Reference Determination Content

Example document — fictitious patient. A suggested draft determination prepared by the Veterans Health Centre from the matching example Diagnostic Assessment, to show how a DVA delegate could determine the claim. Names, dates, service details and clinicians are invented. It is not a decision of the Department of Veterans' Affairs.

Back Rash/Heat Rash

Evidence

The evidence that I have considered in making this decision includes:

- Formal Claim with supporting statements;
- A Statement of your Service from the Department of Defence;
- Copies of your Service Medical Records.
- A Diagnostic Assessment by Dr Thomas Perkins, General Practitioner, Veterans Health Centre, dated 14 October 2025;
- A Diagnosis Form (D9287) by Dr Thomas Perkins, General Practitioner, Veterans Health Centre, dated 14 October 2025;
- A pre-deployment health check by the medical officer, dated 12 October 1999;
- A regimental aid post record by the medic, East Timor, dated 3 December 1999;
- A field hospital admission and discharge record by the east timor, dated 5 December 1999;
- A deployed health record by the regimental medical officer, East Timor, dated 9 December 1999;
- An outpatient health record by the medical officer, Garrison health centre, dated 14 February 2003;
- A deployed health record and wound swab report by the medical officer, Iraq, dated 18 July 2006;
- A heat illness casualty report by Role 2 facility, Iraq, dated 20 July 2006;
- A dermatology consultation and sweat test by the dermatologist, dated 12 December 2006.

Your service

I have identified that you have the following service:
Australian Defence Force service between :

20 January 1998 and 30 June 2012

Back Rash/Heat Rash

You have stated that your condition was caused by:

- *being exposed to a hot and humid environment causing sustained heavy sweating for at least 3 days within the 7 days before the clinical onset of miliaria*
- *wearing occlusive clothing or equipment over the affected skin for at least 8 hours a day on at least 3 days within the 7 days before the clinical onset of miliaria*
- *undertaking strenuous physical exertion producing heavy sweating within the 7 days before the clinical onset of miliaria*
- *relocating from a temperate to a tropical climate without acclimatisation within the 3 months before the clinical onset of miliaria*
- *having sunburn of the affected skin within the 7 days before the clinical onset of miliaria*
- *having occlusive topical preparations or dressings applied to the affected skin within the 7 days before the clinical onset of miliaria*
- *having a febrile illness within the 7 days before the clinical onset of miliaria*
- *being confined to bed lying on the affected skin on an impermeable surface for at least 24 hours within the 7 days before the clinical onset of miliaria*
- *being unable to wash the affected skin or change sweat-soaked clothing for at least 3 consecutive days within the 7 days before the clinical onset of miliaria*

Diagnosis: Back Rash/Heat Rash

Basis of diagnosis: The diagnosis was made in the Diagnostic Assessment by Dr Thomas Perkins dated 14 October 2025, and is supported by a deployed health record by the regimental medical officer, East Timor, dated 9 December 1999.

I am satisfied this is the appropriate diagnosis.
There is no Statement of Principles (SOP) for this condition. In determining your claim for this condition, I have therefore considered the available evidence, applying the standard of proof:

Reasonable Hypothesis - no Statement of Principles determined for this condition

which requires the evidence to connect the condition with service.

I am satisfied that the evidence establishes the following link to your service:

- *being exposed to a hot and humid environment causing sustained heavy sweating for at least 3 days within the 7 days before the clinical onset of miliaria*
- *wearing occlusive clothing or equipment over the affected skin for at least 8 hours a day on at least 3 days within the 7 days before the clinical onset of miliaria*
- *undertaking strenuous physical exertion producing heavy sweating within the 7 days before the clinical onset of miliaria*
- *relocating from a temperate to a tropical climate without acclimatisation within the 3 months before the clinical onset of miliaria*
- *having sunburn of the affected skin within the 7 days before the clinical onset of miliaria*

- *having occlusive topical preparations or dressings applied to the affected skin within the 7 days before the clinical onset of miliaria*
- *having a febrile illness within the 7 days before the clinical onset of miliaria*
- *being confined to bed lying on the affected skin on an impermeable surface for at least 24 hours within the 7 days before the clinical onset of miliaria*
- *being unable to wash the affected skin or change sweat-soaked clothing for at least 3 consecutive days within the 7 days before the clinical onset of miliaria*

I have noted your contention as to the cause of this condition. The available evidence indicates, I have noted your contention to the cause of your condition. Your service medical records indicate that you presented to the health facility with an intensely itchy, prickling and stinging rash across the upper and mid back, worse with heat, sweating and the rubbing of body armour, which disturbed your sleep.Since the worsening in 2006 the rash recurs with heat, exertion and occlusive clothing, sometimes with painful pustules and deeper lumps on 9 December 1999.

The diagnosis was made by the regimental medical officer on 9 December 1999 on the characteristic clinical findings of numerous itchy erythematous papules and papulovesicles centred on sweat pores, sparing the hair follicles, in the occluded skin of the back, arising after heavy sweating in a hot and humid environment. Miliaria is a clinical diagnosis and needs no imaging.

This has then led to further investigations and the diagnosis of your condition of *Back Rash/Heat Rash*. I have accepted your condition of *Back Rash/Heat Rash*.

Having considered your service records and the available medical evidence, I am satisfied the evidence establishes that this condition is related to your wartime service.

I have therefore accepted that this condition is related to your service with effect from 8 December 1999.

Back Rash/Heat Rash (Worsening)

Evidence

The evidence that I have considered in making this decision includes:

- Formal Claim with supporting statements;
- A Statement of your Service from the Department of Defence;
- Copies of your Service Medical Records.
- A Diagnostic Assessment by Dr Thomas Perkins, General Practitioner, Veterans Health Centre, dated 14 October 2025;
- A Diagnosis Form (D9287) by Dr Thomas Perkins, General Practitioner, Veterans Health Centre, dated 14 October 2025;
- A pre-deployment health check by the medical officer, dated 12 October 1999;
- A regimental aid post record by the medic, East Timor, dated 3 December 1999;
- A field hospital admission and discharge record by the east timor, dated 5 December 1999;
- A deployed health record by the regimental medical officer, East Timor, dated 9 December 1999;
- An outpatient health record by the medical officer, Garrison health centre, dated 14 February 2003;
- A deployed health record and wound swab report by the medical officer, Iraq, dated 18 July 2006;
- A heat illness casualty report by Role 2 facility, Iraq, dated 20 July 2006;
- A dermatology consultation and sweat test by the dermatologist, dated 12 December 2006.

Your service

I have identified that you have the following service:
Australian Defence Force service between :

20 January 1998 and 30 June 2012

Back Rash/Heat Rash (Worsening)

You have stated that the worsening of your condition was caused by:

- *being exposed to a hot environment while wearing occlusive clothing or equipment, with heavy sweating, within the 7 days before the clinical worsening of miliaria*
- *having a secondary bacterial infection of the affected skin at the time of the clinical worsening of miliaria*
- *having repeated episodes of miliaria in the same skin region after the clinical onset of miliaria and before the clinical worsening of miliaria*
- *inability to obtain appropriate clinical management for miliaria*

Diagnosis: Back Rash/Heat Rash (Worsening)

Basis of diagnosis: The diagnosis was made in the Diagnostic Assessment by Dr Thomas Perkins dated 14 October 2025, and is supported by a deployed health record by the regimental medical officer, East Timor, dated 9 December 1999.

I am satisfied this is the appropriate diagnosis.
There is no Statement of Principles (SOP) for this condition. In determining your claim for this condition, I have therefore considered the available evidence, applying the standard of proof:

Reasonable Hypothesis - no Statement of Principles determined for this condition

which requires the evidence to connect the condition with service.

I am satisfied that the evidence establishes the following link to your service:

- *being exposed to a hot environment while wearing occlusive clothing or equipment, with heavy sweating, within the 7 days before the clinical worsening of miliaria*
- *having a secondary bacterial infection of the affected skin at the time of the clinical worsening of miliaria*
- *having repeated episodes of miliaria in the same skin region after the clinical onset of miliaria and before the clinical worsening of miliaria*
- *inability to obtain appropriate clinical management for miliaria*

I have noted your contention as to the cause of this condition. The available evidence indicates, I have noted your contention to the cause of your condition. Your service medical records indicate that you presented to the health facility with an intensely itchy, prickling and stinging rash across the upper and mid back, worse with heat, sweating and the rubbing of body armour, which disturbed your sleep.Since the worsening in 2006 the rash recurs with heat, exertion and occlusive clothing, sometimes with painful pustules and deeper lumps on 9 December 1999.

The diagnosis was made by the regimental medical officer on 9 December 1999 on the characteristic clinical findings of numerous itchy erythematous papules and papulovesicles centred on sweat pores, sparing the hair follicles, in the occluded skin of the back, arising after heavy sweating in a hot and humid environment. Miliaria is a clinical diagnosis and needs no imaging.

After the condition arose, it was worsened during your service. From 11 to 18 July 2006, on warlike service in Iraq, you patrolled daily in body armour in temperatures of 46 to 50 degrees, with heavy sweating, in the 7 days before the documented worsening on 18 July 2006. Swabs of the pustular rash on 18 July 2006 grew Staphylococcus aureus. You had at least three recurrences of heat rash on your back between 2000 and February 2003 during field exercises in body armour in the Darwin wet season, recorded by your medical officer. On warlike service in Iraq in July 2006 you had no access to a dermatologist, to cooled accommodation or to relief from

wearing body armour, and you continued patrolling with an infected, deepening rash until you collapsed with heat exhaustion.

This has then led to further investigations and the diagnosis of your condition of *Back Rash/Heat Rash (Worsening)*. I have accepted your condition of *Back Rash/Heat Rash (Worsening)*.

Having considered your service records and the available medical evidence, I am satisfied the evidence establishes that the worsening of this condition is related to your wartime service.

I have therefore accepted that the worsening of this condition is related to your service with effect from 18 July 2006.

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