

Guidelines for Evaluation of Physical Impairment due to Cardio Pulmonary Diseases

Basic Guidelines

1. Modified New York Heart Association subjective classification should be utilized to assess the functional disability.
2. The physician should be alert to the fact that patients who come for disability claims are likely to exaggerate their symptom. In case of any doubt patients should be referred for detail physiological evaluation.
3. Disability evaluation of cardiopulmonary patients should be done after full medical, surgical and rehabilitative treatment available, because most of these diseases are potentially treat able.
4. Assessment of cardiopulmonary impairment should also be done in diseases which might have associated cardiopulmonary problems, e.g. amputees, myopathies etc.

The proposed modified classification is as follows :

Group 0 : A patient with cardiopulmonary disease who is asymptomatic (i.e. has no symptoms of breath-lessness, palpitation, fatigue or chest pain).

Group 1 : A patient with cardio-pulmonary disease who becomes symptomatic during his ordinary physical activity but has mild restriction (25%) of his ordinary physical activities.

Group 2 : A patient with cardiopulmonary disease who becomes symptomatic during his ordinary physical activity and has 25-50% restriction of his ordinary physical activity.

Group 3 : A patient with cardiopulmonary disease who becomes symptomatic during less than ordinary physical activity so that his ordinary physical activities are 50-75% restricted.

Group 4 : A patient with cardiopulmonary disease who is symptomatic even at rest or on mildest exertion so that his ordinary physical activities are severely or completely restricted (75-100%).

Group 5 : A patient with cardiopulmonary disease who gets intermittent symptoms at rest (i.e. patients with bronchial asthma, paroxysmal nocturnal dyspnoea etc.).