



dti

**24TH (FINAL) REPORT OF THE  
HOME AND LEISURE ACCIDENT  
SURVEILLANCE SYSTEM**

2000, 2001 AND 2002 DATA



The DTI drives our ambition of 'prosperity for all' by working to create the best environment for business success in the UK. We help people and companies become more productive by promoting enterprise, innovation and creativity.

We champion UK business at home and abroad. We invest heavily in world-class science and technology. We protect the rights of working people and consumers. And we stand up for fair and open markets in the UK, Europe and the world.

## Preface

This is the 24th and final Report of the Home and Leisure Accident Surveillance System (HASS). The pages that follow include statistics for accidents that have happened in the home and at leisure in the UK where the victim has sought treatment at a hospital during 2000, 2001 and 2002.

Reporting of the data for these three years has been delayed due to technical problems relating to the corruption of the data. These problems have now been resolved and the data has been validated and cleaned so that it is of comparable quality to the preceding years' reports. In those limited areas where some questions over data quality remain, this has been highlighted in the report.

On 2nd May 2003, ministers announced that the DTI would no longer fund the collection and publication of HASS data. However, the data for these last three years has been entered into the HASS database and the DTI has taken steps to ensure that this will continue to be available for users. It has entered into an agreement with the Royal Society for the Prevention of Accidents (RoSPA) in which a copy of the complete database has been transferred to RoSPA who will provide an enquiry service based on the HASS database for a further five years.

The production of this report would not have been possible without the efforts of several people and organisations. The DTI gratefully acknowledges this help and, in particular, the hard work of the clerks in the hospitals who collected all the data.

From 1 January 2004, all enquiries should be made to RoSPA at:

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# Introduction

## About this report

### This report will provide you with:

- Background information on HASS
- Data on home and leisure accidents in the UK where patients have attended hospital accident and emergency departments in 2000, 2001 and 2002.

The data was gathered by interviewing patients at A & E units in a representative sample of up to 18 hospitals across the UK. In 2000, for example, over 300,000 cases were recorded. These sample cases give us a clear picture of the nature of the estimated five and a half million home and leisure accidents annually in the UK that caused people to seek hospital treatment.

The HASS database contains accident records drawn from all hospitals in the sample over a period of 25 years relating to around five million accident victims in total. Each record has over 30 different fields of information, so that billions of different statistics can be generated. In this report we have included standard tables for each of the years 2000, 2001 and 2002 in the same format as presented in earlier reports. The tables include three main items of information: counts from the sample raw case data, corresponding national estimates and associated confidence limits. More detailed and/or specific information than that presented here may be obtained by making enquiries of RoSPA.

### Key to terms and abbreviations

<b>HASS</b>	Home Accident Surveillance System
<b>LASS</b>	Leisure Accident Surveillance System
<b>EHLASS</b>	European Home and Leisure Accident Surveillance System
<b>HLA</b>	Home and Leisure Accident
<b>National estimate</b>	The estimated number of attendances at all A & E units across the country based on attendance numbers at the 16-18 representative HASS hospitals
<b>Confidence limits</b>	Lower and upper limits surrounding the national estimate figure within which lies the true national figure with 95 per cent confidence
<b>A&amp;E</b>	Hospital Accident and Emergency department

## About HASS and LASS

### What are HASS and LASS?

HASS – the Home Accident Surveillance System – and LASS – the Leisure Accident Surveillance System – are two linked databases. They hold details of home and leisure accidents that caused a serious enough injury to warrant a visit to hospital. They do not include road traffic or work accidents.

The aim of HASS and LASS is to gain an in-depth understanding of how and why home and leisure accidents occur to enable steps be taken to prevent them in the future.

### What HASS/LASS contains

Each record on the database includes the following:

- Details of the person who had the accident – including demographic information such as age and gender
- Details of the accident itself
- The circumstances surrounding the accident
- The injury or injuries caused by the accident
- The involvement of products/articles in the accident.

The identity of accident victims is confidential and will not be released under any circumstances. The system complies with the Data Protection Act.

### A brief history of HASS/LASS

HASS/LASS statistics have been collected since 1978 and were first computerised in 1992 using state-of-the-art technology of the time. Database technology has moved on a great deal since then and, since 1999 all HASS/LASS records were stored on a database using smartFOCUS Viper on a small PC network. This is compatible with most Windows packages (Access, Excel and Word). The data was collected in the hospitals using Access.

**Information from the HASS/LASS database is available to everyone with an interest in the prevention of accidents.**

# 2

## Gathering information for HASS and LASS data

## Gathering data

The accident data held by HASS/LASS are representative of all the home and leisure accidents that take place in the UK and result in the victim attending hospital.

Up to eighteen hospitals around the country at any one time submitted information to HASS/LASS. Their selection was based on a formal statistical procedure. As a minimum, each hospital must:

- Attend to more than 10,000 A & E cases a year
- Operate a 24-hour service
- Take ambulance cases.

There are around 300 such hospitals in the UK. To gain a good basis on which to produce national estimates, our mix of 16-18 hospitals includes those:

- From different geographical regions
- From urban and rural areas
- Serving different-sized populations
- With different-sized A & E units.

It is unlikely that any one hospital will fully represent the region in which it is situated. Because of this, HASS/LASS estimates are only valid at national level, namely, England, England and Wales, or the UK as a whole.

Two hospitals left the sample during the 2000-2002 reporting period without being replaced. Monklands provided data to the end of June 2001, and Royal Berkshire left the sample at the end of 2001.

**Hospital accident and emergency departments participating in the surveillance system in 2000-2002. Frequencies show the combined HASS/LASS new attendances as recorded by the system for each of the years 2000-2002.**

	2000	2001	2002	Total
Airedale, Keighley	17565	17103	18040	52708
Blackburn Royal Infirmary, Lancs.	23367	23842	23645	70854
Daisy Hill, Newry	11615	12232	12294	36141
George Eliot, Nuneaton	19614	20915	22027	62556
Hereford City General, Hereford	14221	13777	12930	40928
Kings College, Denmark Hill	13670	12930	13101	39701
Luton & Dunstable, Beds.	23748	21917	21732	67397
Macclesfield General, Cheshire	14102	13421	13230	40753
Monklands General, Airdrie	17516	8549	0	26065
Norfolk & Norwich, Norwich	25096	22807	22741	70644
North Devon, Barnstaple	10688	11035	11337	33060
North Tees General, Stockton	21616	21355	21234	64205
Prince Charles, Merthyr Tydfil	13068	13994	13687	40749
Royal Berkshire, Reading	27165	25705	0	52870
Selly Oak, Birmingham	21598	21382	22089	65069
Skegness and District, Lincs.	6444	6865	7286	20595
St.Helier, Carshalton	18123	17465	17754	53342
Worthing	18891	19215	19612	57718
<b>TOTAL</b>	<b>318107</b>	<b>304509</b>	<b>272739</b>	<b>895355</b>

NB We can only release information on a specific hospital with the written consent of the hospital.

In each hospital, specially trained interviewers who were employed by the hospital but contracted to work for HASS/LASS gathered information. A market research organisation called IMS Medicare Audits recruited, managed and trained HASS/LASS interviewers on behalf of the DTI.

Interviewers were on duty in the participating A & E units at peak times. They identified patients who have suffered a home or leisure accident and interviewed them as soon as possible using a standard questionnaire (as shown in Annex 1). Adults were interviewed face to face but if children had been involved in an accident, details were obtained from their parents or the adult with them.

Interviewers supplemented information from the personal interview with information from the hospital's medical records. If they could not conduct a personal interview they created a HASS/LASS record from medical records alone.

The information was then transferred to the HASS/LASS database in the following way:

- Information from the completed interview questionnaire was entered onto a dedicated HASS/LASS computer in the hospital.
- The computer automatically checked details for consistency and accuracy.

Once checked and validated, the new data was transferred overnight via ISDN lines to a central collection system, and transferred after further checking to the central database at the DTI.

### European accident data

Accident reports from 11 of the 18 HASS/LASS hospitals represented the UK contribution to the European Home and Leisure Accident Surveillance System (EHLASS, now renamed ISS). This system was started in 1986 to collect and collate accident records from all EU member states. The UK has provided data for the years 2000-2002, as it has in former years.

The European Commission integrated EHLASS as the Home and Leisure Accident (HLA) element of its Injury Prevention Programme (IPP) for 1999-2003. The IPP was curtailed one year early, and became the Injury Working Group as part of the Public Health Programme (PHP) with effect from 1 January 2003. Department of Health represents the UK on the PHP.

## Compiling statistics

The HASS/LASS databases contain details on accidents involving around five million victims collected for over 20 years, synthesising 30 different fields of information that include the involvement of over 1,500 products.

The questionnaire used to gather data had over 50 headings, including:

- A short description of the immediate circumstances
- Details of where the accident happened
- Details of the victim, including age, and gender.
- Details of the injury
- Product involvement.

Collating this information gives a comprehensive picture of the accident and how it happened. Summary statistics in the form of tables with each focusing on a particular aspect, can also be generated, such as an age breakdown of all accidents.

**More information:**

You will find a full list of fields and definitions in Annexes 1 and 2 on pages 181 and 184.

**Statistical tables**

Most researchers find the HASS/LASS standard tables the most useful. These report on the A & E case records taken during a full year from January to December.

Statistical tables can have up to three fields of information; for example, sports accidents can be analysed by the type of sporting activity and the age and gender of those involved. This can be extremely useful for ascertaining the relationship between these factors. Alternatively, textual and other information can be provided as case listings for a random sample of accidents within a particular category.

**Further information:**

You will find the standard tables on pages 13 (for 2000 data), 68 (for 2001) and 122 (for 2002).

Many of the collected items of information can be combined to produce statistics. For example, HASS can give data on the number of men under 25 who break a leg after falling off a ladder while doing DIY. The HASS team at RoSPA will be pleased to answer enquiries on accident statistics, and can provide tailor-made analyses including tables and/or anonymous case studies.

**For more details contact:**

The Information Centre  
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**Calculating national estimates**

Once the sample data had been taken from the 16-18 HASS/LASS hospitals, they were converted into national figures using an equation that converts the total attendances at the sample hospitals into an estimate of the total attendances at all hospitals across the country.

The smaller the number of HASS/LASS cases for a particular combination of variables, the less statistical confidence there is in the national estimate derived from it. For all accidents, the national estimate can be qualified using confidence limits.

## Data uncertainty

Individual accidents are unpredictable. By their very nature, they are the outcome of random events. The accidents recorded in a particular year represent a vast number of choices and occurrences: what people choose to do; how they do it; and the unforeseen outcome of their actions.

National estimates based on these sample cases are also statistically uncertain. This uncertainty is quantified using confidence limits.

The national estimate is  $E$ ; our two confidence limits are  $L$  (lower) and  $U$  (upper).  $E$  is the best single estimate that can be made from the sample of the true, but unknown, number of accidents. The lower and upper limits  $L$  and  $U$  relate to a particular required level of confidence. Customarily this is 95 per cent. This means that in 95 cases out of every 100 the true number of accidents will fall somewhere between the lower ( $L$ ) and upper ( $U$ ) limits. This defines the margin of error surrounding the national estimate ( $E$ ). This margin can be expressed either as an actual number or as a percentage of  $E$ .

To give an example, in 1993, 3,189 bite and sting accidents were recorded. Using the equation upon which we base the national estimate, this translates into  $E = 66,800$ , with confidence limits of  $L = 64,500$  and  $U = 69,200$ . Therefore, the total number of bites and stings accidents in the UK was between 64,500 and 69,200. Note that the lower and upper limits are not exactly symmetric to the central estimate; normally an estimate calculated as  $66,800 + 2,400$  is accurate enough for  $E$ ,  $L$  and  $U$  figures.

## Accidental deaths

### Where to find the data

The HASS/LASS database includes records of a small number of fatal accidents. However, because relatively few deaths occur during or after treatment in A & E units, these cases do not represent fatal incidents as a whole and are not included in this report.

The Office for National Statistics (ONS) collates coroners' returns on fatal accidents in England and Wales. Figures for accidental deaths are published annually in the ONS National Statistics DH4 Report, Mortality Statistics, Injury and Poisoning. Information on accidental deaths is also available on the ONS website, [www.ons.gov.uk](http://www.ons.gov.uk), together with contact information for queries.

# 3

## HASS and LASS data

## Standard tables

The tables listed below are provided for each of the three years 2000-2002 in the pages which follow, and are colour-coded and clearly marked with the year to which the table refers.

### HASS

- Table 1** Accident mechanism by age and sex
- Table 2** Accident mechanism by location within the home
- Table 3** Accident mechanism by activity of the patient at the time
- Table 4** Location of accident within the home by age
- Table 5** Type of injury by age
- Table 6** Type of injury by part of body injured
- Table 7** Outcome of initial visit to A & E by age
- Table 8** Duration of inpatient stay by age
- Table 9** General categories of products, articles and features of the home involved in accidents

### LASS

- Table 1** Accident mechanism by age and sex
- Table 2** Location of accident by age
- Table 3** Activity of the patient at the time of the accident by age
- Table 4** Sporting activity by age and sex
- Table 5** Type of injury by sporting activity
- Table 6** Type of injury by age
- Table 7** Type of injury by part of body injured
- Table 8** Outcome of initial visit to A & E by age
- Table 9** Duration of inpatient stay by age
- Table 10** General categories of products, articles and features of the environment involved in leisure accidents

NB From mid-1992 to December 1995 HASS/LASS interviewers at each hospital collected only a 50 per cent sample of all leisure accidents, based on an 'every other day' sampling. This factor needs to be taken into account in any analysis of LASS figures from 1992-95.

# 4

## Annexes

## Annex 1

### HASS field list

The following fields relate to accident occurrence. Each is featured on the accident questionnaire that DTI clerks complete to gain a more comprehensive picture of the accident.

#### Accident

- 1 Home/leisure
- 2 Date
- 3 Time
- 4 Mechanism
- 5 Fall type
- 6 Location
- 7 Building type
- 8 Description

#### Victim

- 9 Activity/sport
- 10 At normal residence?
- 11 Role in accident
- 12 Age
- 13 Sex
- 14 Employment

#### Attendance

- 15 Hospital
- 16 Date
- 17 Time
- 18 Ambulance?
- 19 Source of data
- 20 Informant relationship
- 21 Outcome
- 22 Inpatient days

#### Article

- 23 Article
- 24 Type/brand/model
- 25 Fuel
- 26 Acquisition
- 27 Age
- 28 Article causing injury

#### Injury

- 29 Injury
- 30 Body part injured

NB Some relatively minor changes were made to the coding/ recording of a minority of fields with the change from HASS 2 to HASS 3, which may give rise to discontinuity in time trends when comparing 2000-2 data for these fields with data from earlier years. Please seek RoSPA's guidance on this when making specific queries. Contact details for RoSPA are:

The Information Centre  
 The Royal Society for the Prevention of Accidents  
 Edgbaston Park  
 353 Bristol Road  
 Birmingham B5 7ST  
 Email: [infocentre@rospa.com](mailto:infocentre@rospa.com)  
 Fax: 0121 248 2001  
 Tel: 0121 248 2066

Hospital:

**Consumers Safety  
Accident Surveillance Report**

Form raising clerk:  Type: LA  HA

Day:

Date:

Time of attendance:

Casualty Number:

**If Accident Involved Other Patients**

Number of patients involved:  Accident reference casualty number:

Brought in by ambulance: Yes  No  Unk

Clerk on duty: Yes  No  Unk

Receptionist on duty: Yes  No  Unk

**Source:** clerk  receptionist  adult patient  child patient with adult  accompanying adult

Relationship to patient:  Medical records only (no interview)

Interview by:  or  or  or

**Reason for not interviewing the patient** Please state in the box below the reason for the lack of interview when the clerk is on duty.

**Introduction**

As you know, a great many accidents happen every day. To try and cut down on the number of these accidents, we are carrying out a special study. We are interested in all accidents regardless of how they happened - whether through faulty goods, carelessness or whatever the causes. So I'd like to ask you a few simple questions about your/this particular accident.

**Accident details**

When did the accident happen? Date?  Time?

Could you describe as fully as possible how the accident occurred?

Can I just check, was a fall of any kind involved in the accident? What kind of fall was it?

Fall on same level from tripping etc  Fall on or from stairs or steps  Fall on or from ladder  Fall from or out of building/structure  Fall off with motor cycle or horse  Other fall from one level to another  Unspec type of fall  No fall involved  Unknown if any at all

**Cause:** What caused the accident?

**Article involvement**

What articles, equipment or building features were in any way involved in the accident (and the injury)? (where applicable establish type, brand, condition and age of article mentioned and if it was acquired new, second hand, hired or borrowed)

Can I just check, was any protective equipment being used or worn?

	1	2	3	4
Article etc				
Specific Type				
Make/Brand and Model				
New/Secondhand Hired/Borrowed				
Age/Approx/Condition Fuel/Power				

**Location:** Could you describe as fully as possible where exactly the accident happened?

**Accident in Home/Garden Only:** In/outside what kind of building did the accident happen?:

Is this normal residence? Yes  No  Unk

*(House: Ask if terraced/detached/bungalow) (Flat: Ask if self contained?, a conversion?, on 2 floors? part of business premises?)*

**Activity:** What were you/the patient doing when the accident happened?

Can I just check, was any sport or exercise involved in the accident?

**Sports Only** What sport was it?  Was there a referee, coach or teacher in charge of the activity? Yes  No  Unk

**Explanation of the follow-up**

It might be helpful for us to have a few more details about the accident. Would it be alright for someone to get in touch with you at home in the near future to do this?

Yes  No  Postal only  Unk

**Ask of Adults only**

Do you have a full-time or part-time job, or are you a full-time student?  CSU1

Initials  Sex  M  F Age  Years  mths **or** Date of Birth  Postcode

**Injuries**

(1) Part of body injured: <input type="text"/>	Article causing injury: <input type="text"/>
Injuries: <input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
(2) Part of body injured: <input type="text"/>	Article causing injury: <input type="text"/>
Injuries: <input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
(3) Part of body injured: <input type="text"/>	Article causing injury: <input type="text"/>
Injuries: <input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
(4) Part of body injured: <input type="text"/>	Article causing injury: <input type="text"/>
Injuries: <input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

**Outcome/Disposal**

Dead on arrival/before admission.

Admitted to this hospital → left on  and:

<input type="checkbox"/> Admitted to <input type="text"/> (type of hospital) <input type="checkbox"/> Referred to <b>any</b> outpatient department <input type="checkbox"/> Referred to GP <input type="checkbox"/> Treated, no further treatment specified <input type="checkbox"/> Examined but not treated <input type="checkbox"/> Did not wait <input type="checkbox"/> Unknown outcome/records lost <input type="checkbox"/> Other outcome/disposal: <input type="text"/>	<input type="checkbox"/> Still inpatient after 30 days <input type="checkbox"/> Unknown Outcome/Records Lost <input type="checkbox"/> Died while inpatient on: <input type="text"/>	<input type="checkbox"/> Transferred (as IP) to <input type="text"/> (type of hospital) <input type="checkbox"/> Referred to <b>any</b> outpatient department <input type="checkbox"/> Referred to GP <input type="checkbox"/> No further treatment specified <input type="checkbox"/> Other outcome/disposal: <input type="text"/>
--	---	---

**Special Studies Only:**Bleed Alcohol:  mg/100ml

SS1

SS2

Name: code:  no. Address:

## Annex 2

### Types of accident

Fall on same level	Fall on same level (slip/trip/stumble)
Fall on/from stairs	Fall on/from stairs/steps
Fall on/from ladder	Fall on/from ladder/stepladder
Fall from building	Fall from building/structure
Fall off cycle etc	Fall off/with (motor)cycle/horse/etc.
Other fall	Other fall from one level to another Unspecified fall
Slip/trip	Slip/trip no fall involved
Body part gave way	Body part gave way no fall involved Unspecified fall
Struck – explosion	Struck by blast/objects from explosion
Struck – moving object	Struck by/against moving objects
Struck – static object	Struck against stationary object
Struck – other	Struck by/against moving person/animal Struck against stationary person/animal Unspecified striking accident
Friction burn	Friction burn caused by contact/rubbing Unspecified striking accident
Pinch/crush (blunt)	Pinch/crush between blunt surfaces
Cut/tear (sharp)	Cut/tear by sharp edge(s)
Puncture	Skin puncture by foreign body/spike/shot
Bite/sting	Bite/sting by animal/insect

Foreign body	Foreign body in eye Foreign body in ear/nose/other orifice Foreign body in stomach/digestive system
Suffocation	Strangulation – external neck constriction External; blocking of mouth and nose Choking on foreign body in throat etc Drowning/near-drowning/submersion Chest compression preventing breathing Other suffocation/choking/asphyxiation Unspecified suffocation/choking/asphyxiation
(Suspected) poisoning	Suspected poisoning by solid Suspected poisoning by liquid Suspected poisoning by gas Allergic reaction Suspected poisoning by unspecified form
Chemical effect	Corrosion, chemical burn by solid Corrosion, chemical burn by liquid Corrosion, chemical burn by gas Corrosion, chemical burn by unspecified form Other chemical effect
Thermal effect	Burn/scald by hot liquid/steam/gas Burn by hot object/appliance Burn by controlled fire/flame Any injury from uncontrolled fire/flame Exposure/hypothermia/cold burn Burn from explosion of gas, firework, etc Other thermal effect Unspecified effect
Electric/radiation	Shock or burn from electric current Radiation effect (including sunburn, arc eye) Effect of sound waves/noise
Acute overexertion	(no further explanation)

Other  
Other mechanism  
Unknown mechanism

## Activity definition

Household activity	Food preparation/serving without heating Cooking, food preparation using heat Dishwashing/other meal activity Laundry, hanging out/ironing washing Cleaning/dusting/sweeping/polishing Other general/routine household activity
DIY/maintenance	Electrical repairs/maintenance/DIY Servicing/repairing/cleaning car/vehicle Garden digging/mowing/clearing/watering Lifting/pushing heavy furniture/car etc Other DIY/carpentry/repairing/decorating
Shopping	Shopping, buying anything, carrying home
Education/training	Sport/physical education – school/college Tuition/studying/training Other education activity (including practical) Unspecified education activity
Sport (excluding education)	Sport/exercise – organised (excluding education) Sport/exercise – unorganised Sport/exercise – unspecified if organised Sport unknown if education or not Unspecified cycling
Play/hobby/leisure	Spectating/watching sport/exercise Spectating/watching film/TV/display/show Children playing (exclude sport) Adult leisure (exclude sport) Care/training/exercise of animals etc Play fighting Other playing/hobby/leisure activity
Basic needs	Eating, drinking, feeding Resting/sleeping/relaxing/sitting/lying Walking/moving about home/garden

Walking/moving about generally  
 Wash/bath/dressing, personal hygiene  
 Other basic needs

### Travelling/touring

Walking/running for need/leisure (excluding sport)  
 Cycling for need/leisure (excluding sport)  
 Riding motorcycle/moped (excluding sport)  
 Driver/occupant of vehicle (excluding sport)  
 Horse (vehicle) riding (excluding sport)  
 Sailing/boating for need/leisure (excluding sport)  
 Other travelling/cruising (rail/air/water)

### Other unspecified activity

Other activity  
 Unspecified activity

## Injury definition

### Superficial injury

Abrasion, graze, scratch  
 Splinter/foreign body in/under skin

### Open wound

Minor puncture wound  
 Deep/major puncture wound  
 Unspecified puncture wound  
 Cut/laceration-superficial  
 Cut/laceration under 5cm long  
 Cut/laceration 5–10cm long  
 Cut/laceration 11–20cm long  
 Cut/laceration over 20cm long  
 Cut/laceration – unspecified length  
 Minor tear/avulsion/other open wound  
 Major tear/avulsion/other open wound  
 Unspec tear/avulsion/other open wound  
 Amputation, tooth loss

### Burn

Frost-bite/cold burn  
 Radiation injury, sunburn, arc eye  
 Burn from electric shock  
 Burn/scald – minor/superficial  
 Burn/scald – partial thickness  
 Burn/scald – full thickness/severe/major  
 Burn/scald – unspecified severity/thickness

### Bruise/contusion

(No further explanation)

Concussion	<p>Concussion: no/brief unconsciousness</p> <p>Concussion: under 1hr unconsciousness</p> <p>Concussion: 1–6hr(s) unconsciousness</p> <p>Concussion: over 6hr unconsciousness</p> <p>Concussion: unconsciousness unspecified</p>
Other soft-tissue injury	<p>Haemorrhage/other injury to artery/vein</p> <p>Muscle/tendon injury</p> <p>Injury to nerve/spinal cord</p> <p>Unspecified tenderness/swelling</p>
Bone injury	<p>Fracture – closed/ordinary</p> <p>Fracture – open/compound</p> <p>Suspected fracture</p> <p>Fracture – unspecified type</p> <p>Crushing</p>
Joint/tendon injury	<p>Dislocation/luxation</p> <p>Whiplash injury</p> <p>Sprain/strain</p> <p>Twist to joint</p>
Chemical injury	<p>Poisoning/toxicity (diagnosed/treated)</p> <p>Corrosion, caustic/chemical burn</p> <p>Effect of sting/poisoning bite</p> <p>Allergic reaction to food/chemical</p> <p>Infection of wound etc</p> <p>Unknown/unspecified injury</p>
Systemic injury	<p>Electrocution, effect of electric shock</p> <p>Asphyxia, suffocation, choking</p> <p>Exhaustion, exposure, state of shock</p>
Non-injurious foreign body	<p>Foreign body in eye without injury</p> <p>Suspected foreign body in eye – no injury</p> <p>Foreign body in ear/nose/orifice – no injury</p> <p>Suspected foreign body in orifice – no injury</p> <p>Foreign body in digestive system – no injury</p> <p>Suspected foreign body in digestive – no injury</p>

Injurious foreign body	Foreign body in eye – injury (inc infection) Susp foreign body in eye – injury (inc. infection) Foreign body in digestive system – injury Susp foreign body in digestive system – injury Foreign body in ear/nose – injury (inc. infection)
No diagnosed injury	(No further explanation)
Other injury	Other internal injury Multiple injury Other injury
Unspecified injury	(No further explanation)

## Body part definition

Head	<p>Eye, nose, cornea, iris, retina            Nose, nasal bone            Tooth, teeth            Jaw, mandible            Mouth, cavity, lip, tongue, gum, gingiva            Face, forehead, cheek, chin, eyebrow, maxilla            Ear            Brain, cerebrum, pituitary, cranial nerve            Skull, cranium, parietal occipital            Other head part, scalp, hair            Unspecified head part, whole head</p>
Neck/throat	<p>Neck/external throat            Internal throat, larynx, thyroid            Cervical spine/vertebrae, hyoid            Unspecified neck</p>
Thorax/chest	<p>Upper back            Rib, sternum, upper back, external chest, breast            Collar bone, clavicle            Lung, bronchus, trachea            Heart, myocardium, pericardium            Upper/thoracic spine, vertebrae            Other thorax, including blood vessels            Unspecified thorax/upper trunk</p>
Lower trunk	<p>Digestive system, stomach, intestine, bowel            Liver, kidney, spleen, bladder, pancreas            Genital, vulva, vagina, penis, scrotum etc            Belly/abdomen 'stomach'            Lower back, buttock, anus            Hip, pelvic bone, pubis, ilium, ischium            Lumbar spine/vertebrae, sacrum, coccyx            Unspecified spinal column/vertebrae/back            Lower trunk/pelvis – unspecified part</p>

Arm/upper limb	Shoulder, scapula, acromion Upper arm, humerus Elbow, olecranon process Lower arm, radius, ulna Wrist, carpus Hand, palm, metacarpal Finger, thumb, digit, phalange Arm-unspecified part
Leg/lower limb	Upper leg, thigh, femur Knee, patella Lower leg, tibia, fibula Ankle, talus Foot, metatarsal Toe, phalange Leg-unspecified part
Surface area	Under 25 per cent body surface affected 25-50 per cent body surface affected Over 50 per cent body surface affected Unspecified percentage of body surface affected
Whole body affected	Whole body affected
Other/unspecified	Other body part Unspecified body part

## Sport category definition

### Athletics

Track running  
Hurdle race running  
Marathon race  
Cross-country/fell running, orienteering  
Jogging  
Walking (as race)  
Other running  
Unspecified running  
Javelin throwing  
Shot-put  
Discus throwing  
Hammer throwing  
Other throwing  
High jump  
Pole vaulting  
Long jump  
Hop, step and jump  
Other jumping  
Unspecified jumping  
Other athletics  
Unspecified athletics

### Gymnastics

Mat/floor gymnastics  
Horizontal bars  
Parallel bars  
Gymnastic beam/boom  
Flying rings  
Horse/vaulting box  
Trampoline  
Wall bar  
Gymnastic rope  
Other equipment-gymnastics  
Gymnastic clubs  
Gymnastic hoop  
Gymnastic ball  
Skipping rope  
Other manual gymnastics  
Other gymnastics  
Unspecified gymnastics

## Stick etc sport

Tennis  
Squash  
Badminton  
Table tennis  
Other racket sport  
Baseball  
Cricket  
Rounders  
Other bat sport  
Hockey  
Ice hockey  
Bandy, on ice  
Bandy indoors  
Roller skate hockey  
Hurling/camogie  
Lacrosse  
Other stick sport  
Golf  
Croquet  
Other individual stick sport  
Billiards  
Snooker  
Pool  
Other stick etc sport  
Unspecified stick/etc sport

## Ball sport – no stick

Football (soccer)  
Rugby football  
American football  
Gaelic football  
Other football  
Handball  
Volleyball  
Basketball  
Netball  
Bowling on green  
Bowling-lane/alley  
Petanque/boule etc  
Other bowling  
Unspecified bowling

	Other ball sport
	Unspecified ball sport
Combat sport	Boxing
	Greek/Roman wrestling
	All-in wrestling
	Other wrestling
	Unspecified wrestling
	Jujitsu
	Karate
	Judo
	Aikido
	Kendo
	Tai-kwon-do
	Other martial art
	Unspecified martial art
	Fencing
	Other combat sport
	Unspecified combat sport
Shooting	Archery
	Crossbow
	Pistol (target) shooting
	Rifle (target) shooting
	Clay pigeon shooting
	Field sport shooting
	Paintball skirmish
	Other gun shooting
	Unspecified gun shooting
	Darts
Wheel sport	Road cycling (sport)
	Cycling on track
	BMX scrambling
	Trick cycling
	Other sport cycling
	Unspecified sport cycling
	Road/motorcycle racing
	Speedway
	Motocross/scramble
	Other motorcycle sport
	Unspecified motorcycle sport
	Go-kart

Car racing/rallying  
Roller skating  
Roller ski  
Skateboarding  
Other wheel sport  
Unspecified wheel sport

#### Animal sport

Horse riding  
Horse racing (flat)  
Trotting race  
Show jumping  
Steeplechase  
Polo on horseback  
Point-to-point race  
Other horse sport  
Unspecified horse sport  
Other sport with dogs  
Fox-hunting  
Other animal sport  
Unspecified animal sport

#### Winter sport

Cross-country skiing  
Downhill racing  
Slalom  
Telemark  
Ski jump  
Ski bob  
Skiboard/snowboard  
Winter biathlon  
Other skiing  
Unspec skiing  
Sledging/tobogganing  
Bobsleighing  
Other sledging  
Snow motor-scooting  
Ice skating  
Figure skating  
Ice-skate racing  
Skating with sail  
Other ice skating  
Unspecified ice skating  
Ice boating  
Other winter sport  
Unspecified winter sport

## Landscape sport

Rambling/hiking  
Climbing/mountaineering  
Caving/pot-holing

## Water sport

Swimming in pool  
Swimming – open water  
Water polo  
Sub-aqua/skin diving  
Diving off board etc  
Other swimming  
Unspecified swimming  
Water skiing  
Rowing in canoe  
Rowing in kayak  
Crew rowing  
Sculling  
Other row/paddling  
Unspecified row/paddling  
Windsurfing  
Surfboarding  
Boat sailing  
Motorboating  
Water motor scooting  
Other boating  
Unspecified boating  
Fishing/angling  
Other water sport

## Air sport

Parachuting  
Balloon flying  
Flying with kite  
Hang-gliding  
Gliding  
Other unmotor flight  
Unspecified unmotor flight  
Microlighting  
Flying aircraft  
Other motor flying  
Unspecified motor flying  
Other air sport

## Exercise/fitness

Weight lifting

Power lift  
Other lifting  
Muscle/body building  
Dancing/movement  
Aerobics/fitness  
Yoga/t'ai chi/etc  
Assault course/abseil  
Unspecified PE class  
Other exercise  
Unspecified exercise

Other unspecified sport

Highland games  
Tug of war  
Other local/folk sport  
Other sport  
Unspecified sport

