or cosmetic.	€50,000-€100,000
(b)	Other arm injuries (moderate)	
	While there will have been significant disabilities, a substantial degree of recovery will have taken place or is anticipated.	€20,000-€50,000

(c) Other arm injuries (minor) Included in this bracket will be straightforward fractures without €5,000-€20,000 the risk of arthritis and where the injury will have no long-term sequelae. At the upper end of the bracket will be cases where recovery was delayed and there may have been a requirement for significant treatment. G. Injuries to the elbow Considerations affecting the level of awards will include: (i) Age; (ii) Whether the elbow is on the dominant arm; (iii) Extent and duration of pain and suffering; (iv) Extent, nature and duration of all treatment required e.g. surgery, physiotherapy and medication; (v) Cosmetic impact, where relevant; (vi) Presence or risk of degenerative changes; (vii) Impact on work; (viii) Interference with quality of life and leisure activities; (ix) Impact on independence and ability to self-care; (x) Psychological sequelae including depression. (a) Serious elbow injuries Injuries falling within this category will have permanent €40,000-€72,500 consequences in terms of function and pain. Examples will include: A serious fracture with secondary arthritis; A crush injury with permanent impairment of function; Nerve palsy from which there will be only partial recovery. (b) Moderate elbow injuries Injuries less severe than those at (a) above which cause €17,000-€40,000 impairment of function, but which do not involve major surgery or significant disability. Examples would include: A fracture from which the injured person has made a reasonable recovery, which required open reduction and fixation;

• Nerve palsy from which a good recovery has been made.

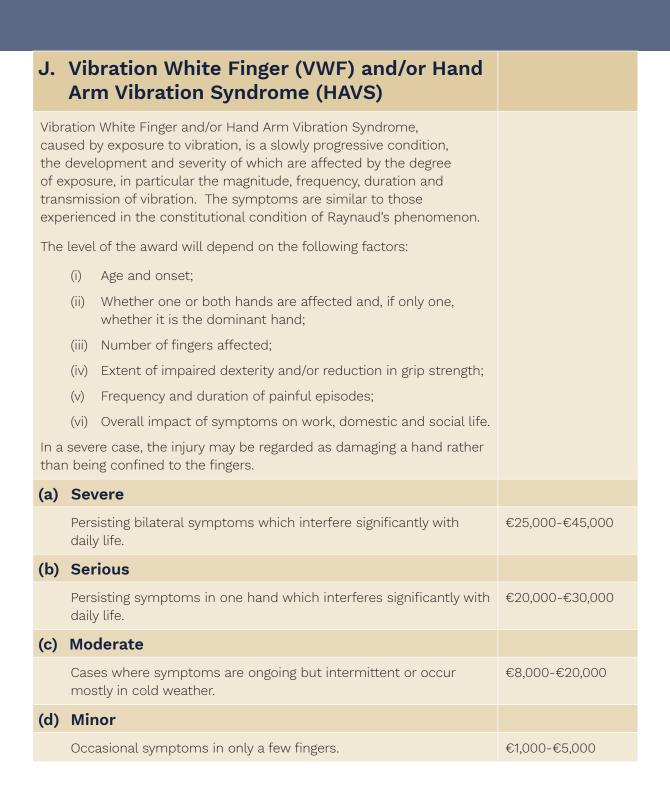
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(c)	Minor elbow injuries	
	 Most elbow injuries will fall into this category. They will be injuries which cause no permanent damage and do not result in permanent loss of function. Examples would include: A simple fracture with uncomplicated recovery; A soft tissue injury with pain; Modest tennis elbow syndrome; Relatively minor lacerations. 	€1,000-€15,000
н.	Wrist injuries	
	siderations affecting the level of the award are the same as those ch apply to elbow injuries above.	
(a)	Severe wrist injuries	
	Severely disabling wrist injury resulting in complete loss of function in the wrist such as where an arthrodesis has been performed. Deformity may increase the award depending on severity.	€60,000-€80,000
(b)	Serious wrist injuries	
	Injuries less severe than those at (a) above resulting in significant permanent disability but where some useful movement remains.	€40,000-€60,000
(c)	Moderate wrist injuries	
	Injuries less severe than at (b) above but where there is some permanent disability, such as a degree of persisting pain and/or stiffness.	€20,000-€40,000
(d)	Minor wrist injuries	
	Injuries which cause no permanent damage and do not result in permanent loss of function such as a Colles' Fracture, undisplaced or minimally displaced fractures necessitating the application of plaster of Paris or bandages.	
	(i) Where a substantial recovery or a recovery to nuisance level takes place without surgery within two to five years. This bracket will also apply to shorter term acceleration and/or exacerbation injuries usually between two and five years.	€10,000-€18,000
	 Where a substantial recovery takes place without surgery between six months and two years. This bracket will also apply to short-term acceleration and/or exacerbation injuries lasting between six months and two years. 	€3,000-€10,000
	(iii) Where a substantial recovery is made within six months	€500-€3,000

(iii) Where a substantial recovery is made within six months. $0.000 \pm 500 - 0.000$

I.	Hand injuries and injuries to thumb and fingers	
the whic brac	hand is functionally and cosmetically the most important feature of arm. Accordingly, the loss of a hand is valued close to the amount ch would be awarded for loss of an arm. The upper end of any extet will generally be appropriate where the material injury is to the hinant hand.	
In cases of injuries to multiple fingers, practitioners and judges should not simply add the figures which would be appropriate for each injury separately assessed but should consider the overall extent of pain, suffering, loss of amenity, and consequential disfigurement usually leading to a lower award than would be the case if considered separately.		
Har	nd injuries	
(a)	Total or effective loss of both hands The top of the bracket is applicable where no effective prosthesis can be used.	€200,000-€350,000
(b)	Serious damage to both hands giving rise to permanent disability and significant loss of function	€120,000-€180,000
(c)	Total or effective loss of one hand This bracket will apply to a hand that was crushed and thereafter surgically amputated or where all fingers and most of the palm have been traumatically amputated. The upper end of the bracket is indicated where the hand so damaged was the dominant one.	€100,000-€150,000
(d)	Serious hand injuries This bracket will apply to injuries where the capacity of the hand has been severely reduced. Included would be cases where several fingers have been amputated but reattached leaving the hand clawed, clumsy and unsightly or where some fingers and perhaps part of the palm amputated resulting in gross diminution of grip and dexterity with cosmetic disfigurement.	€50,000-€100,000
(e)	Severe fractures to fingers The bracket will include injury resulting in partial amputations, resulting deformity, impairment of grip, reduced mechanical function, disturbed sensation and cosmetic disfigurement. The top of the range would be appropriate where there is loss of sensation, scarring, permanent disability and surgery has failed.	€20,000-€50,000

(f)	Less serious hand injury Included are cases of severe crush injury resulting in significantly impaired function not requiring future surgery or despite operative treatment undergone.	€17,000-€40,000
(g)	Moderate hand injury This broad category will include crush injuries, penetrating wounds, soft tissue type injuries and deep lacerations. The top of the range would be appropriate where there is loss of sensation and scarring.	€10,000-€25,000
Thu	ımb injuries	
(h)	Total or partial loss of thumb Very serious injury to thumb. This bracket would include cases where the thumb has been reattached following trauma leaving a virtually useless and deformed digit or where the thumb has been amputated through the interphalangeal joint.	€40,000-€67,500
(i)	Serious injury to thumb Such injuries may involve nerve damage or fracture necessitating the insertion of wires as a result of which the thumb feels cold, is cold and ultrasensitive and there is significantly impaired grip or loss of manual dexterity.	€20,000-€40,000
(j)	Moderate injuries to the thumb These are injuries that necessitate arthrodesis of the interphalangeal joint or cause damage to tendons or nerves. Such injuries result in some impairment of sensation and function and cosmetic deformity.	€15,000-€25,000
(k)	Minor hand, finger and thumb injuries This bracket will include fractures and injuries causing minor scarring, or those resulting in tenderness or sensitivity to cold where otherwise there is full recovery.	€1,000-€12,000
Inju	ries to fingers	
(l)	Total loss of index finger	€25,000-€35,000
(m)	Partial loss of index finger This bracket also covers cases of injury to the finger giving rise to disfigurement and impairment of grip or dexterity.	€15,000-€25,000

(n)	Other injury or fracture of index finger This bracket is appropriate where the fracture has mended quickly but grip has remained impaired, there is pain on heavy use and osteoarthritis is likely.	€500-€15,000
(o)	Total loss of middle finger	€20,000-€30,000
(p)	Partial loss of middle finger This bracket also covers cases of injury to the finger giving rise to disfigurement and impairment of grip or dexterity.	€12,000-€20,000
(q)	Other injury or fracture of middle finger This bracket is appropriate where the fracture has mended quickly but grip has remained impaired, there is pain on heavy use and osteoarthritis is likely.	€500-€12,000
(r)	Total loss of ring finger	€17,500-€27,500
(s)	Partial loss of ring finger This bracket also covers cases of injury to the finger giving rise to disfigurement and impairment of grip or dexterity.	€10,000-€17,500
(t)	Other injury or fracture of ring finger This bracket is appropriate where the fracture has mended quickly but grip has remained impaired, there is pain on heavy use and osteoarthritis is likely.	€500-€10,000
(u)	Total loss of little finger	€12,000-€25,000
(v)	Partial loss of little finger This bracket also covers cases of injury to the finger giving rise to disfigurement and impairment of grip or dexterity.	€7,500-€12,000
(w)	Other injury or fracture of little finger This bracket is appropriate where the fracture has mended quickly but grip has remained impaired, there is pain on heavy use and osteoarthritis is likely.	€500-€7,500



K. Other upper limb disorders This section covers a range of pathological injuries of the upper limbs including: (a) Tensynovitis; (b) De Qunverain's Tensynovitis; (c) Tenovaginitis Stenovans; (d) Carpel Tunnel Syndrome; (e) Epicondylitis. Considerations affecting the level of the award will include: (i) Age; (ii) Whether the condition is bilateral or one sided; (iii) Severity and duration of pain and other symptoms such as swelling tenderness and inflammation; (iv) Nature, extent and duration of treatment undertaken; (v) Interference with quality of life and leisure activities; (vi) Impact on work; (vii) Ability to avoid recurrence of symptoms; (viii) Prognosis. The following brackets apply to each of the above injuries based on these considerations: (a) Continuing disability with surgery €20,000-€40,000 (b) Continuing symptoms but fluctuating €12,000-€20,000 (c) Symptoms resolving within a period of two years €6,000-€12,000 €500-€6,000 (d) Complete recovery within a period of one year

L.	Leg	g amputation	
Cons	sider	ations which will affect the level of the award in respect of on will include:	
	(i)	Age;	
	(ii)	Whether the amputation is above or below the knee;	
	(iii)	The extent to which prosthetics can restore function;	
	(i∨)	The extent and intensity of any ongoing pain including phantom pain;	
	(v)	Impact on independence;	
	(vi)	Existence of any side effects resultant upon amputation such as backache and/or the risk of future degenerative changes in the hips and spine;	
	(vii)	Interference with quality of life and leisure activities;	
	(viii)	Impact on social and domestic life;	
	(ix)	Effect on relationships;	
	(x)	Impact on work;	
	(xi)	Psychological sequelae including depression.	
(a)	Los	s of both legs	€280,000-€400,000
(b)	Bel	ow knee amputation of both legs or feet	€200,000-€300,000
(c)	Abo	ove knee amputation of one leg	€120,000-€160,000
(d)		ow knee amputation of one leg or amputation of foot	€100,000-€140,000

М.	Other leg injuries	
	 asiderations affecting the level of the award may include the owing: (i) Age; (ii) Scarring; (iii) Nature, severity and duration of pain; (iv) Nature, extent and duration of all treatment required e.g. surgery, physiotherapy, medication; (v) Presence or risk of degenerative changes; (vi) Limitation of movement or instability in relevant joint; (vii) Interference with quality of life and leisure activities; (viii) Impact on social and domestic life; (ix) Impact on work; (x) Extent of scarring; (xi) Psychological sequelae; (xii) Prognosis. 	
(a)	Most severe leg injuries not involving amputation	
	Some injuries, although not involving amputation are so severe that the courts have awarded damages at a similar level. Such injuries would include extensive de-gloving of the leg, where there is gross shortening of the leg, or where fractures have not united and extensive bone grafting has been undertaken.	€100,000-€160,000
(b)	Severe leg injuries	
	Injuries leading to permanent problems with mobility, the need for crutches or mobility aids for the remainder of claimant's life. Injuries where multiple fractures have taken years to heal, required extensive treatment and have led to serious deformity and limitation of movement, or where arthritis has developed in a joint so that further surgical treatment is likely.	€90,000-€130,000
(c)	Serious leg injuries	
	Serious compound or comminuted fractures or injuries to joints or ligaments resulting in instability, prolonged treatment, a lengthy period of non-weight bearing, the near certainty that arthritis will ensue, extensive scarring. To justify an award within this bracket a combination of such features will generally be necessary. There will usually be a gross restriction of walking capacity. Also included will be injuries requiring hip replacement by reason of ongoing or anticipated deterioration.	€75,000-€100,000

(d)	Мо	derate leg injuries	
		es in this bracket will include complicated or multiple fractures evere crush injuries, generally to a single limb.	€50,000-€75,000
(e)	Leg	injuries (less serious that in (d) above)	
	soft hav imp This inju	etures from which an incomplete recovery is made or serious tissue injuries. In the case of fractures, the injured person will e made a reasonable recovery but may be left with a metal lant and/or a limp, impaired mobility, sensory loss, discomfort. bracket will also apply to cases involving serious soft tissue ries to one or both legs causing significant cosmetic deficit, ction on restriction and/or some nerve damage in the lower os.	€25,000-€50,000
(f)	(f) Minor leg injuries		
	(i)	Simple fracture of a femur with no damage to articular surfaces.	€12,000-€20,000
	(ii)	Simple fractures to tibia or fibula or soft tissue injuries. Towards the top of the bracket will come simple fractures where there is ongoing minor symptomology and/or restriction of movement. At the bottom will be cases of simple fracture with a complete recovery.	€7,500-€15,000
	(iii)	Wide variety of soft tissue injuries, lacerations, cuts, bruising or contusions all of which have recovered completely or almost completely, with any residual disability including cosmetic disability being of a minor nature.	€3,000-€7,500
	(i∨)	Where the injuries are the same as at (iii) above and all symptoms have resolved within six months.	€500-€3,000

NI	1/ m		
		ee injuries	
	Considerations affecting the level of the award include those identified in respect of "Other leg injuries" at M above.		
(a)) Se	vere knee injury	
	(i)	Cases where there has been disruption of the joint, the development of osteoarthritis, gross ligamentus damage, lengthy treatment, considerable pain and loss of function, and an arthroplasty or arthrodesis has taken place or is inevitable.	€75,000-€110,000
	(ii)	Leg fracture extending into the knee joint causing pain which is constant, permanent, limiting movement or impairing agility, and rendering the injured person prone to osteoarthritis and the risk of arthrodesis or arthroplasty.	€55,000-€75,000
	(iii)	Less severe knee injuries. These cases will include those falling within the higher brackets but where the injury has resulted in less severe disability. There may be continuing symptoms by way of pain or discomfort and limitation of movement or instability or deformity with the risk of degenerative changes and the need for remedial surgery in the long term as a result of damage to the kneecap, ligamentus or meniscal injury, or muscular wasting.	€35,000-€55,000
(b)) Mo	derate knee injuries	
	in m This	ries involving dislocation, torn cartilage or meniscus which results ninor instability, wasting, weakness or other mild future disability. bracket also includes injuries which accelerate symptoms from a existing condition over a prolonged period of years.	€15,000-€35,000
(c)	Mir	or knee injuries	
	pre sho	bracket includes injuries similar to those in the immediately ceding bracket but where the injury is less serious and involves rter periods of acceleration or exacerbation and also includes ries such as lacerations, twisting or bruising injuries.	
	(i)	Where a substantial recovery or a recovery to nuisance level takes place within one to two years. This bracket will also apply to shorter term acceleration and/or exacerbation injuries lasting between one and two years.	€6,000-€12,000
	(ii)	Where a substantial recovery takes place without surgery between six months and one year. This bracket will also apply to shorter term acceleration and/or exacerbation injuries lasting between six months and one year.	€3,000-€6,000
	(iii)	Where a substantial recovery takes place within six months.	€500-€3,000

0.	An	kle injuries	
Con	sider	ations affecting the level of awards may include:	
	(i)	Age;	
	(ii)	Severity and duration of pain;	
	(iii)	Nature and extent of all treatment, e.g. surgery, physiotherapy and medication;	
	(i∨)	Scarring;	
	(∨)	Presence or risk of degenerative changes;	
	(∨i)	Instability in joint or limitation of movement;	
	(vii)	Effect on enjoyment of life, sport and leisure activities;	
	(∨iii)	Impact on work;	
	(ix)	Prognosis.	
(a)	Sev	ere ankle injuries	
	unu ankl risk knee frac	mples of injuries falling within this bracket will be limited and sual. Included will be cases of transmalleolar fracture of the e with extensive soft tissue damage resulting in deformity and that any future injury to the leg might necessitate a below e amputation. Included also will be cases such as ankle tures causing degeneration to the extent that arthrodesis will necessary.	€70,000-€100,000
(b)	Ser	ious ankle injuries	
	pins	ies necessitating an extensive period of treatment or where and plates have been inserted and there is significant residual bility in the form of ankle instability and severely limited ability valk.	€45,000-€70,000
(c)	Мос	lerate ankle injuries	
	serio diffi nego	tures, ligamentus tears and the like which give rise to less ous disabilities such as difficulty in walking on uneven ground, culty standing or walking for long periods of time, difficulty in otiating stairs, irritation from metal plates and residual scarring. re may also be a risk of future osteoarthritis.	€20,000-€45,000

(d) Minor ankle injuries Less serious, minor or undisplaced fractures, sprains and ligamentus injuries. €12,000-€20,000 Where a substantial recovery or a recovery to nuisance level (i) takes place without surgery within two to five years. This bracket will also apply to shorter term acceleration and/or exacerbation injuries usually between two and five years. (ii) Where a substantial recovery takes place without surgery €6,000-€12,000 between six months and two years. This bracket will also apply to very short-term acceleration and/or exacerbation injuries, usually less than two years. (iii) Where a substantial recovery is made within six months. €500-€3,000 P. Achilles tendon (a) Severe Severance of the tendon and the peroneus longus muscle €40,000-€55,000 giving rise to cramp, swelling and restricted ankle movement necessitating the cessation of active sport. (b) Serious Where complete division of the tendon has been successfully €25,000-€40,000 repaired but there is residual weakness, a limitation of ankle movements, a limp and residual scarring and where further improvement is unlikely. (c) Moderate Cases involving partial rupture or significant injury to the tendon. €18,000-€25,000 Significant recovery will have been made but there may be ongoing low-grade symptoms and functional disability. (d) Minor A turning of the ankle resulting in some damage to the tendon and a feeling of being unsure of ankle support. (i) Where substantial recovery takes place in one to two years. €6,000-€12,000 (ii) Where substantial recovery takes place in six months to one €3,000-€6,000 year. €500-€3,000 (iii) Where substantial recovery takes place within six months. Foot amputation

To be treated as below knee amputation.

Q.	Otl	ner foot injuries	
Con	sider	ations affecting the level of the award may include:	
	(i)	Age;	
	(ii)	The nature, severity and duration of pain;	
	(iii)	Extent of treatment required, e.g. surgery, physiotherapy and medication;	
	(i∨)	Presence or risk of arthritis or limitation of movement;	
	(v)	Interference with enjoyment of life, sport and leisure activities, social and domestic life;	
	(vi)	Impact on work;	
	(vii)	Extent of scarring;	
	(viii)	Psychological sequelae including depression;	
	(ix)	Prognosis.	
(a)	Mos	st severe foot injuries	
	seve inclu need case mot seve oste	all within this bracket the injury must produce permanent and ere pain or very serious permanent disability. Examples would ude traumatic amputation of the forefoot with the risk of the d for a full amputation and serious consequential back pain, or es involving loss of a substantial portion of the heel such that bility is grossly restricted. This level is also suitable for unusually ere injuries to a single foot resulting for example in heel fusion, opporosis, ulceration or other disability preventing the wearing rdinary shoes.	€90,000-€150,000
(b)	Sev	ere foot injuries	
	rest Exar as th with	ng within this bracket will be injuries resulting in substantial riction on mobility or considerable and permanent pain. mples include less severe versions of those at (a) above as well nose which result in severe degloving and/or extensive surgery continued pain and in the presence of arthritis. Also in this gory will be the case of the drop foot deformity corrected by a se.	€80,000-€130,000
(c)	Ser	ious foot injuries	
	whic burr and	bracket will include injuries less severe than in (b) above but ch result in continuing pain. Examples would include severe ning to both feet with resultant surgery and significant scarring traumatic injuries resulting in future arthritis, prolonged tment and the risk of fusion.	€38,000-€75,000

(d)	Мо	derate foot injuries	
	perr	bracket will include displaced metatarsal fractures resulting in nanent deformity and continuing symptoms. There may be a of long-term osteoarthritis and/or future surgery.	€20,000-€45,000
(e)	Min	or foot injuries	
		category will apply to relatively modest injuries such as simple atarsal fractures, ruptured ligaments, puncture wounds and like.	
	(i)	Where a substantial recovery or a recovery to nuisance level takes place without surgery within two to five years. This bracket will also apply to shorter term acceleration and/or exacerbation injuries usually between two and five years.	€12,000-€20,000
	(ii)	Where a substantial recovery takes place without surgery between one and two years. This bracket will also apply to very short-term acceleration and/or exacerbation injuries, usually less than two years.	€6,000-€12,000
	(iii)	Where a substantial recovery takes place without surgery between six months and one year. This bracket will also apply to very short-term acceleration and/or exacerbation injuries for six months to one year.	€3,000- €6,000
	(i∨)	Where a substantial recovery is made within six months.	€500-€3,000
R.	То	e injuries	
Со	nsider	ations affecting the level of the award:	
	(i)	Age;	
	(ii)	Impact on overall function of the foot;	
	(iii)	In the case of amputation, the number of toes removed;	
	(i∨)	Nature, extent and duration of treatment e.g. surgery, physiotherapy and medication;	
	(v)	The nature and severity of ongoing pain, including phantom pain;	
	(vi)	Presence or risk of osteoarthritis or restriction of movement;	
	(vii)	Impact on capacity for work;	
	(viii)	Effect on enjoyment of life, sport and leisure activities;	
	(ix)	Impact on mobility and balance;	
	(x)	Prognosis.	

(a)	Amputation of all toes on one foot	€50,000-€75,000
(b)	Amputation of big toe	€28,000-€45,000
(c)	Other toe injuries (severe) This bracket is appropriate for severe crush or other traumatic injury falling short of the need for amputation but resulting in significant continuing and permanent symptoms.	€25,000-€40,000
(d)	Other toe injuries (serious) This bracket will include serious injuries to the big toe or crush and multiple fractures of two or more toes. There will be moderate permanent disability or moderate ongoing discomfort, pain and sensitivity.	€15,000-€25,000
(e)	Other toe injuries (moderate) Relatively straightforward fractures/crush injuries or the exacerbation of a pre-existing degenerative condition or laceration injuries to one or more toes. Cases involving prolonged symptoms or surgery should be located at the top of the bracket and those with complete resolution towards the bottom.	€8,000-€15,000
(f)	 Other toe injuries (minor) (i) For straightforward injuries recovered within 12 months to 24 months. (ii) For straightforward injuries substantially recovered within 12 months. 	€7,000-€10,000 €500-€7,000

8. CHRONIC PAIN

This chapter deals with a variety of what may loosely be described as 'pain disorders". These include, but are not limited to, Fibromyalgia, Chronic Pain Syndrome, Chronic Fatigue Syndrome (ME), Conversion Disorders (also known as Dissociative Disorders), and Somatic Symptom Disorders. Cases of short-lived pain disorders, short-term exacerbation of an existing pain disorder, or brief acceleration of the onset of a pain disorder, all fall outside the suggested brackets and will require separate consideration.

With the exception of cases of Complex Regional Pain Syndrome (also known as CRPS), no attempt has been made to subdivide between different clinical conditions. Guidance instead reflects the impact, severity and prognosis of the condition. Where the condition principally affects a single part of the anatomy, cross-reference to the relevant chapter within these guidelines may assist. The presence of an overlapping psychiatric injury is common case in such cases.

Considerations affecting the level of the award will include:

- (i) Age;
- (ii) Degree of pain experienced;
- (iii) Whether the condition is limited to one anatomical site or is widespread;
- (iv) Nature, extent and duration of all treatment including, in particular, medication required to control symptoms of pain;
- (v) Overall impact of symptoms (which may include fatigue, associated impairments of cognitive function, muscle weakness, headaches and other fluctuating symptoms) on:
 - (a) Mobility;
 - (b) Ability to function in daily life;
 - (c) Independence;
 - (d) Work;
 - (e) Relationships.
- (vi) The presence of any separately identifiable psychiatric disorder and its impact on the perception of pain;
- (vii) Prognosis.

Α.	Complex regional pain syndrome (CRPS)	
	condition is characterised by intense burning pain which can make ving or even touching the affected limb intolerable.	
(a)	CRPS (Severe)	
	In such cases the prognosis will be poor; ability to work will be greatly reduced if not completely eliminated; significant care/ domestic assistance will be needed; coexisting psychological problems may be present. At the top end of the scale, symptoms may have spread to other limbs.	€65,000-€95,000
(b)	CRPS (Moderate)	
	The top end of this bracket will include cases where significant effects have been experienced for a prolonged period but prognosis assumes some future improvement enabling a return to work in a significant (not necessarily full time) capacity and with only modest future care requirements. At the lower end will be cases where symptoms have persisted for some years but are more variable in intensity, where medication is effective in limiting symptoms, and/or where the prognosis is markedly better, though not necessarily for complete resolution. The injured party may have already resumed employment. Minimal, if any, future care will be required.	€35,000-€65,000
В.	Other pain disorders	
(a)	Severe	
	In these cases, significant symptoms will be ongoing despite treatment and will be expected to persist, resulting in adverse impact on ability to work and the need for some care/assistance. Most cases of fibromyalgia with serious persisting symptoms will fall within this range.	€50,000-€75,000
(b)	Moderate	
	At the top end of this bracket will be cases where symptoms are ongoing, albeit of lesser degree than in (a) above and the impact on ability to work/function in daily life is less marked. At the bottom end will be cases where full, or near complete recovery has been made (or is anticipated) after symptoms have persisted for a number of years. Cases involving significant symptoms but where the claimant was vulnerable to the development of a pain disorder within a few years (or "acceleration" cases) will also fall within this	€30,000-€50,000

bracket.

9. FACIAL INJURIES

The assessment of damages for facial injuries is an extremely difficult task particularly in cases involving cosmetic defect or other types of disfigurement.

A. Facial disfigurement

Burns are not dealt with separately and the award made should reflect the severity of the circumstances surrounding the injury and the suffering endured during the period of initial treatment. The very worst burns lead not only to considerable disfigurement and pain but to a variety of continuing physical and psychological injuries meriting very high awards, usually at the upper ends of the brackets or above them altogether.

Considerations affecting the level of the award will include:

- (i) Age;
- (ii) Nature of the underlying injury which has resulted in facial disfigurement;
- (iii) Nature, extent and duration of treatment;
- (iv) Nature and extent of residual scarring or disfigurement;
- (v) Impact on work;
- (vi) Interference with quality of life and social and leisure activities;
- (vii) Impact on relationships;
- (viii) Consequential psychological damage including depression.

(a) Most severe scarring In relatively young claimants (typically teens to early 30s) where €80.000-€200.000 the cosmetic effect is very disfiguring and the psychological reactions severe. (b) Severe scarring Where the disfigurement is still substantial and where there is a €60,000-€80,000 significant psychological reaction. (c) Serious scarring Where the worst effects have been or will be reduced by €30,000-€60,000 plastic surgery leaving some cosmetic disability and where the psychological reaction is not great or, having been considerable at the outset, has diminished to relatively minor proportions. Will include cases where the scarring is visible at conversational distance.

(d) Moderate scarring In these cases there may be but one scar which can be €7,000-€30,000 camouflaged or, though there is a number of very small scars, the overall effect does not markedly affect the appearance and the reaction is no more than that of an ordinarily sensitive young person. (e) Minor scarring In these cases, the effect is minor only. €500-€7.000 B. Skeletal injuries to the face (a) Le Fort Fractures of frontal facial bones €50,000-€80,000 (b) Multiple fractures of facial bones €25,000-€50,000 Involving some facial deformity of a permanent nature (c) Fractures of nose or nasal complex Serious or multiple fractures requiring a number of operations (i) €25,000-€50,000 and/or resulting in permanent damage to airways, difficulty breathing, and/or nerves and/or tear ducts and/or facial deformity. (ii) Displaced fracture where surgery was required and where €10,000-€25,000 recovery is complete. Depending on the duration of symptoms such as breathing difficulties. €3,000-€5,000 (iii) Displaced fracture requiring no more than manipulation. Where a full recovery is made in less than six months the award should be towards the lower end of the bracket. €500-€3,000 (iv) Simple undisplaced fracture with full recovery. (d) Fractures of cheekbones Serious fractures requiring surgery but with lasting (i) €25,000-€50,000 consequences such as paraesthesia in the cheeks or the lips or some element of disfigurement. €10,000-€25,000 (ii) Simple fracture of cheekbones for which some reconstructive surgery is necessary but from which there is a complete recovery with no or only minimal cosmetic effects. €500-€6,000 (iii) Simple fracture of cheekbone for which no surgery is required and where a complete recovery is achieved.

(e) Fractures of jaws

(-)	(i)	Very serious multiple fractures followed by prolonged treatment and permanent consequences including severe pain, restriction in eating, paraesthesia, and/or the risk of arthritis in the joints.	€50,000-€80,000
	(ii)	Serious fracture with permanent consequences such as difficulty in opening the mouth or with eating or where there is paraesthesia in the area of the jaw.	€30,000-€60,000
	(iii)	Simple fracture requiring immobilisation but from which recovery is complete.	€3,000-€12,000
F.	Da	mage to teeth	
Sei	rious	s injury	
a re the with frac Awa prot	nese sult o exter n eati tures ards r cracte reate		
		0	
(i)		of or serious damage to several front teeth.	€12,500-€30,000
	Loss		€12,500-€30,000 €7,000-€15,000
(ii)	Loss Loss	of or serious damage to several front teeth.	

10. NON FACIAL SCARRING AND BURNS

A. Scarring

The principles are the same as those applied to cases of facial disfigurement. Many of the physical injuries already described will involve some element of disfigurement and that element is, of course, taken into account in suggesting the appropriate bracket. There remain some cases where the element of disfigurement is the predominant one in the assessment of damages. Where the scarring is not to the face or is not unusually visible then the awards will tend to be lower than those for facial or readily visible disfigurement.

- (a) A number of noticeable laceration scars or a single disfiguring scar,
 €30,000-€80,000
 of leg(s) or arm(s) or hand(s) or back or chest.
- (b) A single noticeable scar, or several superficial scars of leg(s) or €1,000-€40,000 arm(s) or hand(s), with some minor cosmetic deficit.

B. Burns

Burns will normally be regarded as more serious than other scarring since they tend to cause a greater degree of pain and may lead to continuing physical and psychological injury. Accordingly, while the level of the award should be guided by the values set out at A. above, it is to be expected that a scar as a result of a burn will attract a higher award than a scar of equal significance otherwise caused. Where significant burns cover 40% or more of the body, awards are likely to exceed €200,000.

Considerations affecting the level of awards in burns cases will include:

- (i) Age;
- (ii) Percentage body area affected;
- (iii) Whether the burns are full thickness, partial thickness, superficial;
- (iv) Degree of pain and suffering attributable to the injury and subsequent treatment;
- (v) Nature, extent and duration of all treatment;
- (vi) Cosmetic impact of the injuries and the injured person's reactions to them;
- (vii) Effect on enjoyment of life and leisure activities;
- (viii) Impact on work;
- (ix) Psychological sequelae including depression.

11. DAMAGE TO HAIR

(a)	Damage to hair and consequences of defective permanent waving, tinting or the like, where the effects are dermatitis, eczema, or tingling or "burning" of the scalp causing dry, brittle hair, which breaks off and/or falls out, leading to distress, depression, embarrassment, and loss of confidence and inhibiting social life. In the more serious cases, thinning continues and the prospects of regrowth are poor or there has been total loss of areas of hair and regrowth is slow. There may be a larger award in cases of significant psychological disability or if surgical intervention is required (for example skin grafting).	€12,000-€22,000
(b)	Less serious cases of the above where symptoms are lesser; are only of a minor character; also cases where hair has been pulled out leaving bald patches. The level of the award will depend on the length of time taken before regrowth occurs. This bracket will include cases of alopecia induced by stress causing some hair loss where full recovery is made within two years.	€500-€12,000

	CONDITIONS		
This	Higher awards are likely to be justified where the face is affected. This chapter also includes other skin conditions such as eczema and psoriasis.		
(a)	Dermatitis of both hands, with cracking and soreness, affecting employment and domestic capability, possibly with some psychological sequelae, expected to last more than seven years and perhaps indefinitely.	€30,000-€55,000	
(b)	Rash covering other parts of the body which lasts more than three years and may continue.	€18,000-€35,000	
(c)	Dermatitis of one or both hands, continuing for a significant period, but settling within two to three years with treatment and/or use of gloves for specific tasks.	€7,000-€16,000	
(d)	Itching, irritation of, and/or rashes on one or both hands, but resolving within six months with treatment. A short lived aggravation of a pre-existing skin condition will also fall within this bracket.	€500-€3,000	

12. DERMATITIS AND OTHER SKIN CONDITIONS

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