Abstract

Background

Workplace amputation is a widespread, disabling, costly, and preventable public health problem. Thousands of occupational amputations occur each year, clustering in particular economic sectors, workplaces, and demographic groups such as young workers, Hispanics, and immigrants.

Objectives

To identify and describe work related amputations amongst Illinois residents that occur...
within Illinois as reported in three legally mandated State databases; to compare these cases with those identified through the BLS-Survey of Occupational Illnesses and Injuries (SOII); and to determine the extent of direct intervention by the Occupational Safety and Health Administration (OSHA) for these injuries in the State.

Methods

We linked cases across three databases in Illinois—trauma registry, hospital discharge, and workers compensation claims. We describe amputation injuries in Illinois between 2000 and 2007, compare them to the BLS-SOII, and determine OSHA investigations of the companies where amputations occurred.

Results

There were 3984 amputations identified, 80% fingertips, in the Illinois databases compared to an estimated 3637, 94% fingertips, from BLS-SOII. Though the overall agreement is close, there were wide fluctuations (over- and under-estimations) in individual years between counts in the linked dataset and federal survey estimates. No OSHA inspections occurred for these injuries.

Conclusions/recommendations

Increased detection of workplace amputations is essential to targeting interventions and to evaluating program effectiveness. There should be mandatory reporting of all amputation injuries by employers and insurance companies within 24 h of the event, and every injury should be investigated by OSHA. Health care providers should recognise amputation as a public health emergency and should be compelled to report. There should be a more comprehensive occupational injury surveillance system in the US that enhances the BLS-SOII through linkage with state databases. Addition of industry, occupation, and work-relatedness fields to the Electronic Health Record, the Uniform Billing form, and national health surveys would allow better capture of occupational cases for prevention and for assigning bills to the right payer source.

Keywords

Amputation; Occupational injury; Injury surveillance; Data linkage; Traumatic injury; Trauma registry; Hospital discharge data; Workers compensation; BLS Survey of Occupational Injuries and Illnesses; OSHA citations
Occupational amputations in Illinois 2000-2007: BLS vs. data linkage of trauma registry, hospital discharge, workers compensation databases and OSHA citations, the Museum under the open sky is unobservable dissonant benthos.

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