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 - Solar Keratosis

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 11 February 2025;
- A Diagnosis Form (D9287) by Dr Thomas Perkins, General Practitioner, Veterans Health Centre, dated 11 February 2025;
- A regimental aid post record by the medical officer, Malaya, dated 20 December 1941;
- A prisoner of war camp medical notes by the camp medical officer, Changi, dated 30 June 1942;
- A post-liberation medical examination and statement by the medical officer, dated 15 September 1945;
- A periodic health examination by the medical officer, Army health centre, dated 14 August 1962;
- A dermatology consultation by the dermatologist, Repatriation hospital, dated 15 March 1965;
- A renal transplant discharge summary by the renal physician, dated 14 March 1968;
- A dermatology review by the dermatologist, dated 5 October 1970;
- An outpatient review by the repatriation medical officer, dated 12 February 1971;
- An outpatient consultation by the repatriation medical officer, dated 6 May 1971;
- A skin biopsy report by the pathologist, dated 2 June 1971;
- A dermatology consultation and biopsy report by the dermatologist, dated 18 September 1974.

Your service

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

22 January 1941 and 12 June 1968

Back - Solar Keratosis

You have stated that your condition was caused by:

- *having sunlight exposure to unprotected skin at the affected site for a cumulative period of at least 2,250 hours while in a tropical area, or having equivalent sunlight exposure in other latitude zones, before the clinical onset of solar keratosis*
- *having sunburn as specified: (a) on at least 5 occasions: (i) before the age of 20 years; and (ii) at least 5 years before the clinical onset of solar keratosis; and (b) where the clinical onset of solar keratosis has occurred before the age of 50 years*
- *being a prisoner of war of Japan before the clinical onset of solar keratosis*
- *having exposure of the affected region to welding light, while arc-welding metal without skin protection, for a cumulative period of at least 12,000 hours before the clinical onset of solar keratosis*
- *undergoing organ or tissue transplantation, excluding corneal transplant, before the clinical onset of solar keratosis*
- *having PUVA therapy involving the affected site where: (a) the first PUVA treatment commenced at least 5 years before the clinical onset of solar keratosis; and (b) at least 25 PUVA treatments were administered before the clinical onset of solar keratosis*
- *taking hydroxyurea or voriconazole for at least the 3 months before the clinical onset of solar keratosis*

Diagnosis: Solar Keratosis

Basis of diagnosis: The diagnosis was made in the Diagnostic Assessment by Dr Thomas Perkins dated 11 February 2025, and is supported by a skin biopsy report by the pathologist, dated 2 June 1971.

I am satisfied this is the appropriate diagnosis.
In determining your claim for this condition, I have applied the SOP:

Statement of Principles concerning Solar Keratosis (Reasonable Hypothesis) (No. 79 of 2021)

which sets out the factors that can connect the condition with service.

I am satisfied that you have met the following factor:

- *having sunlight exposure to unprotected skin at the affected site for a cumulative period of at least 2,250 hours while in a tropical area, or having equivalent sunlight exposure in other latitude zones, before the clinical onset of solar keratosis*
- *having sunburn as specified: (a) on at least 5 occasions: (i) before the age of 20 years; and (ii) at least 5 years before the clinical onset of solar keratosis; and (b) where the clinical onset of solar keratosis has occurred before the age of 50 years*

- *being a prisoner of war of Japan before the clinical onset of solar keratosis*
- *having exposure of the affected region to welding light, while arc-welding metal without skin protection, for a cumulative period of at least 12,000 hours before the clinical onset of solar keratosis*
- *undergoing organ or tissue transplantation, excluding corneal transplant, before the clinical onset of solar keratosis*
- *having PUVA therapy involving the affected site where: (a) the first PUVA treatment commenced at least 5 years before the clinical onset of solar keratosis; and (b) at least 25 PUVA treatments were administered before the clinical onset of solar keratosis*
- *taking hydroxyurea or voriconazole for at least the 3 months before the clinical onset of solar keratosis*

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 rough, scaly, tender spots on the upper back and shoulders that caught on clothing and bled when scratched.By 1974 the lesions had multiplied to more than 30, several were thick and painful, and the surrounding skin was diffusely damaged on 6 May 1971.

The diagnosis was made by a repatriation medical officer on 6 May 1971 on the clinical finding of multiple adherent keratotic papules on erythematous bases on the sun-exposed skin of the upper back and shoulders, and was confirmed on biopsy on 2 June 1971, which showed proliferation of atypical keratinocytes confined to the lower epidermis without invasion. This meets the Statement of Principles definition of solar keratosis.

This has then led to further investigations and the diagnosis of your condition of *Solar Keratosis*. I have accepted your condition of *Solar Keratosis*.

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

I have therefore accepted that this condition is related to your service with effect from 20 April 1971.

Back - Solar Keratosis (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 11 February 2025;
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- An outpatient consultation by the repatriation medical officer, dated 6 May 1971;
- A skin biopsy report by the pathologist, dated 2 June 1971;
- A dermatology consultation and biopsy report by the dermatologist, dated 18 September 1974.

Your service

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

22 January 1941 and 12 June 1968

Back - Solar Keratosis (Worsening)

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

- *inability to obtain appropriate clinical management for solar keratosis*

Diagnosis: Solar Keratosis (Worsening)

Basis of diagnosis: The diagnosis was made in the Diagnostic Assessment by Dr Thomas Perkins dated 11 February 2025, and is supported by a skin biopsy report by the pathologist, dated 2 June 1971.

I am satisfied this is the appropriate diagnosis.
In determining your claim for this condition, I have applied the SOP:

Statement of Principles concerning Solar Keratosis (Reasonable Hypothesis) (No. 79 of 2021)

which sets out the factors that can connect the condition with service.

I am satisfied that you have met the following factor:

- *inability to obtain appropriate clinical management for solar keratosis*

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 rough, scaly, tender spots on the upper back and shoulders that caught on clothing and bled when scratched.By 1974 the lesions had multiplied to more than 30, several were thick and painful, and the surrounding skin was diffusely damaged on 6 May 1971.

The diagnosis was made by a repatriation medical officer on 6 May 1971 on the clinical finding of multiple adherent keratotic papules on erythematous bases on the sun-exposed skin of the upper back and shoulders, and was confirmed on biopsy on 2 June 1971, which showed proliferation of atypical keratinocytes confined to the lower epidermis without invasion. This meets the Statement of Principles definition of solar keratosis.

After the condition arose, it was worsened during your service. From 1971 to 1974 you, a former prisoner of war, could not obtain dermatological treatment in remote north Queensland and was refused repatriation travel for it.

This has then led to further investigations and the diagnosis of your condition of *Solar Keratosis (Worsening)*. I have accepted your condition of *Solar Keratosis (Worsening)*.

Having considered your service records and the available medical evidence, I am satisfied the SOP is met and 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 20 April 1971.

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