**PURPOSE STATEMENT:**

The purpose of this policy is to explain how the Workers Compensation Board (WCB) determines whether an injury or condition is considered to be a work-related repetitive strain injury.

**REFERENCE:**

*Workers Compensation Act R.S.P.E.I. 1988, Cap. W-7.1, Section 18*

Workers Compensation Board Policy, POL-71, Conditions for Entitlement

Workers Compensation Board policy, POL-90, Time Frame Limitations for Claims Filing and Invoicing

Workers Compensation Board Policy, POL-160, Decision Making

**DEFINITION:**

In this policy:

“Repetitive strain injury” means a variety of medical conditions affecting muscles, tendons or ligaments caused by repetition, force, or maintenance of sustained or dynamic awkward postures.
POLICY:

1. A repetitive strain injury is the result of the cumulative effect of activities and conditions. Injuries of this type are not attributable to a single incident.

2. A repetitive strain injury affects muscles, tendons or ligaments and may include, but is not limited to, tendinitis, bursitis, carpal tunnel syndrome, and tennis elbow.

3. For a claim to be accepted as a repetitive strain injury, all of the following criteria must be met:
   - There must be sufficient evidence of significant risk factors for the development of a repetitive strain injury related to work activities.
   - The medical information must support the diagnosis of a repetitive strain injury.
   - The repetitive strain injury must be work-related, i.e., the activities that caused the injury must have happened at a time and place that is consistent with work, and while in the course of an activity whose purpose is related to work.

4. The Workers Compensation Board (WCB) makes initial and ongoing decisions on claims for repetitive strain injuries using the principles set out in this policy and WCB policy, POL-71, Conditions for Entitlement.

5. If the criteria for a repetitive strain injury are not met, the WCB will determine whether the claim meets the conditions for entitlement as another type of injury.

**Risk Factors**

6. Determining whether a repetitive strain injury is work-related requires an analysis of risk factors and the impact on the part of body injured. There must be sufficient evidence of significant risk factors related to work activities to be considered a work-related repetitive strain injury. All relevant information, including significant risk factors outside of work, will be considered.

7. Risk factors vary depending on the part of body involved. Generally, the major risk factors for repetitive strain injury in the workplace are:
   - Repetition - the number of times the specific activity(s) is repeated and the percentage of the workday during which it occurs.
8. Repetition and force are the primary risk factors involved in repetitive strain injuries, with awkward posture increasing the effect of the two primary factors. If work involves high force and high repetition, this indicates a high probability of a relationship between the repetitive strain injury and work. This probability is increased with awkward posture. Low force and low repetition indicate a low probability of a relationship to work.

9. To investigate whether the risk factors are present for the development of a repetitive strain injury, the WCB may arrange for an Occupational Therapist assessment of the work activities. The Occupational Therapist will, if possible, assess the worker performing the workplace activities to evaluate the extent of exposure to relevant risk factors including repetition, force and awkward posture. The following factors may also be considered:

- Vibration
- Frequency
- Duration of task or employment
- Recovery time/ biological resting
- Individual work style
- Unaccustomed activity
- Extreme cold temperatures

10. Medical evidence and research is used to evaluate the impact of each risk factor which varies depending on the diagnosis and the part of body involved. The extent to which the activity or risk factor is a significant component of the employment will be considered.

Carpal Tunnel Syndrome

11. Where the repetitive strain injury is carpal tunnel syndrome and is bilateral (involving both wrists), the WCB will consider whether both wrists became symptomatic at the same time and the degree to which each hand/wrist is utilized in carrying out the employment activities. Research indicates that since both hands may not perform identical activities and are therefore subject to different risk factors, a work-related
carpal tunnel syndrome may be more likely to be unilateral. The diagnosis of bilateral carpal tunnel syndrome is more probably due to non-occupational risk factors such as a systemic illness.

**Work-Relatedness**

12. The presence of the following circumstances, although not conclusive, may support a relationship to work:
   - Precise symptom onset during work activity.
   - New to the activities in the job.
   - Recent increase in activities at work.
   - Improved symptoms away from work.

13. The presence of the following circumstances, although not conclusive, may support that the diagnosis is not related to work:
   - Symptom onset away from employment.
   - Activities performed for many years.
   - Recent increase in activities outside work.
   - Other medical considerations (conditions, medications or therapies).
   - Bilateral symptoms without bilateral activity.
   - Continued or increasing symptoms away from work.

14. A repetitive strain injury will be determined to be work-related if, having weighed all of the available evidence, and on the balance of probabilities, the work-related risk factors are more likely to have caused the repetitive strain injury than non-work-related risk factors, as set out in WCB policy, POL-160, Decision Making.

**Date of Accident**

15. The date of accident for repetitive strain injuries is outlined in WCB policy, POL-90, Time Frame Limitations for Claims Filing and Invoicing.

**HISTORY:**

September 15, 2021 - Non-substantive changes to provide additional context about claim decisions and the analysis of risk factors.
July 23, 2020 – Non-substantive changes to reflect new policy, Decision Making (POL-160).

December 13, 2018 - Amended to set out the criteria for acceptance of repetitive strain injuries, provide clarification on how the WCB determines if a repetitive strain injury is work-related, and expand the application of the policy beyond upper extremities to other parts of body.

September 12, 2016 - Non-substantive changes to reference Workers Compensation Board policy, POL-90, “Time Frame Limitations for Claims Filing and Invoicing.”

March 29, 2012 - Amended to include the content of POL-79, “Carpal Tunnel Syndrome”, which was rescinded.

July 31, 2008 - Amended to add #6, which clarifies what the WCB considers to be the date of accident for repetitive strain injuries.

March 30, 2006 - Amended to reflect an updated review of the medical literature on repetitive strain injuries.


Board of Directors Approval Date: June 27, 2002