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 Barotrauma

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 26 March 2025;
- A Diagnosis Form (D9287) by Dr Thomas Perkins, General Practitioner, Veterans Health Centre, dated 26 March 2025;
- An annual diving medical examination by the diving medical officer, dated 5 February 2010;
- A casualty card and aeromedical evacuation record by the medical emergency response team, Afghanistan, dated 18 June 2010;
- A role 3 hospital record by the CT temporal bones and chest x-ray reports, Surgeon and radiologist, Afghanistan, dated 19 June 2010;
- A deployed clinical record by the medical officer, forward operating base, Afghanistan, dated 23 June 2010;
- An otolaryngology consultation (tympanometry and audiogram) by the otolaryngologist and audiologist, dated 25 October 2010;
- A CT temporal bones report by the radiologist, dated 30 March 2011;
- A recompression chamber test record by the diving medical officer, dated 12 April 2011;
- An operation report by the otolaryngologist, dated 18 July 2013;
- A medical board and separation health examination by the senior medical officer, dated 30 September 2016.

Your service

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

14 February 2001 and 30 September 2016

Right Barotrauma

You have stated that your condition was caused by:

- *experiencing a change in ambient barometric pressure as specified within the 24 hours before the clinical onset of otitic barotrauma*
- *being exposed to blast pressure from an explosion or lightning strike within the 24 hours before the clinical onset of otitic barotrauma*
- *receiving mechanical ventilation involving a face mask within the 24 hours before the clinical onset of otitic barotrauma*

Diagnosis: Right Barotrauma

Basis of diagnosis: The diagnosis was made in the Diagnostic Assessment by Dr Thomas Perkins dated 26 March 2025, and is supported by a role 3 hospital record by the CT temporal bones and chest x-ray reports, Surgeon and radiologist, Afghanistan, dated 19 June 2010.

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

Statement of Principles concerning Otitic Barotrauma (Reasonable Hypothesis) (No. 86 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 change in ambient barometric pressure as specified within the 24 hours before the clinical onset of otitic barotrauma*
- *being exposed to blast pressure from an explosion or lightning strike within the 24 hours before the clinical onset of otitic barotrauma*
- *receiving mechanical ventilation involving a face mask within the 24 hours before the clinical onset of otitic barotrauma*

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 in the right ear, a sensation of fullness and pressure, muffled hearing and ringing on the right on 18 June 2010.

The diagnosis was made on 19 June 2010 by the role 3 surgeon, who found a bulging right eardrum with haemotympanum and no perforation, a right conductive hearing loss on tuning fork testing and a flat (type B) right tympanogram, with CT of the temporal bones showing blood and fluid in the right middle ear and intact ossicles. In the setting of blast exposure, mask ventilation and a rapid helicopter descent within the preceding two hours, this meets the Statement of Principles definition of otitic barotrauma, injury to the ear caused by a pressure differential.

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

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 June 2010.

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