

request. The bridge will remain open for a minimum of two hours between bridge closures for the passage of marine traffic. In the event of bridge operational failure, the bridge owner or operator shall notify the Coast Guard Captain of the Port, New York immediately and shall ensure that a repair crew is on scene at the bridge no later than 45 minutes after the bridge fails, and remains until the bridge has been restored to normal operations or raised and locked in the fully open position.

This deviation from the operating regulations is authorized under 33 CFR 117.35.

Dated: March 12, 2007.

Gary Kassof,

Bridge Program Manager, First Coast Guard District.

[FR Doc. E7-5062 Filed 3-19-07; 8:45 am]

BILLING CODE 4910-15-P

DEPARTMENT OF VETERANS AFFAIRS

38 CFR Part 4

RIN 2900-AM60

Schedule for Rating Disabilities; Appendices A, B, and C

AGENCY: Department of Veterans Affairs.

ACTION: Final rule.

SUMMARY: The Department of Veterans Affairs (VA) is revising its Schedule for Rating Disabilities, Appendices A, B, and C to include all current diagnostic codes. Appendix A is also amended to include all the diagnostic code historical information since the last review.

DATES: *Effective Date:* This amendment is effective April 19, 2007.

FOR FURTHER INFORMATION CONTACT:

Trude Steele, Regulations Staff (211D), Compensation and Pension Service, Veterans Benefits Administration, Department of Veterans Affairs, 810 Vermont Avenue, NW., Washington, DC 20420, (202) 273-7210.

SUPPLEMENTARY INFORMATION: The Schedule for Rating Disabilities, 38 CFR Part 4, Appendices A, B, and C have not been updated since July 1, 1988. These Appendices are tools for users of the Schedule for Rating Disabilities. The Appendices reflect changes to the diagnostic criteria in the Schedule for Rating Disabilities.

We have amended the Appendices to add changes to the Schedule for Rating Disabilities since the Appendices were last updated. Additionally, we removed language in Appendix A that showed

when a diagnostic code was updated to correct spelling, revise text, or other additional changes, which had no impact on the disability code. Those changes were incorporated within the text when amended. All diagnostic codes in Appendix A will now be categorized by when they were added, removed, whether the criterion was amended, and whether the disability evaluation was amended. We will continue to include the date for historical purposes. We revised Appendices B and C to provide the current diagnostic codes and disability terminology. We will continue to update the Appendices as the Schedule for Rating Disabilities is revised.

Administrative Procedures Act

This final rule merely replaces inaccurate examples and does not alter the content of the regulations.

Accordingly, there is a basis for dispensing with prior notice and comment and the delayed effective date provisions of 5 U.S.C. 553.

Paperwork Reduction Act

This document contains no provisions constituting a collection of information under the Paperwork Reduction Act (44 U.S.C. 3501-3521).

Regulatory Flexibility Act

The Secretary hereby certifies that this final rule will not have a significant economic impact on a substantial number of small entities as they are defined in the Regulatory Flexibility Act, 5 U.S.C. 601-612. This final rule would not affect any small entities. Only VA beneficiaries could be directly affected. Therefore, pursuant to 5 U.S.C. 605(b), this final rule is exempt from the initial and final regulatory flexibility analysis requirements of sections 603 and 604.

Executive Order 12866

Executive Order 12866 directs agencies to assess all costs and benefits of available regulatory alternatives and, when regulation is necessary, to select regulatory approaches that maximize net benefits (including potential economic, environmental, public health and safety, and other advantages; distributive impacts; and equity). The Executive Order classifies a "significant regulatory action," requiring review by the Office of Management and Budget (OMB) unless OMB waives such review, as any regulatory action that is likely to result in a rule that may: (1) Have an annual effect on the economy of \$100 million or more or adversely affect in a material way the economy, a sector of the economy, productivity, competition,

jobs, the environment, public health or safety, or State, local, or tribal governments or communities; (2) Create a serious inconsistency or otherwise interfere with an action taken or planned by another agency; (3) Materially alter the budgetary impact of entitlements, grants, user fees, or loan programs or the rights and obligations of recipients thereof; or (4) Raise novel legal or policy issues arising out of legal mandates, the President's priorities, or the principles set forth in the Executive Order.

The economic, interagency, budgetary, legal, and policy implications of this final rule have been examined and it has been determined not to be a significant regulatory action under Executive Order 12866.

Unfunded Mandates

The Unfunded Mandates Reform Act of 1995 requires, at 2 U.S.C. 1532, that agencies prepare an assessment of anticipated costs and benefits before issuing any rule that may result in the expenditure by State, local, and tribal governments, in the aggregate, or by the private sector, of \$100 million or more (adjusted annually for inflation) in any year. This final rule would have no such effect on State, local, and tribal governments, or on the private sector.

Catalog of Federal Domestic Assistance Numbers and Titles

The Catalog of Federal Domestic Assistance program numbers and titles for this final are 64.104, Pension for Non-Service-Connected Disability for Veterans and 64.109, Veterans Compensation for Service-Connected Disability.

List of Subjects in 38 CFR Part 4

Disability benefits, Pensions, Veterans.

Approved: March 2, 2007

Gordon H. Mansfield,

Deputy Secretary of Veterans Affairs.

■ For the reasons set out in the preamble, 38 CFR part 4 is amended as set forth below:

PART 4—SCHEDULE FOR RATING DISABILITIES

■ 1. The authority citation for part 4 continues to read as follows:

Authority: 38 U.S.C. 1155, unless otherwise noted.

■ 2. Appendix A to Part 4 is revised to read as follows:

APPENDIX A TO PART 4.—TABLE OF AMENDMENTS AND EFFECTIVE DATES SINCE 1946

Sec.	Diagnostic code No.	
4.71a	5000	Evaluation February 1, 1962.
	5001	Evaluation March 11, 1969.
	5002	Evaluation March 1, 1963.
	5003	Added July 6, 1950.
	5012	Criterion March 10, 1976.
	5024	Criterion March 1, 1963.
	5025	Added May 7, 1996.
	5051	Added September 22, 1978.
	5052	Added September 22, 1978.
	5053	Added September 22, 1978.
	5054	Added September 22, 1978.
	5055	Added September 22, 1978.
	5056	Added September 22, 1978.
	5100–5103	Removed March 10, 1976.
	5104	Criterion March 10, 1976.
	5105	Criterion March 10, 1976.
	5164	Evaluation June 9, 1952.
	5166	Criterion September 22, 1978.
	5172	Added July 6, 1950.
	5173	Added June 9, 1952.
	5174	Added September 9, 1975; removed September 22, 1978.
	5211	Criterion September 22, 1978.
	5212	Criterion September 22, 1978.
	5214	Criterion September 22, 1978.
	5216	Preceding paragraph criterion September 22, 1978.
	5217	Criterion August 26, 2002.
	5218	Criterion August 26, 2002.
	5219	Criterion September 22, 1978; criterion August 26, 2002.
	5220	Preceding paragraph criterion September 22, 1978; criterion August 26, 2002.
	5223	Criterion August 26, 2002.
	5224	Criterion August 26, 2002.
	5225	Criterion August 26, 2002.
	5226	Criterion August 26, 2002.
	5227	Criterion September 22, 1978; criterion August 26, 2002.
	5228	Added August 26, 2002.
	5229	Added August 26, 2002.
	5230	Added August 26, 2002.
	5235–5243	Replaces 5285–5295 September 26, 2003.
	5243	Criterion September 26, 2003.
	5255	Criterion July 6, 1950.
	5257	Evaluation July 6, 1950.
	5264	Added September 9, 1975; removed September 22, 1978.
	5275	Criterion March 10, 1976; criterion September 22, 1978.
	5285–5292	Revised to 5235–5243 September 26, 2003.
	5293	Criterion March 10, 1976; criterion September 23, 2002; revised and moved to 5235–5243 September 26, 2003.
	5294	Evaluation March 10, 1976; revised and moved to 5235–5243 September 26, 2003.
	5295	Evaluation March 10, 1976; revised and moved to 5235–5243 September 26, 2003.
	5296	Criterion March 10, 1976.
	5297	Criterion August 23, 1948; criterion February 1, 1962.
	5298	Added August 23, 1948.
4.73	Introduction NOTE criterion July 3, 1997.
	5317	Criterion September 22, 1978.
	5324	Added February 1, 1962.
	5325	Criterion July 3, 1997.
	5327	Added March 10, 1976; criterion October 15, 1991; criterion July 3, 1997.
	5328	Added NOTE March 10, 1976.
	5329	Added NOTE July 3, 1997.
4.84a	Table V criterion July 1, 1994.
	6010	Criterion March 11, 1969.
	6019	Criterion September 22, 1978.
	6029	NOTE August 23, 1948; criterion September 22, 1978.
	6035	Added September 9, 1975.
	6050–6062	Removed March 10, 1976.
	6061	Added March 10, 1976.
	6062	Added March 10, 1976.
	6063–6079	Criterion September 22, 1978.
	6064	Criterion March 10, 1976.
	6071	Criterion March 10, 1976.
	6076	Evaluation August 23, 1948.
	6080	Criterion September 22, 1978.

APPENDIX A TO PART 4.—TABLE OF AMENDMENTS AND EFFECTIVE DATES SINCE 1946—Continued

Sec.	Diagnostic code No.	
	6081	Criterion March 10, 1976.
	6090	Criterion September 22, 1978; criterion September 12, 1988.
4.84b	6260	Added October 1, 1961; criterion October 1, 1961; evaluation March 10, 1976; removed December 18, 1987; re-designated § 4.87a December 18, 1987.
4.87		Tables VI and VII replaced by new Tables VI, VIA, and VII December 18, 1987. 6200–6260 revised and re-designated § 4.87 June 10, 1999.
4.87a	6200–6260	Moved to § 4.87 June 10, 1999.
	6275–6276	Moved from § 4.87b June 10, 1999.
	6277–6297	March 23, 1956 removed, December 17, 1987; Table II revised Table V March 10, 1976; Table II revised to Table VII September 22, 1978; text from § 4.84b Schedule of ratings-ear re-designated from § 4.87 December 17, 1987.
	6286	Removed December 17, 1987.
	6291	Criterion March 10, 1976; removed December 17, 1987.
	6297	Criterion March 10, 1976; removed December 17, 1987.
4.87b		Removed June 10, 1999.
4.88a		March 11, 1969; re-designated § 4.88b November 29, 1994; § 4.88a added to read “Chronic fatigue syndrome”; criterion November 29, 1994.
4.88b		Added March 11, 1969; re-designated § 4.88c November 29, 1994; § 4.88a re-designated to § 4.88b November 29, 1994.
	6300	Criterion August 30, 1996.
	6302	Criterion September 22, 1978; criterion August 30, 1996.
	6304	Evaluation August 30, 1996.
	6305	Criterion March 1, 1989; evaluation August 30, 1996.
	6306	Evaluation August 30, 1996.
	6307	Criterion August 30, 1996.
	6308	Criterion August 30, 1996.
	6309	Added March 1, 1963; criterion March 1, 1989; criterion August 30, 1996.
	6314	Evaluation March 1, 1989; evaluation August 30, 1996.
	6315	Criterion August 30, 1996.
	6316	Evaluation March 1, 1989; evaluation August 30, 1996.
	6317	Criterion August 30, 1996.
	6318	Added March 1, 1989; criterion August 30, 1996.
	6319	Added August 30, 1996.
	6320	Added August 30, 1996.
	6350	Evaluation March 1, 1963; evaluation March 10, 1976; evaluation August 30, 1996.
	6351	Added March 1, 1989; evaluation March 24, 1992; criterion August 30, 1996.
	6352	Added March 1, 1989; removed March 24, 1992.
	6353	Added March 1, 1989; removed March 24, 1992.
	6354	Added November 29, 1994; criterion August 30, 1996.
4.88c		Re-designated from § 4.88b November 29, 1994.
4.89		Ratings for nonpulmonary TB December 1, 1949; criterion March 11, 1969.
4.97	6502	Criterion October 7, 1996.
	6504	Criterion October 7, 1996.
	6510–6514	Criterion October 7, 1996.
	6515	Criterion March 11, 1969.
	6516	Criterion October 7, 1996.
	6517	Removed October 7, 1996.
	6518	Criterion October 7, 1996.
	6519	Criterion October 7, 1996.
	6520	Criterion October 7, 1996.
	6521	Added October 7, 1996.
	6522	Added October 7, 1996.
	6523	Added October 7, 1996.
	6524	Added October 7, 1996.
	6600	Evaluation September 9, 1975; criterion October 7, 1996.
	6601	Criterion October 7, 1996.
	6602	Criterion September 9, 1975; criterion October 7, 1996.
	6603	Added September 9, 1975; criterion October 7, 1996.
	6604	Added October 7, 1996.
	6701	Evaluation October 7, 1996.
	6702	Evaluation October 7, 1996.
	6703	Evaluation October 7, 1996.
	6704	Subparagraph (1) following December 1, 1949; criterion March 11, 1969; criterion September 22, 1978.
	6705	Removed March 11, 1969.
	6707–6710	Added March 11, 1969; removed September 22, 1978.
	6721	Criterion July 6, 1950; criterion September 22, 1978.
	6724	Second note following December 1, 1949; criterion March 11, 1969; evaluation October 7, 1996.
	6725–6728	Added March 11, 1969; removed September 22, 1978.
	6730	Added September 22, 1978; criterion October 7, 1996.

APPENDIX A TO PART 4.—TABLE OF AMENDMENTS AND EFFECTIVE DATES SINCE 1946—Continued

Sec.	Diagnostic code No.	
	6731	Evaluation September 22, 1978; criterion October 7, 1996.
	6732	Criterion March 11, 1969.
	6800	Criterion September 9, 1975; removed October 7, 1996.
	6801	Removed October 7, 1996.
	6802	Criterion September 9, 1975; removed October 7, 1996.
	6810–6813	Removed October 7, 1996.
	6814	Criterion March 10, 1976; removed October 7, 1996.
	6815	Removed October 7, 1996.
	6816	Removed October 7, 1996.
	6817	Evaluation October 7, 1996.
	6818	Removed October 7, 1996.
	6819	Criterion March 10, 1976; criterion October 7, 1996.
	6821	Evaluation August 23, 1948.
	6822–6847	Added October 7, 1996.
4.104	7000	Evaluation July 6, 1950; evaluation September 22, 1978; evaluation January 12, 1998.
	7001	Evaluation January 12, 1998.
	7002	Evaluation January 12, 1998.
	7003	Evaluation January 12, 1998.
	7004	Criterion September 22, 1978; evaluation January 12, 1998.
	7005	Evaluation September 9, 1975; evaluation September 22, 1978; evaluation January 12, 1998.
	7006	Evaluation January 12, 1998.
	7007	Evaluation September 22, 1978; evaluation January 12, 1998.
	7008	Evaluation January 12, 1998.
	7010	Evaluation January 12, 1998.
	7011	Evaluation January 12, 1998.
	7013	Removed January 12, 1998.
	7014	Removed January 12, 1998.
	7015	Evaluation September 9, 1975; criterion January 12, 1998.
	7016	Added September 9, 1975; evaluation January 12, 1998.
	7017	Added September 22, 1978; evaluation January 12, 1998.
	7018	Added January 12, 1998.
	7019	Added January 12, 1998.
	7020	Added January 12, 1998.
	7100	Evaluation July 6, 1950.
	7101	Criterion September 1, 1960; criterion September 9, 1975; criterion January 12, 1998.
	7110	Evaluation September 9, 1975; evaluation January 12, 1998.
	7111	Criterion September 9, 1975; evaluation January 12, 1998.
	7112	Evaluation January 12, 1998.
	7113	Evaluation January 12, 1998.
	7114	Added June 9, 1952; evaluation January 12, 1998.
	7115	Added June 9, 1952; evaluation January 12, 1998.
	7116	Added June 9, 1952; evaluation March 10, 1976; removed January 12, 1998.
	7117	Added June 9, 1952; evaluation January 12, 1998.
	7118	Criterion January 12, 1998.
	7119	Evaluation January 12, 1998.
	7120	Note following July 6, 1950; evaluation January 12, 1998.
	7121	Criterion July 6, 1950; evaluation March 10, 1976; evaluation January 12, 1998.
	7122	Last sentence of Note following July 6, 1950; evaluation January 12, 1998; criterion August 13, 1998.
	7123	Added October 15, 1991; criterion January 12, 1998.
4.114		Introduction paragraph revised March 10, 1976.
	7304	Evaluation November 1, 1962.
	7305	Evaluation November 1, 1962.
	7308	Evaluation April 8, 1959.
	7311	Criterion July 2, 2001.
	7312	Evaluation March 10, 1976; evaluation July 2, 2001.
	7313	Evaluation March 10, 1976; removed July 2, 2001.
	7319	Evaluation November 1, 1962.
	7321	Evaluation July 6, 1950; criterion March 10, 1976.
	7328	Evaluation November 1, 1962.
	7329	Evaluation November 1, 1962.
	7330	Evaluation November 1, 1962.
	7331	Criterion March 11, 1969.
	7332	Evaluation November 1, 1962.
	7334	Evaluation July 6, 1950; evaluation November 1, 1962.
	7339	Criterion March 10, 1976.
	7341	Removed March 10, 1976.
	7343	Criterion March 10, 1976; criterion July 2, 2001.
	7344	Criterion July 2, 2001.
	7345	Evaluation August 23, 1948; evaluation February 17, 1955; evaluation July 2, 2001.
	7346	Evaluation February 1, 1962.

APPENDIX A TO PART 4.—TABLE OF AMENDMENTS AND EFFECTIVE DATES SINCE 1946—Continued

Sec.	Diagnostic code No.	
	7347	Added September 9, 1975.
	7348	Added March 10, 1976.
	7351	Added July 2, 2001.
	7354	Added July 2, 2001.
4.115a		Re-designated and revised as § 4.115b; new § 4.115a "Ratings of the genitourinary system-dysfunctions" added February 17, 1994.
4.115b	7500	Note July 6, 1950; evaluation February 17, 1994, criterion September 8, 1994.
	7501	Evaluation February 17, 1994.
	7502	Evaluation February 17, 1994.
	7503	Removed February 17, 1994.
	7504	Criterion February 17, 1994.
	7505	Criterion March 11, 1969; evaluation February 17, 1994.
	7507	Criterion February 17, 1994.
	7508	Evaluation February 17, 1994.
	7509	Criterion February 17, 1994.
	7510	Evaluation February 17, 1994.
	7511	Evaluation February 17, 1994.
	7512	Evaluation February 17, 1994.
	7513	Removed February 17, 1994.
	7514	Criterion March 11, 1969; removed February 17, 1994.
	7515	Criterion February 17, 1994.
	7516	Criterion February 17, 1994.
	7517	Criterion February 17, 1994.
	7518	Evaluation February 17, 1994.
	7519	Evaluation March 10, 1976; evaluation February 17, 1994.
	7520	Criterion February 17, 1994.
	7521	Criterion February 17, 1994.
	7522	Criterion September 8, 1994.
	7523	Criterion September 8, 1994.
	7524	Note July 6, 1950; evaluation February 17, 1994; evaluation September 8, 1994.
	7525	Criterion March 11, 1969; evaluation February 17, 1994.
	7526	Removed February 17, 1994.
	7527	Criterion February 17, 1994.
	7528	Criterion March 10, 1976; criterion February 17, 1994.
	7529	Criterion February 17, 1994.
	7530	Added September 9, 1975; evaluation February 17, 1994.
	7531	Added September 9, 1975; criterion February 17, 1994.
	7532–7542	Added February 17, 1994.
4.116		§ 4.116 removed and § 4.116a re-designated § 4.116 "Schedule of ratings-gynecological conditions and disorders of the breasts" May 22, 1995.
	7610	Criterion May 22, 1995.
	7611	Criterion May 22, 1995.
	7612	Criterion May 22, 1995.
	7613	Criterion May 22, 1995.
	7614	Criterion May 22, 1995.
	7615	Criterion May 22, 1995.
	7617	Criterion May 22, 1995.
	7618	Criterion May 22, 1995.
	7619	Criterion May 22, 1995.
	7620	Criterion May 22, 1995.
	7621	Criterion May 22, 1995.
	7622	Evaluation May 22, 1995.
	7623	Evaluation May 22, 1995.
	7624	Criterion August 9, 1976; evaluation May 22, 1995.
	7625	Criterion August 9, 1976; evaluation May 22, 1995.
	7626	Criterion May 22, 1995; criterion March 18, 2002.
	7627	Criterion March 10, 1976; criterion May 22, 1995.
	7628	Added May 22, 1995.
	7629	Added May 22, 1995.
4.117	7700	Evaluation October 23, 1995.
	7701	Removed October 23, 1995.
	7702	Evaluation October 23, 1995.
	7703	Evaluation August 23, 1948; criterion October 23, 1995.
	7704	Evaluation October 23, 1995.
	7705	Evaluation October 23, 1995.
	7706	Evaluation October 23, 1995.
	7707	Criterion October 23, 1995.
	7709	Evaluation March 10, 1976; criterion October 23, 1995.
	7710	Criterion October 23, 1995.
	7711	Criterion October 23, 1995.
	7712	Criterion October 23, 1995.

APPENDIX A TO PART 4.—TABLE OF AMENDMENTS AND EFFECTIVE DATES SINCE 1946—Continued

Sec.	Diagnostic code No.		
4.118	7713	Removed October 23, 1995.	
	7714	Added September 9, 1975; criterion October 23, 1995.	
	7715	Added October 26, 1990.	
	7716	Added October 23, 1995.	
	7800	Evaluation August 30, 2002.	
	7801	Criterion July 6, 1950; criterion August 30, 2002.	
	7802	Criterion September 22, 1978; criterion August 30, 2002.	
	7803	Criterion August 30, 2002.	
	7804	Criterion July 6, 1950; criterion September 22, 1978; criterion August 30, 2002.	
	7806	Criterion September 9, 1975; evaluation August 30, 2002.	
	7807	Criterion August 30, 2002.	
	7808	Criterion August 30, 2002.	
	7809	Criterion August 30, 2002.	
	7810	Removed August 30, 2002.	
	7811	Criterion March 11, 1969; evaluation August 30, 2002.	
	7812	Removed August 30, 2002.	
	7813	Criterion August 30, 2002.	
	7814	Removed August 30, 2002.	
	7815	Evaluation August 30, 2002.	
4.119	7820–7833	Added August 30, 2002.	
	7900	Criterion August 13, 1981; evaluation June 9, 1996.	
	7901	Criterion August 13, 1981; evaluation June 9, 1996.	
	7902	Evaluation August 13, 1981; criterion June 9, 1996.	
	7903	Criterion August 13, 1981; evaluation June 9, 1996.	
	7904	Criterion August 13, 1981; evaluation June 9, 1996.	
	7905	Evaluation; August 13, 1981; evaluation June 9, 1996.	
	7907	Evaluation August 13, 1981; evaluation June 9, 1996.	
	7908	Criterion August 13, 1981; criterion June 9, 1996.	
	7909	Evaluation August 13, 1981; criterion June 9, 1996.	
	7910	Removed June 9, 1996.	
	7911	Evaluation March 11, 1969; evaluation August 13, 1981; criterion June 9, 1996.	
	7913	Criterion September 9, 1975; criterion August 13, 1981; criterion June 9, 1996.	
	7914	Criterion March 10, 1976; criterion August 13, 1981; criterion June 9, 1996.	
	7916	Added June 9, 1996.	
	7917	Added June 9, 1996.	
	7918	Added June 9, 1996.	
	7919	Added June 9, 1996.	
	4.124a	8002	Criterion September 22, 1978.
8021		Criterion September 22, 1978; criterion October 1, 1961; criterion March 10, 1976; criterion March 1, 1989.	
8046		Added October 1, 1961; criterion March 10, 1976; criterion March 1, 1989.	
8100		Evaluation June 9, 1953.	
8540		Added October 15, 1991.	
8910		Added October 1, 1961.	
8911		Added October 1, 1961; evaluation September 9, 1975.	
8912		Added October 1, 1961.	
8913		Added October 1, 1961.	
8914		Added October 1, 1961; criterion September 9, 1975; criterion March 10, 1976.	
8910–8914		Evaluations September 9, 1975.	
4.125–4.132	All Diagnostic Codes under Mental Disorders October 1, 1961; except as to evaluation for Diagnostic Codes 9500 through 9511 September 9, 1975.
4.130	Re-designated from § 4.132 November 7, 1996.
4.130		9200	Removed February 3, 1988.
		9201	Criterion February 3, 1988.
		9202	Criterion February 3, 1988.
		9203	Criterion February 3, 1988.
		9204	Criterion February 3, 1988.
		9205	Criterion February 3, 1988; criterion November 7, 1996.
	9206	Criterion February 3, 1988; removed November 7, 1996.	
	9207	Criterion February 3, 1988; removed November 7, 1996.	
	9208	Criterion February 3, 1988; removed November 7, 1996.	
	9209	Criterion March 10, 1976; criterion February 3, 1988; removed November 7, 1996.	
	9210	Criterion March 10, 1976; criterion February 3, 1988; criterion November 7, 1996.	
	9211	Added November 7, 1996.	
	9300	Criterion March 10, 1976; criterion February 3, 1988; criterion November 7, 1996.	
	9301	Criterion March 10, 1976; criterion February 3, 1988; criterion November 7, 1996.	
9302	Criterion March 10, 1976; criterion February 3, 1988; removed November 7, 1996.		

APPENDIX A TO PART 4.—TABLE OF AMENDMENTS AND EFFECTIVE DATES SINCE 1946—Continued

Sec.	Diagnostic code No.	
	9303	Criterion March 10, 1976; criterion February 3, 1988; removed November 7, 1996.
	9304	Criterion March 10, 1976; criterion February 3, 1988; criterion November 7, 1996.
	9305	Criterion March 10, 1976; criterion February 3, 1988; criterion November 7, 1996.
	9306	Criterion March 10, 1976; criterion February 3, 1988; removed November 7, 1996.
	9307	Criterion March 10, 1976; criterion February 3, 1988; removed November 7, 1996.
	9308	Criterion March 10, 1976; criterion February 3, 1988; removed November 7, 1996.
	9309	Criterion March 10, 1976; criterion February 3, 1988; removed November 7, 1996.
	9310	Criterion March 10, 1976; criterion February 3, 1988; criterion November 7, 1996.
	9311	Criterion March 10, 1976; criterion February 3, 1988; removed November 7, 1996.
	9312	Added March 10, 1976; criterion February 3, 1988; criterion November 7, 1996.
	9313	Added March 10, 1976; removed February 3, 1988.
	9314	Added March 10, 1976; removed February 3, 1988.
	9315	Added March 10, 1976; criterion February 3, 1988; removed November 7, 1996.
	9316–9321	Added March 10, 1976; removed February 3, 1988.
	9322	Added March 10, 1976; criterion February 3, 1988; removed November 7, 1996.
	9323	Added March 10, 1976; removed February 3, 1988.
	9324	Added March 10, 1976; criterion February 3, 1988; removed November 7, 1996.
	9325	Added March 10, 1976; criterion February 3, 1988; removed November 7, 1996.
	9326	Added March 10, 1976; removed February 3, 1988; added November 7, 1996.
	9327	Added November 7, 1996.
	9400–9411	Evaluations February 3, 1988.
	9400	Criterion March 10, 1976; criterion February 3, 1988.
	9401	Criterion March 10, 1976; criterion February 3, 1988; removed November 7, 1996.
	9402	Criterion March 10, 1976; criterion February 3, 1988; removed November 7, 1996.
	9403	Criterion March 10, 1976; criterion February 3, 1988; criterion February 3, 1988; criterion November 7, 1996.
	9410	Added March 10, 1976; criterion February 3, 1988.
	9411	Added February 3, 1988.
	9412	Added November 7, 1996.
	9413	Added November 7, 1996.
	9416	Added November 7, 1996.
	9417	Added November 7, 1996.
	9421	Added November 7, 1996.
	9422	Added November 7, 1996.
	9423	Added November 7, 1996.
	9424	Added November 7, 1996.
	9425	Added November 7, 1996.
	9431	Added November 7, 1996.
	9432	Added November 7, 1996.
	9433	Added November 7, 1996.
	9434	Added November 7, 1996.
	9435	Added November 7, 1996.
	9440	Added November 7, 1996.
	9500	Criterion March 10, 1976; criterion February 3, 1988.
	9501	Criterion March 10, 1976; criterion February 3, 1988.
	9502	Criterion March 10, 1976; criterion February 3, 1988.
	9503	Removed March 10, 1976.
	9504	Criterion September 9, 1975; removed March 10, 1976.
	9505	Added March 10, 1976; criterion February 3, 1988.
	9506	Added March 10, 1976; criterion February 3, 1988.
	9507	Added March 10, 1976; criterion February 3, 1988.
	9508	Added March 10, 1976; criterion February 3, 1988.
	9509	Added March 10, 1976; criterion February 3, 1988.
	9510	Added March 10, 1976; criterion February 3, 1988.
	9511	Added March 10, 1976; criterion February 3, 1988.
	9520	Added November 7, 1996.
	9521	Added November 7, 1996.
4.132		Re-designated as § 4.130 November 7, 1996.
4.150	9900	Criterion September 22, 1978; criterion February 17, 1994.
	9901	Criterion February 17, 1994.
	9902	Criterion February 17, 1994.
	9903	Criterion February 17, 1994.
	9905	Criterion September 22, 1978; evaluation February 17, 1994.
	9910	Removed February 17, 1994.
	9913	Criterion February 17, 1994.
	9914	Added February 17, 1994.
	9915	Added February 17, 1994.
	9916	Added February 17, 1994.

■ 3. Appendix B to Part 4 is revised to read as follows:

APPENDIX B TO PART 4.—NUMERICAL INDEX OF DISABILITIES

Diagnostic Code No.	
THE MUSCULOSKELETAL SYSTEM Acute, Subacute, or Chronic Diseases	
5000	Osteomyelitis, acute, subacute, or chronic.
5001	Bones and Joints, tuberculosis.
5002	Arthritis, rheumatoid (atrophic).
5003	Arthritis, degenerative (hypertrophic or osteoarthritis).
5004	Arthritis, gonorrhoeal.
5005	Arthritis, pneumococcic.
5006	Arthritis, typhoid.
5007	Arthritis, syphilitic.
5008	Arthritis, streptococcic.
5009	Arthritis, other types (specify).
5010	Arthritis, due to trauma.
5011	Bones, caisson disease.
5012	Bones, new growths, malignant.
5013	Osteoporosis, with joint manifestations.
5014	Osteomalacia.
5015	Bones, new growths, benign.
5016	Osteitis deformans.
5017	Gout.
5018	Hydrarthrosis, intermittent.
5019	Bursitis.
5020	Synovitis.
5021	Myositis.
5022	Periostitis.
5023	Myositis ossificans.
5024	Tenosynovitis.
5025	Fibromyalgia.
Prosthetic Implants	
5051	Shoulder replacement (prosthesis).
5052	Elbow replacement (prosthesis).
5053	Wrist replacement (prosthesis).
5054	Hip replacement (prosthesis).
5055	Knee replacement (prosthesis).
5056	Ankle replacement (prosthesis).
Combination of Disabilities	
5104	Anatomical loss of one hand and loss of use of one foot.
5105	Anatomical loss of one foot and loss of use of one hand.
5106	Anatomical loss of both hands.
5107	Anatomical loss of both feet.
5108	Anatomical loss of one hand and one foot.
5109	Loss of use of both hands.
5110	Loss of use of both feet.
5111	Loss of use of one hand and one foot.
Amputations: Upper Extremity	
Arm amputation of:	
5120	Disarticulation.
5121	Above insertion of deltoid.
5122	Below insertion of deltoid.
Forearm amputation of:	
5123	Above insertion of pronator teres.
5124	Below insertion of pronator teres.
5125	Hand, loss of use of.
Multiple Finger Amputations	
5126	Five digits of one hand.
Four digits of one hand:	
5127	Thumb, index, long and ring.
5128	Thumb, index, long and little.
5129	Thumb, index, ring and little.

APPENDIX B TO PART 4.—NUMERICAL INDEX OF DISABILITIES—Continued

Diagnostic Code No.	
5130	Thumb, long, ring and little.
5131	Index, long, ring and little.
Three digits of one hand:	
5132	Thumb, index and long.
5133	Thumb, index and ring.
5134	Thumb, index and little.
5135	Thumb, long and ring.
5136	Thumb, long and little.
5137	Thumb, ring and little.
5138	Index, long and ring.
5139	Index, long and little.
5140	Index, ring and little.
5141	Long, ring and little.
Two digits of one hand:	
5142	Thumb and index.
5143	Thumb and long.
5144	Thumb and ring.
5145	Thumb and little.
5146	Index and long.
5147	Index and ring.
5148	Index and little.
5149	Long and ring.
5150	Long and little.
5151	Ring and little.
Single finger:	
5152	Thumb.
5153	Index finger.
5154	Long finger.
5155	Ring finger.
5156	Little finger.
Amputations: Lower Extremity	
Thigh amputation of:	
5160	Disarticulation.
5161	Upper third.
5162	Middle or lower thirds.
Leg amputation of:	
5163	With defective stump.
5164	Not improvable by prosthesis controlled by natural knee action.
5165	At a lower level, permitting prosthesis.
5166	Forefoot, proximal to metatarsal bones.
5167	Foot, loss of use of.
5170	Toes, all, without metatarsal loss.
5171	Toe, great.
5172	Toes, other than great, with removal of metatarsal head.
5173	Toes, three or more, without metatarsal involvement.
Shoulder and Arm	
5200	Scapulohumeral articulation, ankylosis.
5201	Arm, limitation of motion.
5202	Humerus, other impairment.
5203	Clavicle or scapula, impairment.
Elbow and Forearm	
5205	Elbow, ankylosis.
5206	Forearm, limitation of flexion.
5207	Forearm, limitation of extension.
5208	Forearm, flexion limited.
5209	Elbow, other impairment.
5210	Radius and ulna, nonunion.
5211	Ulna, impairment.
5212	Radius, impairment.
5213	Supination and pronation, impairment.

APPENDIX B TO PART 4.—NUMERICAL INDEX OF DISABILITIES—Continued

Diagnostic Code No.	
Wrist	
5214	Wrist, ankylosis.
5215	Wrist, limitation of motion.
Limitation of Motion	
Multiple Digits: Unfavorable Ankylosis:	
5216	Five digits of one hand.
5217	Four digits of one hand.
5218	Three digits of one hand.
5219	Two digits of one hand.
Multiple Digits: Favorable Ankylosis:	
5220	Five digits of one hand.
5221	Four digits of one hand.
5222	Three digits of one hand.
5223	Two digits of one hand.
Ankylosis of Individual Digits:	
5224	Thumb.
5225	Index finger.
5226	Long finger.
5227	Ring or little finger.
Limitation of Motion of Individual Digits:	
5228	Thumb.
5229	Index or long finger.
5230	Ring or little finger.
Spine	
5235	Vertebral fracture or dislocation.
5236	Sacroiliac injury and weakness.
5237	Lumbosacral or cervical strain.
5238	Spinal stenosis.
5239	Spondylolisthesis or segmental instability.
5240	Ankylosing spondylitis.
5241	Spinal fusion.
5242	Degenerative arthritis.
5243	Intervertebral disc syndrome.
Hip and Thigh	
5250	Hip, ankylosis.
5251	Thigh, limitation of extension.
5252	Thigh, limitation of flexion.
5253	Thigh, impairment.
5254	Hip, flail joint.
5255	Femur, impairment.
Knee and Leg	
5256	Knee, ankylosis.
5257	Knee, other impairment.
5258	Cartilage, semilunar, dislocated.
5259	Cartilage, semilunar, removal.
5260	Leg, limitation of flexion.
5261	Leg, limitation of extension.
5262	Tibia and fibula, impairment.
5263	Genu recurvatum.
Ankle	
5270	Ankle, ankylosis.
5271	Ankle, limited motion.
5272	Subastragalar or tarsal joint, ankylosis.
5273	Os calcis or astragalus, malunion.
5274	Astragalectomy.

APPENDIX B TO PART 4.—NUMERICAL INDEX OF DISABILITIES—Continued

Diagnostic Code No.	
Shortening of the Lower Extremity	
5275	Bones, of the lower extremity
The Foot	
5276	Flatfoot, acquired.
5277	Weak foot, bilateral.
5278	Claw foot (pes cavus), acquired.
5279	Metatarsalgia, anterior (Morton's disease).
5280	Hallux valgus.
5281	Hallux rigidus.
5282	Hammer toe.
5283	Tarsal or metatarsal bones.
5284	Foot injuries, other.
The Skull	
5296	Loss of part of.
The Ribs	
5297	Removal of.
The Coccyx	
5298	Removal of.
MUSCLE INJURIES	
Shoulder Girdle and Arm	
5301	Group I Function: Upward rotation of scapula.
5302	Group II Function: Depression of arm.
5303	Group III Function: Elevation and abduction of arm.
5304	Group IV Function: Stabilization of shoulder.
5305	Group V Function: Elbow supination.
5306	Group VI Function: Extension of elbow.
Forearm and Hand	
5307	Group VII Function: Flexion of wrist and fingers.
5308	Group VIII Function: Extension of wrist, fingers, thumb.
5309	Group IX Function: Forearm muscles.
Foot and Leg	
5310	Group X Function: Movement of forefoot and toes.
5311	Group XI Function: Propulsion of foot.
5312	Group XII Function: Dorsiflexion.
Pelvic Girdle and Thigh	
5313	Group XIII Function: Extension of hip and flexion of knee.
5314	Group XIV Function: Extension of knee.
5315	Group XV Function: Adduction of hip.
5316	Group XVI Function: Flexion of hip.
5317	Group XVII Function: Extension of hip.
5318	Group XVIII Function: Outward rotation of thigh.
Torso and Neck	
5319	Group XIX Function: Abdominal wall and lower thorax.
5320	Group XX Function: Postural support of body.
5321	Group XXI Function: Respiration.
5322	Group XXII Function: Rotary and forward movements, head.
5323	Group XXIII Function: Movements of head.
Miscellaneous	
5324	Diaphragm, rupture.
5325	Muscle injury, facial muscles.
5326	Muscle hernia.
5327	Muscle, neoplasm of, malignant.

APPENDIX B TO PART 4.—NUMERICAL INDEX OF DISABILITIES—Continued

Diagnostic Code No.	
5328	Muscle, neoplasm of, benign.
5329	Sarcoma, soft tissue.

THE EYE
Diseases of the Eye

6000	Uveitis.
6001	Keratitis.
6002	Scleritis.
6003	Iritis.
6004	Cyclitis.
6005	Choroiditis.
6006	Retinitis.
6007	Hemorrhage, intra-ocular, recent.
6008	Retina, detachment.
6009	Eye, injury of, unhealed.
6010	Eye, tuberculosis.
6011	Retina, localized scars.
6012	Glaucoma, congestive or inflammatory.
6013	Glaucoma, simple, primary, noncongestive.
6014	New growths, malignant, eyeball.
6015	New growths, benign, eyeball and adnexa.
6016	Nystagmus, central.
6017	Conjunctivitis, trachomatous, chronic.
6018	Conjunctivitis, other, chronic.
6019	Ptosis unilateral or bilateral.
6020	Ectropion.
6021	Entropion.
6022	Lagophthalmos.
6023	Eyebrows, loss.
6024	Eyelashes, loss.
6025	Epiphora.
6026	Neuritis, optic.
6027	Cataract, traumatic.
6028	Cataract, senile, and others.
6029	Aphakia.
6030	Accommodation, paralysis.
6031	Dacryocystitis.
6032	Eyelids, loss of portion.
6033	Lens, crystalline, dislocation.
6034	Pterygium.
6035	Keratoconus.

Impairment of Central Visual Acuity

6061	Anatomical loss both eyes.
6062	Blindness, both eyes, only light perception.

Anatomical loss of 1 eye:

6063	Other eye 5/200 (1.5/60).
6064	Other eye 10/200 (3/60).
6064	Other eye 15/200 (4.5/60).
6064	Other eye 20/200 (6/60).
6065	Other eye 20/100 (6/30).
6065	Other eye 20/70 (6/21).
6065	Other eye 20/50 (6/15).
6066	Other eye 20/40 (6/12).

Blindness in 1 eye, only light perception:

6067	Other eye 5/200 (1.5/60).
6068	Other eye 10/200 (3/60).
6068	Other eye 15/200 (4.5/60).
6068	Other eye 20/200 (6/60).
6069	Other eye 20/100 (6/30).
6069	Other eye 20/70 (6/21).
6069	Other eye 20/50 (6/15).
6070	Other eye 20/40 (6/12).

Vision in 1 eye 5/200 (1.5/60):

6071	Other eye 5/200 (1.5/60).
6072	Other eye 10/200 (3/60).
6072	Other eye 15/200 (4.5/60).

APPENDIX B TO PART 4.—NUMERICAL INDEX OF DISABILITIES—Continued

Diagnostic Code No.	
6072	Other eye 20/200 (6/60).
6073	Other eye 20/100 (6/30).
6073	Other eye 20/70 (6/21).
6073	Other eye 20/50 (6/15).
6074	Other eye 20/40 (6/12).
Vision in 1 eye 10/200 (3/60):	
6075	Other eye 10/200 (3/60).
6075	Other eye 15/200 (4.5/60).
6075	Other eye 20/200 (6/60).
6076	Other eye 20/100 (6/30).
6076	Other eye 20/70 (6/21).
6076	Other eye 20/50 (6/15).
6077	Other eye 20/40 (6/12).
Vision in 1 eye 15/200 (4.5/60):	
6075	Other eye 15/200 (4.5/60).
6075	Other eye 20/200 (6/60).
6076	Other eye 20/100 (6/30).
6076	Other eye 20/70 (6/21).
6076	Other eye 20/50 (6/15).
6077	Other eye 20/40 (6/12).
Vision in 1 eye 20/200 (6/60):	
6075	Other eye 20/200 (6/60).
6076	Other eye 20/100 (6/30).
6076	Other eye 20/70 (6/21).
6076	Other eye 20/50 (6/15).
6077	Other eye 20/40 (6/12).
Vision in 1 eye 20/100 (6/30):	
6078	Other eye 20/100 (6/30).
6078	Other eye 20/70 (6/21).
6078	Other eye 20/50 (6/15).
6079	Other eye 20/40 (6/12).
Vision in 1 eye 20/70 (6/21):	
6078	Other eye 20/70 (6/21).
6078	Other eye 20/50 (6/15).
6079	Other eye 20/40 (6/12).
Vision in 1 eye 20/50 (6/15):	
6078	Other eye 20/50 (6/15).
6079	Other eye 20/40 (6/12).
Impairment of Field Vision:	
6080	Field vision, impairment.
6081	Scotoma.
Impairment of Muscle Function:	
6090	Diplopia.
6091	Symblepharon.
6092	Diplopia, limited muscle function.
THE EAR	
6200	Chronic suppurative otitis media.
6201	Chronic nonsuppurative otitis media.
6202	Otosclerosis.
6204	Peripheral vestibular disorders.
6205	Meniere's syndrome.
6207	Loss of auricle.
6208	Malignant neoplasm.
6209	Benign neoplasm.
6210	Chronic otitis externa.
6211	Tympanic membrane.
6260	Tinnitus, recurrent.
OTHER SENSE ORGANS	
6275	Smell, complete loss.
6276	Taste, complete loss.

APPENDIX B TO PART 4.—NUMERICAL INDEX OF DISABILITIES—Continued

Diagnostic Code No.	
INFECTIOUS DISEASES, IMMUNE DISORDERS AND NUTRITIONAL DEFICIENCIES	
6300	Cholera, Asiatic.
6301	Visceral Leishmaniasis.
6302	Leprosy (Hansen's Disease).
6304	Malaria.
6305	Lymphatic Filariasis.
6306	Bartonellosis.
6307	Plague.
6308	Relapsing fever.
6309	Rheumatic fever.
6310	Syphilis.
6311	Tuberculosis, miliary.
6313	Avitaminosis.
6314	Beriberi.
6315	Pellagra.
6316	Brucellosis.
6317	Typhus, scrub.
6318	Melioidosis.
6319	Lyme disease.
6320	Parasitic diseases.
6350	Lupus erythematosus.
6351	HIV-Related Illness.
6354	Chronic Fatigue Syndrome (CFS).
THE RESPIRATORY SYSTEM	
Nose and Throat	
6502	Septum, nasal, deviation.
6504	Nose, loss of part of, or scars.
6510	Sinusitis, pansinusitis, chronic.
6511	Sinusitis, ethmoid, chronic.
6512	Sinusitis, frontal, chronic.
6513	Sinusitis, maxillary, chronic.
6514	Sinusitis, sphenoid, chronic.
6515	Laryngitis, tuberculous.
6516	Laryngitis, chronic.
6518	Laryngectomy, total.
6519	Aphonia, complete organic.
6520	Larynx, stenosis of.
6521	Pharynx, injuries to.
6522	Allergic or vasomotor rhinitis.
6523	Bacterial rhinitis.
6524	Granulomatous rhinitis.
Trachea and Bronchi	
6600	Bronchitis, chronic.
6601	Bronchiectasis.
6602	Asthma, bronchial.
6603	Emphysema, pulmonary.
6604	Chronic obstructive pulmonary disease.
Lungs and Pleura Tuberculosis	
Ratings for Pulmonary Tuberculosis (Chronic) Entitled on August 19, 1968:	
6701	Active, far advanced.
6702	Active, moderately advanced.
6703	Active, minimal.
6704	Active, advancement unspecified.
6721	Inactive, far advanced.
6722	Inactive, moderately advanced.
6723	Inactive, minimal.
6724	Inactive, advancement unspecified.
Ratings for Pulmonary Tuberculosis Initially Evaluated After August 19, 1968:	
6730	Chronic, active.
6731	Chronic, inactive.
6732	Pleurisy, active or inactive.
Nontuberculous Diseases	
6817	Pulmonary Vascular Disease.

APPENDIX B TO PART 4.—NUMERICAL INDEX OF DISABILITIES—Continued

Diagnostic Code No.	
6819	Neoplasms, malignant.
6820	Neoplasms, benign.
Bacterial Infections of the Lung	
6822	Actinomycosis.
6823	Nocardiosis.
6824	Chronic lung abscess.
Interstitial Lung Disease	
6825	Fibrosis of lung, diffuse interstitial.
6826	Desquamative interstitial pneumonitis.
6827	Pulmonary alveolar proteinosis.
6828	Eosinophilic granuloma.
6829	Drug-induced, pneumonitis & fibrosis.
6830	Radiation-induced, pneumonitis & fibrosis.
6831	Hypersensitivity pneumonitis.
6832	Pneumoconiosis.
6833	Asbestosis.
Mycotic Lung Disease	
6834	Histoplasmosis.
6835	Coccidioidomycosis.
6836	Blastomycosis.
6837	Cryptococcosis.
6838	Aspergillosis.
6839	Mucormycosis.
Restrictive Lung Disease	
6840	Diaphragm paralysis or paresis.
6841	Spinal cord injury with respiratory insufficiency.
6842	Kyphoscoliosis, pectus excavatum/carinatum.
6843	Traumatic chest wall defect.
6844	Post-surgical residual.
6845	Pleural effusion or fibrosis.
6846	Sarcoidosis.
6847	Sleep Apnea Syndromes.
THE CARDIOVASCULAR SYSTEM	
Diseases of the Heart	
7000	Valvular heart disease.
7001	Endocarditis.
7002	Pericarditis.
7003	Pericardial adhesions.
7004	Syphilitic heart disease.
7005	Arteriosclerotic heart disease.
7006	Myocardial infarction.
7007	Hypertensive heart disease.
7008	Hyperthyroid heart disease.
7010	Supraventricular arrhythmias.
7011	Ventricular arrhythmias.
7015	Atrioventricular block.
7016	Heart valve replacement.
7017	Coronary bypass surgery.
7018	Implantable cardiac pacemakers.
7019	Cardiac transplantation.
7020	Cardiomyopathy.
Diseases of the Arteries and Veins	
7101	Hypertensive vascular disease.
7110	Aortic aneurysm.
7111	Aneurysm, large artery.
7112	Aneurysm, small artery.
7113	Arteriovenous fistula, traumatic.
7114	Arteriosclerosis obliterans.
7115	Thrombo-angiitis obliterans (Buerger's Disease).
7117	Raynaud's syndrome.
7118	Angioneurotic edema.

APPENDIX B TO PART 4.—NUMERICAL INDEX OF DISABILITIES—Continued

Diagnostic Code No.	
7119	Erythromelalgia.
7120	Varicose veins.
7121	Post-phlebitic syndrome.
7122	Cold injury residuals.
7123	Soft tissue sarcoma.

THE DIGESTIVE SYSTEM

7200	Mouth, injuries.
7201	Lips, injuries.
7202	Tongue, loss.
7203	Esophagus, stricture.
7204	Esophagus, spasm.
7205	Esophagus, diverticulum.
7301	Peritoneum, adhesions.
7304	Ulcer, gastric.
7305	Ulcer, duodenal.
7306	Ulcer, marginal.
7307	Gastritis, hypertrophic.
7308	Postgastrectomy syndromes.
7309	Stomach, stenosis.
7310	Stomach, injury of, residuals.
7311	Liver, injury of, residuals.
7312	Liver, cirrhosis.
7314	Cholecystitis, chronic.
7315	Cholelithiasis, chronic.
7316	Cholangitis, chronic.
7317	Gall bladder, injury.
7318	Gall bladder, removal.
7319	Colon, irritable syndrome.
7321	Amebiasis.
7322	Dysentery, bacillary.
7323	Colitis, ulcerative.
7324	Distomiasis, intestinal or hepatic.
7325	Enteritis, chronic.
7326	Enterocolitis, chronic.
7327	Diverticulitis.
7328	Intestine, small, resection.
7329	Intestine, large, resection.
7330	Intestine, fistula.
7331	Peritonitis.
7332	Rectum & anus, impairment.
7333	Rectum & anus, stricture.
7334	Rectum, prolapse.
7335	Ano, fistula in.
7336	Hemorrhoids.
7337	Pruritus ani.
7338	Hernia, inguinal.
7339	Hernia, ventral, postoperative.
7340	Hernia, femoral.
7342	Visceroptosis.
7343	Neoplasms, malignant.
7344	Neoplasms, benign.
7345	Liver disease, chronic, without cirrhosis.
7346	Hernia, hiatal.
7347	Pancreatitis.
7348	Vagotomy.
7351	Liver transplant.
7354	Hepatitis C.

THE GENITOURINARY SYSTEM

7500	Kidney, removal.
7501	Kidney, abscess.
7502	Nephritis, chronic.
7504	Pyelonephritis, chronic.
7505	Kidney, tuberculosis.
7507	Nephrosclerosis, arteriolar.
7508	Nephrolithiasis.
7509	Hydronephrosis.
7510	Ureterolithiasis.
7511	Ureter, stricture.

APPENDIX B TO PART 4.—NUMERICAL INDEX OF DISABILITIES—Continued

Diagnostic Code No.	
7512	Cystitis, chronic.
7515	Bladder, calculus.
7516	Bladder, fistula.
7517	Bladder, injury.
7518	Urethra, stricture.
7519	Urethra, fistula.
7520	Penis, removal of half or more.
7521	Penis, removal of glans.
7522	Penis, deformity, with loss of erectile power.
7523	Testis, atrophy, complete.
7524	Testis, removal.
7525	Epididymo-orchitis, chronic only.
7527	Prostate gland.
7528	Malignant neoplasms.
7529	Benign neoplasms.
7530	Renal disease, chronic.
7531	Kidney transplant.
7532	Renal tubular disorders.
7533	Kidneys, cystic diseases.
7534	Atherosclerotic renal disease.
7535	Toxic nephropathy.
7536	Glomerulonephritis.
7537	Interstitial nephritis.
7538	Papillary necrosis.
7539	Renal amyloid disease.
7540	Disseminated intravascular coagulation.
7541	Renal involvement in systemic diseases.
7542	Neurogenic bladder.

GYNECOLOGICAL CONDITIONS AND DISORDERS OF THE BREAST

7610	Vulva, disease or injury.
7611	Vagina, disease or injury.
7612	Cervix, disease or injury.
7613	Uterus, disease or injury.
7614	Fallopian tube, disease or injury.
7615	Ovary, disease or injury.
7617	Uterus and both ovaries, removal.
7618	Uterus, removal.
7619	Ovary, removal.
7620	Ovaries, atrophy of both.
7621	Uterus, prolapse.
7622	Uterus, displacement.
7623	Pregnancy, surgical complications.
7624	Fistula, rectovaginal.
7625	Fistula, urethrovaginal.
7626	Breast, surgery.
7627	Malignant neoplasms.
7628	Benign neoplasms.
7629	Endometriosis.

THE HEMIC AND LYMPHATIC SYSTEMS

7700	Anemia.
7702	Agranulocytosis, acute.
7703	Leukemia.
7704	Polycythemia vera.
7705	Thrombocytopenia.
7706	Splenectomy.
7707	Spleen, injury of, healed.
7709	Hodgkin's disease.
7710	Adenitis, tuberculous.
7714	Sickle cell anemia.
7715	Non-Hodgkin's lymphoma.
7716	Aplastic anemia.

THE SKIN

7800	Disfigurement of, head, face or neck.
7801	Scars, deep, other than head, face or neck.
7802	Scars, superficial, other than head, face, or neck.
7803	Scars, superficial, unstable.

APPENDIX B TO PART 4.—NUMERICAL INDEX OF DISABILITIES—Continued

Diagnostic Code No.	
7804	Scars, superficial, painful.
7805	Scars, other.
7806	Dermatitis or eczema.
7807	Leishmaniasis, American (New World).
7808	Leishmaniasis, Old World.
7809	Lupus erythematosus, discoid.
7811	Tuberculosis luposa (lupus vulgaris).
7813	Dermatophytosis.
7815	Bullous disorders.
7816	Psoriasis.
7817	Exfoliative dermatitis.
7818	Malignant skin neoplasms.
7819	Benign skin neoplasms.
7820	Infections of the skin.
7821	Cutaneous manifestations of collagen-vascular diseases.
7822	Papulosquamous disorders.
7823	Vitiligo.
7824	Keratinization, diseases.
7825	Urticaria.
7826	Vasculitis, primary cutaneous.
7827	Erythema multiforme.
7828	Acne.
7829	Chloracne.
7830	Scarring alopecia.
7831	Alopecia areata.
7832	Hyperhidrosis.
7833	Malignant melanoma.

THE ENDOCRINE SYSTEM

7900	Hyperthyroidism.
7901	Thyroid gland, toxic adenoma.
7902	Thyroid gland, nontoxic adenoma.
7903	Hypothyroidism.
7904	Hyperparathyroidism.
7905	Hypoparathyroidism.
7907	Cushing's syndrome.
7908	Acromegaly.
7909	Diabetes insipidus.
7911	Addison's disease.
7912	Pluriglandular syndrome.
7913	Diabetes mellitus.
7914	Malignant neoplasm.
7915	Benign neoplasm.
7916	Hyperpituitarism.
7917	Hyperaldosteronism.
7918	Pheochromocytoma.
7919	C-cell hyperplasia, thyroid.

NEUROLOGICAL CONDITIONS AND CONVULSIVE DISORDERS
Organic Diseases of the Central Nervous System

8000	Encephalitis, epidemic, chronic.
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Brain, New Growth of

8002	Malignant.
8003	Benign.
8004	Paralysis agitans.
8005	Bulbar palsy.
8007	Brain, vessels, embolism.
8008	Brain, vessels, thrombosis.
8009	Brain, vessels, hemorrhage.
8010	Myelitis.
8011	Poliomyelitis, anterior.
8012	Hematomyelia.
8013	Syphilis, cerebrospinal.
8014	Syphilis, meningovascular.
8015	Tabes dorsalis.
8017	Amyotrophic lateral sclerosis.
8018	Multiple sclerosis.
8019	Meningitis, cerebrospinal, epidemic.

APPENDIX B TO PART 4.—NUMERICAL INDEX OF DISABILITIES—Continued

Diagnostic Code No.	
8020	Brain, abscess.
Spinal Cord, New Growths	
8021	Malignant.
8022	Benign.
8023	Progressive muscular atrophy.
8024	Syringomyelia.
8025	Myasthenia gravis.
8045	Brain disease due to trauma.
8046	Cerebral arteriosclerosis.
Miscellaneous Diseases	
8100	Migraine
8103	Tic, convulsive.
8104	Paramyoclonus multiplex.
8105	Chorea, Sydenham's.
8106	Chorea, Huntington's.
8107	Athetosis, acquired.
8108	Narcolepsy.
The Cranial Nerves	
8205	Fifth (trigeminal), paralysis.
8207	Seventh (facial), paralysis.
8209	Ninth (glossopharyngeal), paralysis.
8210	Tenth (pneumogastric, vagus), paralysis.
8211	Eleventh (spinal accessory, external branch), paralysis.
8212	Twelfth (hypoglossal), paralysis.
8305	Neuritis, fifth cranial nerve.
8307	Neuritis, seventh cranial nerve.
8309	Neuritis, ninth cranial nerve.
8310	Neuritis, tenth cranial nerve.
8311	Neuritis, eleventh cranial nerve.
8312	Neuritis, twelfth cranial nerve.
8405	Neuralgia, fifth cranial nerve.
8407	Neuralgia, seventh cranial nerve.
8409	Neuralgia, ninth cranial nerve.
8410	Neuralgia, tenth cranial nerve.
8411	Neuralgia, eleventh cranial nerve.
8412	Neuralgia, twelfth cranial nerve.
Peripheral Nerves	
8510	Upper radicular group, paralysis.
8511	Middle radicular group, paralysis.
8512	Lower radicular group, paralysis.
8513	All radicular groups, paralysis.
8514	Musculospiral nerve (radial), paralysis.
8515	Median nerve, paralysis.
8516	Ulnar nerve, paralysis.
8517	Musculocutaneous nerve, paralysis.
8518	Circumflex nerve, paralysis.
8519	Long thoracic nerve, paralysis.
8520	Sciatic nerve, paralysis.
8521	External popliteal nerve (common peroneal), paralysis.
8522	Musculocutaneous nerve (superficial peroneal), paralysis.
8523	Anterior tibial nerve (deep peroneal), paralysis.
8524	Internal popliteal nerve (tibial), paralysis.
8525	Posterior tibial nerve, paralysis.
8526	Anterior crural nerve (femoral), paralysis.
8527	Internal saphenous nerve, paralysis.
8528	Obturator nerve, paralysis.
8529	External cutaneous nerve of thigh, paralysis.
8530	Ilio-inguinal nerve, paralysis.
8540	Soft-tissue sarcoma (Neurogenic origin).
8610	Neuritis, upper radicular group.
8611	Neuritis, middle radicular group.
8612	Neuritis, lower radicular group.
8613	Neuritis, all radicular group.
8614	Neuritis, musculospiral (radial) nerve.

APPENDIX B TO PART 4.—NUMERICAL INDEX OF DISABILITIES—Continued

Diagnostic Code No.	
8615	Neuritis, median nerve.
8616	Neuritis, ulnar nerve.
8617	Neuritis, musculocutaneous nerve.
8618	Neuritis, circumflex nerve.
8619	Neuritis, long thoracic nerve.
8620	Neuritis, sciatic nerve.
8621	Neuritis, external popliteal (common peroneal) nerve.
8622	Neuritis, musculocutaneous (superficial peroneal) nerve.
8623	Neuritis, anterior tibial (deep peroneal) nerve.
8624	Neuritis, internal popliteal (tibial) nerve.
8625	Neuritis, posterior tibial nerve.
8626	Neuritis, anterior crural (femoral) nerve.
8627	Neuritis, internal saphenous nerve.
8628	Neuritis, obturator nerve.
8629	Neuritis, external cutaneous nerve of thigh.
8630	Neuritis, ilio-inguinal nerve.
8710	Neuralgia, upper radicular group.
8711	Neuralgia, middle radicular group.
8712	Neuralgia, lower radicular group.
8713	Neuralgia, all radicular groups.
8714	Neuralgia, musculospiral nerve (radial).
8715	Neuralgia, median nerve.
8716	Neuralgia, ulnar nerve.
8717	Neuralgia, musculocutaneous nerve.
8718	Neuralgia, circumflex nerve.
8719	Neuralgia, long thoracic nerve.
8720	Neuralgia, sciatic nerve.
8721	Neuralgia, external popliteal nerve (common peroneal).
8722	Neuralgia, musculocutaneous nerve (superficial peroneal).
8723	Neuralgia, anterior tibial nerve (deep peroneal).
8724	Neuralgia, internal popliteal nerve (tibial).
8725	Neuralgia, posterior tibial nerve.
8726	Neuralgia, anterior crural nerve (femoral).
8727	Neuralgia, internal saphenous nerve.
8728	Neuralgia, obturator nerve.
8729	Neuralgia, external cutaneous nerve of thigh.
8730	Neuralgia, ilio-inguinal nerve.
The Epilepsies	
8910	Grand mal.
8911	Petit mal.
8912	Jacksonian and focal motor or sensory.
8913	Diencephalic.
8914	Psychomotor.
Mental Disorders	
9201	Schizophrenia, disorganized type.
9202	Schizophrenia, catatonic type.
9203	Schizophrenia, paranoid type.
9204	Schizophrenia, undifferentiated type.
9205	Schizophrenia, residual type.
9208	Delusional disorder.
9210	Psychotic disorder.
9211	Schizoaffective disorder.
Delirium, Dementia, Amnestic and Other Cognitive Disorders	
9300	Delirium.
9301	Dementia due to infection.
9304	Dementia due to head trauma.
9305	Vascular dementia.
9310	Dementia of unknown etiology.
9312	Dementia of Alzheimer's type.
9326	Dementia due to other medical conditions.
9327	Organic mental disorder.
Anxiety Disorders	
9400	Generalized anxiety disorder.
9403	Specific (simple) phobia.

APPENDIX B TO PART 4.—NUMERICAL INDEX OF DISABILITIES—Continued

Diagnostic Code No.	
9404	Obsessive compulsive disorder.
9410	Other and unspecified neurosis.
9411	Post-traumatic stress disorder.
9412	Panic disorder.
9413	Anxiety disorder, not otherwise specified.
Dissociative Disorder	
9416	Amnesia, fugue, identity disorder.
9417	Depersonalization disorder.
Somatoform Disorders	
9421	Somatization disorder.
9422	Pain disorder.
9423	Undifferentiated somatoform disorder.
9424	Conversion disorder.
9425	Hypochondriasis.
Mood Disorders	
9431	Cyclothymic disorder.
9432	Bipolar disorder.
9433	Dysthymic disorder.
9434	Major depressive disorder.
9435	Mood disorder not otherwise specified.
Chronic Adjustment Disorder	
9440	Chronic adjustment disorder.
Eating Disorders	
9520	Anorexia nervosa.
9521	Bulimia nervosa.
DENTAL AND ORAL CONDITIONS	
9900	Maxilla or mandible, chronic.
9901	Mandible, loss of, complete.
9902	Mandible, loss of approximately one-half.
9903	Mandible, nonunion.
9904	Mandible, malunion.
9905	Temporomandibular articulation, limited motion.
9906	Ramus, loss of whole or part.
9907	Ramus, loss of less than one-half.
9908	Condylod process.
9909	Coronoid process.
9911	Hard palate, loss of half or more.
9912	Hard palate, loss of less than half.
9913	Teeth, loss of.
9914	Maxilla, loss of more than half.
9915	Maxilla, loss of half or less.
9916	Maxilla, malunion or nonunion of.

■ 4. Appendix C to part 4 is revised to read as follows:

APPENDIX C TO PART 4.—ALPHABETICAL INDEX OF DISABILITIES

	Diagnostic code No.
Abscess:	
Brain	8020
Kidney	7501
Lung	6824
Acne	7828
Acromegaly	7908
Actinomycosis	6822

APPENDIX C TO PART 4.—ALPHABETICAL INDEX OF DISABILITIES—Continued

	Diagnostic code No.
Addison's disease	7911
Agranulocytosis	7702
Alopecia areata	7831
Amebiasis	7321
Amputation:	
Arm:	
Disarticulation	5120
Above insertion of deltoid	5121
Below insertion of deltoid	5122
Digits, five of one hand	5126
Digits, four of one hand:	
Thumb, index, long and ring	5127
Thumb, index, long and little	5128
Thumb, index, ring and little	5129
Thumb, long, ring and little	5130
Index, long, ring and little	5131
Digits, three of one hand:	
Thumb, index and long	5132
Thumb, index and ring	5133
Thumb, index and little	5134
Thumb, long and ring	5135
Thumb, long and little	5136
Thumb, ring and little	5137
Index, long and ring	5138
Index, long and little	5139
Index, ring and little	5140
Long, ring and little	5141
Digits, two of one hand:	
Thumb and index	5142
Thumb and long	5143
Thumb and ring	5144
Thumb and little	5145
Index and long	5146
Index and ring	5147
Index and little	5148
Long and ring	5149
Long and little	5150
Ring and little	5151
Single finger:	
Thumb	5152
Index finger	5153
Long finger	5154
Ring finger	5155
Little finger	5156
Forearm:	
Above insertion of pronator teres	5123
Below insertion of pronator teres	5124
Leg:	
With defective stump	5163
Not improvable by prosthesis controlled by natural knee action	5164
At a lower level, permitting prosthesis	5165
Forefoot, proximal to metatarsal bones	5166
Toes, all, without metatarsal loss	5170
Toe, great	5171
Toes, other than great, with removal of metatarsal head	5172
Toes, three or more, without metatarsal involvement	5173
Thigh:	
Disarticulation	5160
Upper third	5161
Middle or lower thirds	5162
Amyotrophic lateral sclerosis	8017
Anatomical loss of:	
Both eyes	6061
One eye, with visual acuity of other eye:	
5/200 (1.5/60)	6063
10/200 (3/60); 15/200 (4.5/60); 20/200 (6/60)	6064
20/100 (6/30); 20/70 (6/21); 20/50 (6/15)	6065
20/40 (6/12)	6066
Both feet	5107
Both hands	5106
One hand and one foot	5108

APPENDIX C TO PART 4.—ALPHABETICAL INDEX OF DISABILITIES—Continued

	Diagnostic code No.
One foot and loss of use of one hand	5105
One hand and loss of use of one foot	5104
Anemia	7700
Aneurysm:	
Aortic	7110
Large artery	7111
Small artery	7112
Angioneurotic edema	7118
Ankylosis:	
Ankle	5270
Digits, individual:	
Thumb	5224
Index finger	5225
Long finger	5226
Ring or little finger	5227
Elbow	5205
Hand	
Favorable:	
Five digits of one hand	5220
Four digits of one hand	5221
Three digits of one hand	5222
Two digits of one hand	5223
Unfavorable:	
Five digits of one hand	5216
Four digits of one hand	5217
Three digits of one hand	5218
Two digits of one hand	5219
Hip	5250
Knee	5256
Scapulohumeral articulation	5200
Subastragalar or tarsal joint	5272
Wrist	5214
Ankylosing spondylitis	5240
Aphakia	6029
Aphonia, organic	6519
Aplastic anemia	7716
Arrhythmia:	
Supraventricular	7010
Ventricular	7011
Arteriosclerosis obliterans	7114
Arteriosclerotic heart disease	7005
Arteriovenous fistula	7113
Arthritis:	
Degenerative (hypertrophic or osteoarthritis)	5003
Due to trauma	5010
Gonorrheal	5004
Other types	5009
Pneumococcal	5005
Rheumatoid (atrophic)	5002
Streptococcal	5008
Syphilitic	5007
Typhoid	5006
Asbestosis	6833
Aspergillosis	6838
Asthma, bronchial	6602
Astragalectomy	5274
Atherosclerotic renal disease	7534
Athetosis	8107
Atrioventricular block	7015
Avitaminosis	6313
Bartonellosis	6306
Beriberi	6314
Bladder:	
Calculus in	7515
Fistula in	7516
Injury of	7517
Neurogenic	7542
Blastomycosis	6836
Blindness: <i>see also</i> Vision and Anatomical Loss	
Both eyes, only light perception	6062
One eye, only light perception and other eye:	
5/200 (1.5/60)	6067

APPENDIX C TO PART 4.—ALPHABETICAL INDEX OF DISABILITIES—Continued

	Diagnostic code No.
10/200 (3/60); 15/200 (4.5/60); 20/200 (6/60)	6068
20/100 (6/30); 20/70 (6/21); 20/50 (6/15)	6069
20/40 (6/12)	6070
Bones:	
Caisson disease	5011
New growths, benign	5015
New growths, malignant	5012
Shortening of the lower extremity	5275
Brain:	
Abscess	8020
Disease due to trauma	8045
Breast surgery	7626
Bronchiectasis	6601
Bronchitis	6600
Brucellosis	6316
Buerger's disease	7115
Bulbar palsy	8005
Bullous disorders	7815
Bursitis	5019
Cardiac:	
Pacemakers, implantable	7018
Transplantation	7019
Cardiomyopathy	7020
C-cell hyperplasia, thyroid	7919
Cataract:	
Senile and others	6028
Traumatic	6027
Cerebral arteriosclerosis	8046
Cervical strain	5237
Cervix disease or injury	7612
Chorea:	
Huntington's	8106
Sydenham's	8105
Chloracne	7829
Cholangitis, chronic	7316
Cholecystitis, chronic	7314
Cholelithiasis, chronic	7315
Cholera, Asiatic	6300
Choroiditis	6005
Chronic Fatigue Syndrome (CFS)	6354
Chronic lung abscess	6824
Chronic obstructive pulmonary disease	6604
Coccidioidomycosis	6835
Cold injury residuals	7122
Colitis, ulcerative	7323
Conjunctivitis:	
Trachomatous	6017
Other	6018
Coronary bypass surgery	7017
Cryptococcosis	6837
Cushing's syndrome	7907
Cutaneous manifestations of collagen-vascular diseases	7821
Cyclitis	6004
Cystitis, chronic	7512
Dacryocystitis	6031
Dermatitis or eczema	7806
Dermatophytosis	7813
Desquamative interstitial pneumonitis	6826
Diabetes:	
Insipidus	7909
Mellitus	7913
Diaphragm:	
Paralysis or paresis	6840
Rupture	5324
Diplopia	6090
Diplopia, limited muscle function, eye	6092
Disease:	
Addison's	7911
Buerger's	7115
Chronic obstructive pulmonary disease	6604
Hodgkin's	7709

APPENDIX C TO PART 4.—ALPHABETICAL INDEX OF DISABILITIES—Continued

	Diagnostic code No.
Leprosy (Hansen's)	6302
Lyme	6319
Morton's	5279
Parasitic	6320
Disfigurement of, head, face or neck	7800
Dislocated:	
Cartilage, semilunar	5258
Lens, crystalline	6033
Disseminated intravascular coagulation	7540
Distomiasis, intestinal or hepatic	7324
Diverticulitis	7327
Dysentery, bacillary	7322
Ectropion	6020
Embolism, brain	8007
Emphysema, pulmonary	6603
Encephalitis, epidemic, chronic	8000
Endocarditis	7001
Endometriosis	7629
Enteritis, chronic	7325
Enterocolitis, chronic	7326
Entropion	6021
Eosinophilic granuloma of lung	6828
Epididymo-orchitis	7525
Epilepsies:	
Diencephalic	8913
Grand mal	8910
Jacksonian and focal motor or sensory	8912
Petit mal	8911
Psychomotor	8914
Epiphora	6025
Erythema multiforme	7827
Erythromelalgia	7119
Esophagus:	
Diverticulum	7205
Spasm	7204
Stricture	7203
Exfoliative dermatitis	7817
Fallopian tube	7614
Fever:	
Relapsing	6308
Rheumatic	6309
Fibrosis of lung, diffuse interstitial	6825
Fibromyalgia	5025
Fistula in ano	7335
Fistula:	
Rectovaginal	7624
Urethrovaginal	7625
Flatfoot, acquired	5276
Gastritis, hypertrophic	7307
Genu recurvatum	5263
Glaucoma:	
Congestive or inflammatory	6012
Simple, primary, noncongestive	6013
Glomerulonephritis	7536
Gout	5017
Hallux:	
Rigidus	5281
Valgus	5280
Hammer toe	5282
Heart valve replacement	7016
Hematomyelia	8012
Hemorrhage:	
Brain	8009
Intra-ocular	6007
Hemorrhoids	7336
Hepatitis C	7354
Hernia:	
Femoral	7340
Hiatal	7346
Inguinal	7338
Muscle	5326

APPENDIX C TO PART 4.—ALPHABETICAL INDEX OF DISABILITIES—Continued

	Diagnostic code No.
Ventral	7339
Hip:	
Degenerative arthritis	5242
Flail joint	5254
Histoplasmosis	6834
HIV-Related Illness	6351
Hodgkin's disease	7709
Hydrarthrosis, intermittent	5018
Hydronephrosis	7509
Hyperaldosteronism	7917
Hyperhidrosis	7832
Hyperparathyroidism	7904
Hyperpituitarism	7916
Hypersensitivity	6831
Hypertensive:	
Heart disease	7007
Vascular disease	7101
Hyperthyroid heart disease	7008
Hyperthyroidism	7900
Hypoparathyroidism	7905
Hypothyroidism	7903
Impairment of:	
Humerus	5202
Clavicle or scapula	5203
Elbow	5209
Thigh	5253
Femur	5255
Knee, other	5257
Field vision	6080
Tibia and fibula	5262
Rectum & anus	7332
Ulna	5211
Implantable cardiac pacemakers	7018
Infections of the skin	7820
Injury:	
Bladder	7517
Eye, unhealed	6009
Foot	5284
Gall bladder	7317
Lips	7201
Liver, residuals	7311
Mouth	7200
Muscle:	
Facial	5325
Group I Function: Upward rotation of scapula	5301
Group II Function: Depression of arm	5302
Group III Function: Elevation and abduction of arm	5303
Group IV Function: Stabilization of shoulder	5304
Group V Function: Elbow supination	5305
Group VI Function: Extension of elbow	5306
Group VII Function: Flexion of wrist and fingers	5307
Group VIII Function: Extension of wrist, fingers, thumb	5308
Group IX Function: Forearm muscles	5309
Group X Function: Movement of forefoot and toes	5310
Group XI Function: Propulsion of foot	5311
Group XII Function: Dorsiflexion	5312
Group XIII Function: Extension of hip and flexion of knee	5313
Group XIV Function: Extension of knee	5314
Group XV Function: Adduction of hip	5315
Group XVI Function: Flexion of hip	5316
Group XVII Function: Extension of hip	5317
Group XVIII Function: Outward rotation of thigh	5318
Group XIX Function: Abdominal wall and lower thorax	5319
Group XX Function: Postural support of body	5320
Group XXI Function: Respiration	5321
Group XXII Function: Rotary and forward movements, head	5322
Group XXIII Function: Movements of head	5323
Pharynx	6521
Sacroiliac	5236
Spinal cord	6841
Stomach, residuals of	7310

APPENDIX C TO PART 4.—ALPHABETICAL INDEX OF DISABILITIES—Continued

	Diagnostic code No.
Iritis	6003
Interstitial nephritis	7537
Intervertebral disc syndrome	5243
Intestine, fistula of	7330
Irritable colon syndrome	7319
Keratinization, diseases of	7824
Keratitis	6001
Keratoconus	6035
Kidney:	
Abscess	7501
Cystic diseases	7533
Removal	7500
Transplant	7531
Tuberculosis	7505
Kyphoscoliosis, pectus excavatum / carinatum	6842
Lagophthalmos	6022
Laryngectomy	6518
Laryngitis:	
Tuberculous	6515
Chronic	6516
Larynx, stenosis of	6520
Leishmaniasis:	
American (New World)	7807
Old World	7808
Leprosy (Hansen's Disease)	6302
Leukemia	7703
Limitation of extension:	
Forearm	5207
Leg	5261
Radius	5212
Supination and pronation	5213
Thigh	5251
Limitation of extension and flexion:	
Forearm	5208
Limitation of flexion:	
Forearm	5206
Leg	5260
Thigh	5252
Limitation of motion:	
Ankle	5271
Arm	5201
Index or long finger	5229
Ring or little finger	5230
Temporomandibular articulation	9905
Thumb	5228
Wrist, limitation of motion	5215
Liver:	
Disease, chronic, without cirrhosis	7345
Transplant	7351
Cirrhosis	7312
Loss of:	
Auricle	6207
Condylod process	9908
Coronoid process	9909
Eyebrows	6023
Eyelashes	6024
Eyelids	6032
Mandible:	
One-half	9902
Complete	9901
Maxilla:	
More than half	9914
Less than half	9915
Nose, part of, or scars	6504
Palate, hard:	
Half or more	9911
Less than half	9912
Ramus:	
Whole or part	9906
Less than one-half	9907
Skull, part of	5296

APPENDIX C TO PART 4.—ALPHABETICAL INDEX OF DISABILITIES—Continued

	Diagnostic code No.
Smell, sense of	6275
Taste, sense of	6276
Teeth, loss of	9913
Tongue, loss of whole or part	7202
Loss of use of:	
Both feet	5110
Both hands	5109
Foot	5167
Hand	5125
One hand and one foot	5111
Lumbosacral strain	5237
Lupus:	
Erythematosus	6350
Erythematosus, discoid	7809
Lyme disease	6319
Lymphatic filariasis	6305
Malaria	6304
Malignant melanoma	7833
Malunion:	
Mandible	9904
Os calcis or astragalus	5273
Maxilla, malunion or nonunion	9916
Melioidosis	6318
Meniere's syndrome	6205
Meningitis, cerebrospinal, epidemic	8019
Mental disorders:	
Anxiety disorders:	
Generalized anxiety disorder	9400
Obsessive compulsive disorder	9404
Other and unspecified neurosis	9410
Not otherwise specified	9413
Panic disorder	9412
Post-traumatic stress disorder	9411
Specific (simple) phobia	9403
Chronic adjustment disorder	9440
Delirium, dementia, amnesic and other cognitive disorders	
Alzheimers	9312
Delirium	9300
Head trauma	9304
Infection	9301
Organic mental disorder	9327
Other medical conditions	9326
Unknown etiology	9310
Vascular dementia	9305
Dissociative disorders:	
Amnesia, fugue, identity disorders	9416
Depersonalization disorder	9417
Eating Disorder:	
Anorexia nervosa	9520
Bulimia nervosa	9521
Mood Disorders:	
Bipolar disorder	9432
Cyclothymic disorder	9431
Dysthymic disorder	9433
Major depressive disorder	9434
Mood disorder not otherwise specified	9435
Schizophrenia and other psychotic disorders:	
Catatonic type	9202
Delusional disorder	9208
Disorganized type	9201
Psychotic disorder	9210
Paranoid type	9203
Residual type	9205
Schizoaffective disorder	9211
Undifferentiated type	9204
Somatoform:	
Conversion disorder	9424
Hypochondriasis	9425
Pain disorder	9422
Somatization disorder	9421
Undifferentiated somatoform disorder	9423

APPENDIX C TO PART 4.—ALPHABETICAL INDEX OF DISABILITIES—Continued

	Diagnostic code No.
Metatarsalgia	5279
Migraine	8100
Morton's disease	5279
Mucormycosis	6839
Multiple sclerosis	8018
Myasthenia gravis	8025
Myelitis	8010
Myocardial infarction	7006
Myositis ossificans	5023
Myositis	5021
Narcolepsy	8108
Neoplasms:	
Benign:	
Digestive system	7344
Ear	6209
Endocrine	7915
Genitourinary	7529
Gynecological or breast	7628
Muscle	5328
Respiratory	6820
Skin	7819
Malignant:	
Digestive system	7343
Ear	6208
Endocrine	7914
Genitourinary	7528
Gynecological or breast	7627
Muscle	5327
Respiratory	6819
Skin	7818
Nephritis, chronic	7502
Nephrolithiasis	7508
Nephrosclerosis, arteriolar	7507
Neuralgia:	
Cranial Nerves	
Fifth (trigeminal)	8405
Seventh (facial)	8407
Ninth (glossopharyngeal)	8409
Tenth (pneumogastric, vagus)	8410
Eleventh (spinal accessory, external branch)	8411
Twelfth (hypoglossal)	8412
Peripheral Nerves	
Upper radicular group	8710
Middle radicular group	8711
Lower radicular group	8712
All radicular groups	8713
Musculospiral (radial)	8714
Median	8715
Ulnar	8716
Musculocutaneous	8717
Circumflex	8718
Long thoracic	8719
Sciatic	8720
External popliteal (common peroneal)	8721
Musculocutaneous (superficial peroneal)	8722
Anterior tibial (deep peroneal)	8723
Internal popliteal (tibial)	8724
Posterior tibial	8725
Anterior crural (femoral)	8726
Internal saphenous	8727
Obturator	8728
External cutaneous nerve of thigh	8729
Ilio-inguinal	8730
Neuritis:	
Cranial nerves	
Fifth (trigeminal)	8305
Seventh (facial)	8307
Ninth (glossopharyngeal)	8309
Tenth (pneumogastric, vagus)	8310
Eleventh (spinal accessory, external branch)	8311
Twelfth (hypoglossal)	8312

APPENDIX C TO PART 4.—ALPHABETICAL INDEX OF DISABILITIES—Continued

	Diagnostic code No.
Optic	6026
Peripheral Nerves	
Upper radicular group	8610
Middle radicular group	8611
Lower radicular group	8612
All radicular groups	8613
Musculospiral (radial)	8614
Median	8615
Ulnar	8616
Musculocutaneous	8617
Circumflex	8618
Long thoracic	8619
Sciatic	8620
External popliteal (common peroneal)	8621
Musculocutaneous (superficial peroneal)	8622
Anterior tibial (deep peroneal)	8623
Internal popliteal (tibial)	8624
Posterior tibial	8625
Anterior crural (femoral)	8626
Internal saphenous	8627
Obturator	8628
External cutaneous nerve of thigh	8629
Ilio-inguinal	8630
Neurogenic bladder	7542
New growths:	
Benign	
Bones	5015
Brain	8003
Eyeball and adnexa	6015
Spinal cord	8022
Malignant	
Bones	5012
Brain	8002
Eyeball	6014
Spinal cord	8021
Nocardiosis	6823
Non-Hodgkin's lymphoma	7715
Nonunion:	
Mandible	9903
Radius and ulna	5210
Nystagmus, central	6016
Osteitis deformans	5016
Osteomalacia	5014
Osteomyelitis	5000
Osteomyelitis maxilla or mandible	9900
Osteoporosis, with joint manifestations	5013
Otitis media:	
Externa	6210
Nonsuppurative	6201
Suppurative	6200
Otosclerosis	6202
Ovaries, atrophy of both	7620
Ovary:	
Disease or injury	7615
Removal	7619
Palsy, bulbar	8005
Pancreatitis	7347
Papillary necrosis	7538
Papulosquamous disorders	7822
Paralysis:	
Accommodation	6030
Agitans	8004
Paralysis, nerve:	
Cranial nerves	
Fifth (trigeminal)	8205
Seventh (facial)	8207
Ninth (glossopharyngeal)	8209
Tenth (pneumogastric, vagus)	8210
Eleventh (spinal accessory, external branch)	8211
Twelfth (hypoglossal)	8212
Peripheral Nerves:	
Upper radicular group	8510

APPENDIX C TO PART 4.—ALPHABETICAL INDEX OF DISABILITIES—Continued

	Diagnostic code No.
Middle radicular group	8511
Lower radicular group	8512
All radicular groups	8513
Musculospiral (radial)	8514
Median	8515
Ulnar	8516
Musculocutaneous	8517
Circumflex	8518
Long thoracic	8519
Sciatic	8520
External popliteal (common peroneal)	8521
Musculocutaneous (superficial peroneal)	8522
Anterior tibial nerve (deep peroneal)	8523
Internal popliteal (tibial)	8524
Posterior tibial nerve	8525
Anterior crural nerve (femoral)	8526
Internal saphenous	8527
Obturator	8528
External cutaneous nerve of thigh	8529
Ilio-inguinal	8530
Paramyoclonus multiplex	8104
Parasitic disease	6320
Pellagra	6315
Penis	
Deformity, with loss of erectile power	7522
Removal of glans	7521
Removal of half or more	7520
Pericardial adhesions	7003
Pericarditis	7002
Periostitis	5022
Peripheral vestibular disorders	6204
Peritoneum, adhesions	7301
Peritonitis	7331
Pes cavus (Claw foot) acquired	5278
Pheochromocytoma	7918
Plague	6307
Pleural effusion or fibrosis	6845
Pluriglandular syndrome	7912
Pneumoconiosis	6832
Pneumonitis & fibrosis:	
Drug-induced	6829
Radiation-induced	6830
Poliomyelitis, anterior	8011
Polycythemia vera	7704
Postgastrectomy syndromes	7308
Post-phlebotic syndrome	7121
Post-surgical residual	6844
Pregnancy, surgical complications	7623
Progressive muscular atrophy	8023
Prostate gland	7527
Prosthetic Implants:	
Ankle replacement	5056
Elbow replacement	5052
Hip replacement	5054
Knee replacement	5055
Shoulder replacement	5051
Wrist replacement	5053
Psoriasis	7816
Pterygium	6034
Ptosis	6019
Pulmonary:	
Alveolar proteinosis	6827
Vascular disease	6817
Pruritus ani	7337
Pyelonephritis, chronic	7504
Raynaud's syndrome	7117
Rectum:	
Rectum & anus, stricture	7333
Prolapse	7334
Removal:	
Cartilage, semilunar	5259

APPENDIX C TO PART 4.—ALPHABETICAL INDEX OF DISABILITIES—Continued

	Diagnostic code No.
Coccyx	5298
Gall bladder	7318
Kidney	7500
Penis glans	7521
Penis half or more	7520
Ribs	5297
Testis	7524
Ovary	7619
Uterus	7618
Uterus and both ovaries	7617
Renal:	
Amyloid disease	7539
Disease, chronic	7530
Involvement in systemic diseases	7541
Tubular disorders	7532
Retina detachment of	6008
Retinitis	6006
Rhinitis:	
Allergic or vasomotor	6522
Bacterial	6523
Granulomatous	6524
Resection of intestine:	
Large	7329
Small	7328
Sarcoidosis	6846
Scarring alopecia	7830
Scars:	
Deep, other than head, face or neck	7801
Other	7805
Retina	6011
Superficial, other than head, face, or neck	7802
Superficial, painful	7804
Superficial, unstable	7803
Scleritis	6002
Scotoma	6081
Septum, nasal, deviation of	6502
Sickle cell anemia	7714
Sinusitis:	
Ethmoid	6511
Frontal	6512
Maxillary	6513
Pansinusitis	6510
Sphenoid	6514
Sleep Apnea Syndrome	6847
Soft tissue sarcoma:	
Muscle, fat, or fibrous connected	5329
Neurogenic origin	8540
Vascular origin	7123
Spinal fusion	5241
Spinal stenosis	5238
Spleen, injury of, healed	7707
Splenectomy	7706
Spondylolisthesis or segmental instability, spine	5239
Stomach, stenosis of	7309
Symblepharon	6091
Syndromes:	
Chronic Fatigue Syndrome (CFS)	6354
Cushing's	7907
Meniere's	6205
Raynaud's	7117
Sleep Apnea	6847
Synovitis	5020
Syphilis	6310
Syphilis:	
Cerebrospinal	8013
Meningovascular	8014
Syphilitic heart disease	7004
Syngomyelia	8024
Tabes dorsalis	8015
Tarsal or metatarsal bones	5283
Tenosynovitis	5024

APPENDIX C TO PART 4.—ALPHABETICAL INDEX OF DISABILITIES—Continued

	Diagnostic code No.
Testis:	
Atrophy, complete	7523
Removal	7524
Thrombocytopenia	7705
Thrombosis, brain	8008
Thyroid gland:	
Nontoxic adenoma	7902
Toxic adenoma	7901
Tic, convulsive	8103
Tinnitus, recurrent	6260
Toxic nephropathy	7535
Traumatic chest wall defect	6843
Tuberculosis:	
Adenitis	7710
Bones and joints	5001
Eye	6010
Kidney	7505
Luposa (lupus vulgaris)	7811
Miliary	6311
Pleurisy, active or inactive	6732
Pulmonary:	
Active, far advanced	6701
Active, moderately advanced	6702
Active, minimal	6703
Active, advancement unspecified	6704
Active, chronic	6730
Inactive, chronic	6731
Inactive, far advanced	6721
Inactive, moderately advanced	6722
Inactive, minimal	6723
Inactive, advancement unspecified	6724
Tuberculosis luposa (lupus vulgaris)	7811
Tympanic membrane	6211
Typhus, scrub	6317
Ulcer:	
Duodenal	7305
Gastric	7304
Marginal	7306
Ureter, stricture of	7511
Ureterolithiasis	7510
Urethra:	
Fistula	7519
Stricture	7518
Urticaria	7825
Uterus:	
And both ovaries, removal	7617
Disease or injury	7613
Displacement	7622
Prolapse	7621
Removal	7618
Uveitis	6000
Vagina, disease or injury	7611
Vagotomy	7348
Valvular heart disease	7000
Varicose veins	7120
Vasculitis, primary cutaneous	7826
Vertebral fracture or dislocation	5235
Visceral Leishmaniasis	6301
Visceroptosis	7342
Vision: <i>see also</i> Blindness and Loss of	
One eye 5/200 (1.5/60), with visual acuity of other eye:	
5/200 (1.5/60)	6071
10/200 (3/60); 15/200 (4.5/60); 20/200 (6/60)	6072
20/100 (6/30); 20/70 (6/21); 20/50 (6/15)	6073
20/40 (6/12)	6074
One eye 10/200 (3/60), with visual acuity of other eye:	
10/200 (3/60); 15/200 (4.5/60); 20/200 (6/60)	6075
20/100 (6/30); 20/70 (6/21); 20/50 (6/15)	6076
20/40 (6/12)	6077
One eye 15/200 (4.5/60), with visual acuity of other eye:	
15/200 (4.5/60) or 20/200 (6/60)	6075

APPENDIX C TO PART 4.—ALPHABETICAL INDEX OF DISABILITIES—Continued

	Diagnostic code No.
20/100 (6/30); 20/70 (6/21); 20/50 (6/15)	6076
20/40 (6/12)	6077
One eye 20/200 (6/60), with visual acuity of other eye:	
20/200 (6/60)	6075
20/100 (6/30); 20/70 (6/21); 20/50 (6/15)	6076
20/40 (6/12)	6077
One eye 20/100 (6/30), with visual acuity of other eye: and other eye:	
20/100 (6/30); 20/70 (6/21); 20/50 (6/15)	6078
20/40 (6/12)	6079
One eye 20/70 (6/21), with visual acuity of other eye:	
20/70 (6/21) or 20/50 (6/15)	6078
20/40 (6/12)	6079
One eye 20/50 (6/15), with visual acuity of other eye:	
20/50 (6/15)	6078
20/40 (6/12)	6079
Each eye 20/40 (6/12)	6079
Vitiligo	7823
Vulva disease or injury of	7610
Weak foot	5277

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ENVIRONMENTAL PROTECTION AGENCY

40 CFR Part 60

[EPA-HQ-OAR-2005-0117; FRL-8289-6]
 RIN 2060-AO18

Standards of Performance for New Stationary Sources and Emission Guidelines for Existing Sources: Large Municipal Waste Combustors

AGENCY: Environmental Protection Agency (EPA).

ACTION: Notice of reconsideration of final rule.

SUMMARY: On May 10, 2006, EPA published a final rule entitled, “Standards of Performance for New Stationary Sources and Emission Guidelines for Existing Sources: Large Municipal Waste Combustors.” Following that final action, the Administrator received a petition for reconsideration. In response to the petition, EPA is announcing its reconsideration of three aspects of the rule: operator stand-in provisions, data requirements for continuous monitors, and the status of operating parameters during the 2 weeks prior to mercury and dioxin/furan testing.

DATES: *Comments.* Comments must be received on or before April 19, 2007. Because of the need to resolve the issues raised in this action in a timely manner, EPA will not grant requests for extensions beyond this date. If, however, a public hearing is held, the

comment period will remain open until May 4, 2007.

Public Hearing. If anyone contacts EPA by March 27, 2007 requesting to speak at a public hearing, EPA will hold a public hearing on April 4, 2007. If you are interested in attending the public hearing, contact Pamela Garrett at (919) 541-7966 to verify that a hearing will be held.

ADDRESSES: *Comments.* Submit your comments, identified by Docket ID No. EPA-HQ-OAR-2005-0117, by one of the following methods.

Web site: <http://www.regulations.gov>. Follow the online instructions for submitting comments.

E-mail: Send your comments via electronic mail to a-and-r-docket@epa.gov, Attention Docket ID No. EPA-HQ-OAR-2005-0117.

Facsimile: Fax your comments to (202) 566-1741, Attention Docket ID No. EPA-HQ-OAR-2005-0117.

Mail: Send your comments to: EPA Docket Center (EPA/DC), EPA, Mailcode 6102T, 1200 Pennsylvania Ave., NW., Washington, DC 20460, Attention Docket ID No. EPA-HQ-OAR-2005-0117.

Hand Delivery: Deliver your comments to: EPA Docket Center (EPA/DC), EPA West Building, Room B108, 1301 Constitution Ave., NW., Washington, DC, 20460, Attention Docket ID No. EPA-HQ-OAR-2005-0117. Such deliveries are accepted only during the Docket’s normal hours of operation (8:30 a.m. to 4:30 p.m., Monday through Friday, excluding legal holidays), and special arrangements should be made for deliveries of boxed information.

Instructions. Direct your comments to Docket ID No. EPA-HQ-OAR-2005-0117. EPA’s policy is that all comments received will be included in the public docket without change and may be made available online at <http://www.regulations.gov>, including any personal information provided, unless the comment includes information claimed to be Confidential Business Information (CBI) or other information whose disclosure is restricted by statute. Do not submit information that you consider to be CBI or otherwise protected through <http://www.regulations.gov> or e-mail. The <http://www.regulations.gov> Web site is an “anonymous access” system, which means EPA will not know your identity or contact information unless you provide it in the body of your comment. If you send an e-mail comment directly to EPA without going through <http://www.regulations.gov>, your e-mail address will be automatically captured and included as part of the comment that is placed in the public docket and made available on the Internet. If you submit an electronic comment, EPA recommends that you include your name and other contact information in the body of your comment and with any disk or CD-ROM you submit. If EPA cannot read your comment due to technical difficulties and cannot contact you for clarification, EPA may not be able to consider your comment. Electronic files should avoid the use of special characters, any form of encryption, and be free of any defects or viruses.

Public Hearing. If a public hearing is requested, it will be held at EPA’s Campus located at 109 T.W. Alexander