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 Spine - Strain

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 27 March 2025;
- A Diagnosis Form (D9287) by Dr Thomas Perkins, General Practitioner, Veterans Health Centre, dated 27 March 2025;
- A pre-deployment medical examination by the medical officer, dated 11 July 2008;
- A fire base medical record by the regimental medical officer, Afghanistan, dated 14 November 2008;
- An X-ray lumbar spine by Role 2 facility, Afghanistan, dated 15 November 2008;
- A physiotherapy assessment by the physiotherapist, Garrison health centre, dated 17 April 2009;
- An MRI lumbar spine by the radiologist, dated 5 May 2009;
- A deployed medical record by the medical officer, Iraq, dated 19 August 2017;
- An MRI and flexion-extension X-ray lumbar spine by the radiologist, dated 4 January 2018;
- A specialist consultation by the sports and exercise physician, dated 15 October 2018.

Your service

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

3 February 2003 and 11 December 2018

Lumbar Spine - Strain

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: Strain

Basis of diagnosis: The diagnosis was made in the Diagnostic Assessment by Dr Thomas Perkins dated 27 March 2025, and is supported by an X-ray lumbar spine by Role 2 facility, Afghanistan, dated 15 November 2008.

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 severe pain across the left low back, muscle spasm and inability to stand upright or bend on 14 November 2008.

The diagnosis was made clinically by the regimental medical officer on 14 November 2008 and confirmed the next day, when radiographs excluded fracture: there was acute low back pain and tenderness beginning immediately after a defined injury, with left paraspinal spasm, tenderness over the left L4/5 and L5/S1 facet joints and restricted flexion and extension. This meets the Statement of Principles definitions of sprain (tearing or stretching of joint ligaments with pain and tenderness within 24 hours) and strain (tearing or stretching of a muscle or tendon with pain and tenderness within 24 hours).

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

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 14 November 2008.

Lumbar Spine - Strain (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 27 March 2025;
- A Diagnosis Form (D9287) by Dr Thomas Perkins, General Practitioner, Veterans Health Centre, dated 27 March 2025;
- A pre-deployment medical examination by the medical officer, dated 11 July 2008;
- A fire base medical record by the regimental medical officer, Afghanistan, dated 14 November 2008;
- An X-ray lumbar spine by Role 2 facility, Afghanistan, dated 15 November 2008;
- A physiotherapy assessment by the physiotherapist, Garrison health centre, dated 17 April 2009;
- An MRI lumbar spine by the radiologist, dated 5 May 2009;
- A deployed medical record by the medical officer, Iraq, dated 19 August 2017;
- An MRI and flexion-extension X-ray lumbar spine by the radiologist, dated 4 January 2018;
- A specialist consultation by the sports and exercise physician, dated 15 October 2018.

Your service

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

3 February 2003 and 11 December 2018

Lumbar Spine - Strain (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: Strain (Worsening)

Basis of diagnosis: The diagnosis was made in the Diagnostic Assessment by Dr Thomas Perkins dated 27 March 2025, and is supported by an X-ray lumbar spine by Role 2 facility, Afghanistan, dated 15 November 2008.

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 severe pain across the left low back, muscle spasm and inability to stand upright or bend on 14 November 2008.

The diagnosis was made clinically by the regimental medical officer on 14 November 2008 and confirmed the next day, when radiographs excluded fracture: there was acute low back pain and tenderness beginning immediately after a defined injury, with left paraspinal spasm, tenderness over the left L4/5 and L5/S1 facet joints and restricted flexion and extension. This meets the Statement of Principles definitions of sprain (tearing or stretching of joint ligaments with pain and tenderness within 24 hours) and strain (tearing or stretching of a muscle or tendon with pain and tenderness within 24 hours).

After the condition arose, it was worsened during your service. The fall from the truck tray on 19 August 2017 occurred while unloading stores during warlike service in Iraq. In the same fall on warlike service in Iraq on 19 August 2017 the paraspinal muscles were forcefully stretched under high load as the trunk was thrown forward, at the time of the clinical worsening of the strain, shown by new muscle signal on MRI and the rise in Oswestry Disability Index. On warlike service in Afghanistan from November 2008 to March 2009 no physiotherapy was available at your fire base, and operational needs returned you to ammunition handling after three weeks despite persisting pain.

This has then led to further investigations and the diagnosis of your condition of *Strain (Worsening)*. I have accepted your condition of *Strain (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 19 August 2017.

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