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.

Lumbar Soft Tissue Injury

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 17 June 2025;
- A Diagnosis Form (D9287) by Dr Thomas Perkins, General Practitioner, Veterans Health Centre, dated 17 June 2025;
- An enlistment medical examination by the medical officer, Recruiting centre, dated 6 March 2001;
- A pre-deployment medical examination by the medical officer, Garrison health centre, dated 12 February 2005;
- A regimental aid post record by the medical officer, Southern Iraq, dated 18 August 2005;
- A role 2 facility consultation and lumbar X-ray report by the medical officer and radiologist, dated 25 August 2005;
- A return-from-deployment medical examination by the medical officer, Garrison health centre, dated 14 November 2005;
- A patrol casualty record by the combat medic, Afghanistan, dated 23 June 2011;
- A role 2 facility consultation by the medical officer, Afghanistan, dated 2 August 2011;
- An MRI lumbar spine report by the radiologist, dated 15 November 2011;
- A sports medicine consultation by the sports physician, dated 15 November 2011;
- A medical employment classification review by the senior medical officer, dated 20 September 2013.

Your service

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

14 February 2001 and 9 December 2014

Lumbar Soft Tissue Injury

You have stated that your condition was caused by:

- *experiencing a significant physical force applied to or through the affected joint, at the time of the clinical onset of a sprain to that joint ligament*
- *forceful stretching or high intensity use of a muscle or tendon at the time of the clinical onset of a strain to that muscle or tendon*

Diagnosis: Lumbar Soft Tissue Injury

Basis of diagnosis: The diagnosis was made in the Diagnostic Assessment by Dr Thomas Perkins dated 17 June 2025, and is supported by a role 2 facility consultation and lumbar X-ray report by the medical officer and radiologist, dated 25 August 2005.

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

Statement of Principles concerning Sprain and Strain (Reasonable Hypothesis) (No. 27 of 2020)

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

I am satisfied that you have met the following factor:

- *experiencing a significant physical force applied to or through the affected joint, at the time of the clinical onset of a sprain to that joint ligament*
- *forceful stretching or high intensity use of a muscle or tendon at the time of the clinical onset of a strain to that muscle or tendon*

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 sudden, tearing right-sided low back pain, muscle spasm and stiffness, pain on bending, twisting and arching backwards, and difficulty climbing into vehicles and lifting on 18 August 2005.

The diagnosis was made clinically by the treating medical officers. On the day of the injury there was right-sided lumbar spasm and tenderness over the right L4/5 paraspinal muscles and iliolumbar ligament with restricted flexion and normal neurology, and on 25 August 2005 there was pain at the right L4/5 facet on extension and rotation. X-ray excluded fracture. This meets the Statement of Principles definitions of sprain and of strain, because pain and tenderness began immediately after the injury.

This has then led to further investigations and the diagnosis of your condition of *Lumbar Soft Tissue Injury*. I have accepted your condition of *Lumbar Soft Tissue Injury*.

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 18 August 2005.

Lumbar Soft Tissue Injury (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 17 June 2025;
- A Diagnosis Form (D9287) by Dr Thomas Perkins, General Practitioner, Veterans Health Centre, dated 17 June 2025;
- An enlistment medical examination by the medical officer, Recruiting centre, dated 6 March 2001;
- A pre-deployment medical examination by the medical officer, Garrison health centre, dated 12 February 2005;
- A regimental aid post record by the medical officer, Southern Iraq, dated 18 August 2005;
- A role 2 facility consultation and lumbar X-ray report by the medical officer and radiologist, dated 25 August 2005;
- A return-from-deployment medical examination by the medical officer, Garrison health centre, dated 14 November 2005;
- A patrol casualty record by the combat medic, Afghanistan, dated 23 June 2011;
- A role 2 facility consultation by the medical officer, Afghanistan, dated 2 August 2011;
- An MRI lumbar spine report by the radiologist, dated 15 November 2011;
- A sports medicine consultation by the sports physician, dated 15 November 2011;
- A medical employment classification review by the senior medical officer, dated 20 September 2013.

Your service

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

14 February 2001 and 9 December 2014

Lumbar Soft Tissue Injury (Worsening)

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

- *experiencing a significant physical force applied to or through the affected joint, at the time of the clinical worsening of a sprain to that joint ligament*

- *forceful stretching or high intensity use of a muscle or tendon at the time of the clinical worsening of a strain to that muscle or tendon*
- *inability to obtain appropriate clinical management for sprain or strain*

Diagnosis: Lumbar Soft Tissue Injury (Worsening)

Basis of diagnosis: The diagnosis was made in the Diagnostic Assessment by Dr Thomas Perkins dated 17 June 2025, and is supported by a role 2 facility consultation and lumbar X-ray report by the medical officer and radiologist, dated 25 August 2005.

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

Statement of Principles concerning Sprain and Strain (Reasonable Hypothesis) (No. 27 of 2020)

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

I am satisfied that you have met the following factor:

- *experiencing a significant physical force applied to or through the affected joint, at the time of the clinical worsening of a sprain to that joint ligament*
- *forceful stretching or high intensity use of a muscle or tendon at the time of the clinical worsening of a strain to that muscle or tendon*
- *inability to obtain appropriate clinical management for sprain or strain*

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 sudden, tearing right-sided low back pain, muscle spasm and stiffness, pain on bending, twisting and arching backwards, and difficulty climbing into vehicles and lifting on 18 August 2005.

The diagnosis was made clinically by the treating medical officers. On the day of the injury there was right-sided lumbar spasm and tenderness over the right L4/5 paraspinal muscles and iliolumbar ligament with restricted flexion and normal neurology, and on 25 August 2005 there was pain at the right L4/5 facet on extension and rotation. X-ray excluded fracture. This meets the Statement of Principles definitions of sprain and of strain, because pain and tenderness began immediately after the injury.

After the condition arose, it was worsened during your service. On warlike service in Afghanistan on 23 June 2011, during a dismounted patrol, you fell down the bank of an irrigation ditch onto your back and your 42 kilogram load, applying a significant force through the right L4/5 facet joint that had been sprained in Iraq. On the same patrol on 23 June 2011, on warlike service in Afghanistan, the fall forcibly stretched the contracting right erector spinae under load, and you then used the muscle at high intensity to climb out of the ditch and return to the patrol base carrying 42 kilograms. On warlike service in Afghanistan from 23 June 2011 to 2 August

2011 you could not obtain physiotherapy, imaging or medical review because you were at a remote patrol base with no allied health support and evacuation was restricted by operational tempo.

This has then led to further investigations and the diagnosis of your condition of *Lumbar Soft Tissue Injury (Worsening)*. I have accepted your condition of *Lumbar Soft Tissue Injury (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 23 June 2011.

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