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.

Right Ankle - Deltoid Ligament Sprain

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 30 October 2025;
- A Diagnosis Form (D9287) by Dr Thomas Perkins, General Practitioner, Veterans Health Centre, dated 30 October 2025;
- A pre-deployment medical by the medical officer, dated 2 March 2011;
- A patrol casualty record by the combat medic, Afghanistan, dated 8 September 2011;
- A deployed health record and X-ray report by the regimental medical officer, Afghanistan, dated 9 September 2011;
- An MRI right ankle report and orthopaedic consultation by the orthopaedic surgeon, dated 14 February 2012;
- A deployed health record and X-ray report by the medical officer, Iraq, dated 14 April 2019;
- An ultrasound report by the coalition medical facility, Iraq, dated 28 May 2019;
- An MRI right ankle report and specialist consultation by the orthopaedic foot and ankle surgeon, dated 19 August 2019;
- An operation report by the orthopaedic foot and ankle surgeon, dated 11 November 2019.

Your service

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

9 June 2008 and 17 February 2022

Right Ankle - Deltoid Ligament Sprain

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: Deltoid Ligament Sprain

Basis of diagnosis: The diagnosis was made in the Diagnostic Assessment by Dr Thomas Perkins dated 30 October 2025, and is supported by a deployed health record and X-ray report by the regimental medical officer, Afghanistan, dated 9 September 2011.

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 pain on the inner side of the right ankle, swelling and bruising below the medial malleolus, pain on walking and turning the foot outwards, and weakness and pain on pushing up onto your toes on 9 September 2011.

The diagnosis was made clinically by the Regimental Medical Officer on 9 September 2011, with medial ankle swelling and bruising, tenderness over the deltoid ligament, pain on eversion stress and pain on resisted inversion with tenderness along the tibialis posterior tendon, the day after a forceful eversion injury. X-ray excluded fracture. MRI on 14 February 2012 confirmed a partial-thickness tear of the deep deltoid ligament and a low-grade tear of the tibialis posterior tendon.

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

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 8 September 2011.

Right Ankle - Deltoid Ligament Sprain (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 30 October 2025;
- A Diagnosis Form (D9287) by Dr Thomas Perkins, General Practitioner, Veterans Health Centre, dated 30 October 2025;
- A pre-deployment medical by the medical officer, dated 2 March 2011;
- A patrol casualty record by the combat medic, Afghanistan, dated 8 September 2011;
- A deployed health record and X-ray report by the regimental medical officer, Afghanistan, dated 9 September 2011;
- An MRI right ankle report and orthopaedic consultation by the orthopaedic surgeon, dated 14 February 2012;
- A deployed health record and X-ray report by the medical officer, Iraq, dated 14 April 2019;
- An ultrasound report by the coalition medical facility, Iraq, dated 28 May 2019;
- An MRI right ankle report and specialist consultation by the orthopaedic foot and ankle surgeon, dated 19 August 2019;
- An operation report by the orthopaedic foot and ankle surgeon, dated 11 November 2019.

Your service

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

9 June 2008 and 17 February 2022

Right Ankle - Deltoid Ligament Sprain (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: Deltoid Ligament Sprain (Worsening)

Basis of diagnosis: The diagnosis was made in the Diagnostic Assessment by Dr Thomas Perkins dated 30 October 2025, and is supported by a deployed health record and X-ray report by the regimental medical officer, Afghanistan, dated 9 September 2011.

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 pain on the inner side of the right ankle, swelling and bruising below the medial malleolus, pain on walking and turning the foot outwards, and weakness and pain on pushing up onto your toes on 9 September 2011.

The diagnosis was made clinically by the Regimental Medical Officer on 9 September 2011, with medial ankle swelling and bruising, tenderness over the deltoid ligament, pain on eversion stress and pain on resisted inversion with tenderness along the tibialis posterior tendon, the day after a forceful eversion injury. X-ray excluded fracture. MRI on 14 February 2012 confirmed a partial-thickness tear of the deep deltoid ligament and a low-grade tear of the tibialis posterior tendon.

After the condition arose, it was worsened during your service. On warlike service in Iraq on 14 April 2019 you stepped down about 1.2 metres from a protected mobility vehicle under a load of about 35 kilograms and landed on a rock with the foot everting, applying significant force through the right ankle and rupturing the deep deltoid ligament completely. In the same landing on warlike service in Iraq on 14 April 2019 the tibialis posterior tendon was forcefully stretched under load, worsening the strain to a longitudinal split tear confirmed on MRI on 19 August 2019. On warlike service in Afghanistan from September to December 2011, and in Iraq from April to July 2019, you could not obtain MRI, regular physiotherapy or orthopaedic review for your ankle and was required to continue operational duties in a brace or walking boot.

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

(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 14 April 2019.

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