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 Glenohumeral Joint - Osteoarthritis

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 2 October 2025;
- A Diagnosis Form (D9287) by Dr Thomas Perkins, General Practitioner, Veterans Health Centre, dated 2 October 2025;
- A field hospital admission and X-ray report by the surgeon, Somalia, dated 8 April 1993;
- A neurology consultation and nerve conduction studies by the neurologist, dated 20 July 1993;
- An arthroscopy report by the orthopaedic surgeon, dated 16 August 1993;
- An operation report by the orthopaedic surgeon, dated 12 March 1997;
- A treatment record and X-ray report by the medical officer, East Timor, dated 3 November 1999;
- A hospital admission (microbiology and operation report) by the surgeon, East Timor, dated 14 February 2000;
- A CT right shoulder report by the radiologist, dated 12 June 2000;
- A specialist consultation and ultrasound report by the rheumatologist, dated 6 May 2002;
- A trauma admission and MRI left knee report by the orthopaedic surgeon, dated 17 August 2004;
- An MRI right shoulder report by the radiologist, dated 15 March 2006;
- A joint aspiration and specialist consultation by the rheumatologist, dated 22 October 2007;
- An outpatient health record by the medical officer, Afghanistan, dated 23 February 2008;
- An endocrinology consultation and MRI pituitary report by the endocrinologist, dated 4 September 2008;
- An MRI arthrogram right shoulder report by the radiologist, dated 30 August 2008;
- A bone densitometry report by the radiologist, dated 11 March 2009;

- An MRI arthrogram left hip and orthopaedic consultation by the orthopaedic surgeon, dated 2 September 2009;
- An isotope bone scan and X-ray report by the nuclear medicine physician, dated 14 January 2010;
- An outpatient health record by the medical officer, Garrison health centre, dated 20 September 2011;
- An X-ray right shoulder report by the radiologist, dated 22 September 2011;
- A specialist consultation by the orthopaedic surgeon, dated 10 October 2011;
- An MRI right shoulder report by the radiologist, dated 21 March 2018;
- A bone densitometry report by the radiologist, dated 4 April 2018;
- An X-ray right shoulder report and orthopaedic consultation by the orthopaedic surgeon, dated 18 June 2019;
- An operation report by the orthopaedic surgeon, dated 11 March 2020.

Your service

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

19 January 1987 and 14 July 2022

Right Glenohumeral Joint - Osteoarthritis

You have stated that your condition was caused by:

- *having inflammatory joint disease as specified, of the affected joint before the clinical onset of osteoarthritis in that joint*
- *having an infection of the affected joint as specified before the clinical onset of osteoarthritis in that joint*
- *having an intra-articular fracture of the affected joint before the clinical onset of osteoarthritis in that joint*
- *having haemarthrosis of the affected joint before the clinical onset of osteoarthritis in that joint*
- *having a depositional joint disease as specified, in the affected joint before the clinical onset of osteoarthritis in that joint*
- *having trauma to the affected joint within the 25 years before the clinical onset of osteoarthritis in that joint*
- *having an acute articular cartilage tear of the affected joint within the 25 years before the clinical onset of osteoarthritis in that joint*
- *having an acute meniscal tear of the affected knee within the 25 years before the clinical onset of osteoarthritis in that joint*

- *having frostbite involving the affected joint before the clinical onset of osteoarthritis in that joint*
- *having disordered joint mechanics of the affected joint for at least five years before the clinical onset of osteoarthritis in that joint*
- *having necrosis of the subchondral bone near the affected joint, including that from dysbaric osteonecrosis, before the clinical onset of osteoarthritis in that joint*
- *for osteoarthritis of a joint of the upper limb only, performing any combination of repetitive activities or tasks involving repeated or sustained pinch grip or hand/power grip, for an average of at least 30 hours per week, for a cumulative period of at least ten years within a continuous period of 15 years, before the clinical onset of osteoarthritis in that joint*
- *for osteoarthritis of a joint of the hand, wrist or elbow joint only, using a hand-held, vibrating percussive tool or object on more days than not, for a cumulative period of at least ten years, within the 25 years before the clinical onset of osteoarthritis in that joint*
- *for osteoarthritis of a joint of the lower limb only: having: (i) an amputation involving either leg; or (ii) an asymmetric gait; for at least five years before the clinical onset of osteoarthritis in that joint*
- *for osteoarthritis of a joint of the lower limb only: lifting loads of at least 20 kilograms while bearing weight through the affected joint: (i) to a cumulative total of at least 150 000 kilograms within any ten year period before the clinical onset of osteoarthritis in that joint; and (ii) where the clinical onset of osteoarthritis in that joint occurs within the 25 years following that period*
- *for osteoarthritis of a joint of the lower limb only: carrying loads of at least 20 kilograms while bearing weight through the affected joint: (i) to a cumulative total of at least 3 800 hours within any ten year period before the clinical onset of osteoarthritis in that joint; and (ii) where the clinical onset of osteoarthritis in that joint occurs within the 25 years following that period*
- *for osteoarthritis of a joint of the lower limb only: ascending or descending at least 150 stairs or rungs of a ladder per day, on more days than not, for a continuous period of at least five years, within the 25 years before the clinical onset of osteoarthritis in that joint*
- *for osteoarthritis of a joint of the lower limb only: having increased bone mineral density before the clinical onset of osteoarthritis in that joint*
- *for osteoarthritis of a joint of the lower limb or hand joint only: being overweight for at least ten years before the clinical onset of osteoarthritis in that joint*
- *for osteoarthritis of a joint of the lower limb or hand joint only: for males, having a waist circumference exceeding 102 centimetres for at least ten years before the clinical onset of osteoarthritis in that joint*
- *for osteoarthritis of a joint of the lower limb or hand joint only: for females, having a waist circumference exceeding 88 centimetres for at least ten years before the clinical onset of osteoarthritis in that joint*
- *for osteoarthritis of a hip or knee joint only: (a) kneeling or squatting for a cumulative period of at least one hour per day, on more days than not, for a continuous period of at*

least two years before the clinical onset of osteoarthritis in that joint; and (b) where the clinical onset of osteoarthritis in that joint occurs within the 25 years following that period

- *for osteoarthritis of a knee joint only, having internal derangement of the affected joint before the clinical onset of osteoarthritis in that joint*
- *for osteoarthritis of the patello-femoral joint only, having chondromalacia patella before the clinical onset of osteoarthritis in that joint*
- *having a disorder associated with loss of pain sensation or proprioception involving the affected joint before the clinical onset of osteoarthritis in that joint*
- *having Paget's disease of bone of the affected joint before the clinical onset of osteoarthritis in that joint*
- *having acromegaly before the clinical onset of osteoarthritis in that joint*
- *having joint instability or dislocation of the affected joint, at least one year before the clinical onset of osteoarthritis in that joint*
- *for osteoarthritis of a hip joint only, having femoroacetabular impingement syndrome of the affected joint, before the clinical onset of osteoarthritis in that joint*

Diagnosis: Osteoarthritis

Basis of diagnosis: The diagnosis was made in the Diagnostic Assessment by Dr Thomas Perkins dated 2 October 2025, and is supported by an X-ray right shoulder report by the radiologist, dated 22 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 Osteoarthritis (Balance of Probabilities) (No. 62 of 2017)

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

I am satisfied that you have met the following factor:

- *having inflammatory joint disease as specified, of the affected joint before the clinical onset of osteoarthritis in that joint*
- *having an infection of the affected joint as specified before the clinical onset of osteoarthritis in that joint*
- *having an intra-articular fracture of the affected joint before the clinical onset of osteoarthritis in that joint*
- *having haemarthrosis of the affected joint before the clinical onset of osteoarthritis in that joint*
- *having a depositional joint disease as specified, in the affected joint before the clinical onset of osteoarthritis in that joint*
- *having trauma to the affected joint within the 25 years before the clinical onset of osteoarthritis in that joint*

- *having an acute articular cartilage tear of the affected joint within the 25 years before the clinical onset of osteoarthritis in that joint*
- *having an acute meniscal tear of the affected knee within the 25 years before the clinical onset of osteoarthritis in that joint*
- *having frostbite involving the affected joint before the clinical onset of osteoarthritis in that joint*
- *having disordered joint mechanics of the affected joint for at least five years before the clinical onset of osteoarthritis in that joint*
- *having necrosis of the subchondral bone near the affected joint, including that from dysbaric osteonecrosis, before the clinical onset of osteoarthritis in that joint*
- *for osteoarthritis of a joint of the upper limb only, performing any combination of repetitive activities or tasks involving repeated or sustained pinch grip or hand/power grip, for an average of at least 30 hours per week, for a cumulative period of at least ten years within a continuous period of 15 years, before the clinical onset of osteoarthritis in that joint*
- *for osteoarthritis of a joint of the hand, wrist or elbow joint only, using a hand-held, vibrating percussive tool or object on more days than not, for a cumulative period of at least ten years, within the 25 years before the clinical onset of osteoarthritis in that joint*
- *for osteoarthritis of a joint of the lower limb only: having: (i) an amputation involving either leg; or (ii) an asymmetric gait; for at least five years before the clinical onset of osteoarthritis in that joint*
- *for osteoarthritis of a joint of the lower limb only: lifting loads of at least 20 kilograms while bearing weight through the affected joint: (i) to a cumulative total of at least 150 000 kilograms within any ten year period before the clinical onset of osteoarthritis in that joint; and (ii) where the clinical onset of osteoarthritis in that joint occurs within the 25 years following that period*
- *for osteoarthritis of a joint of the lower limb only: carrying loads of at least 20 kilograms while bearing weight through the affected joint: (i) to a cumulative total of at least 3 800 hours within any ten year period before the clinical onset of osteoarthritis in that joint; and (ii) where the clinical onset of osteoarthritis in that joint occurs within the 25 years following that period*
- *for osteoarthritis of a joint of the lower limb only: ascending or descending at least 150 stairs or rungs of a ladder per day, on more days than not, for a continuous period of at least five years, within the 25 years before the clinical onset of osteoarthritis in that joint*
- *for osteoarthritis of a joint of the lower limb only: having increased bone mineral density before the clinical onset of osteoarthritis in that joint*
- *for osteoarthritis of a joint of the lower limb or hand joint only: being overweight for at least ten years before the clinical onset of osteoarthritis in that joint*
- *for osteoarthritis of a joint of the lower limb or hand joint only: for males, having a waist circumference exceeding 102 centimetres for at least ten years before the clinical onset of osteoarthritis in that joint*

- *for osteoarthritis of a joint of the lower limb or hand joint only: for females, having a waist circumference exceeding 88 centimetres for at least ten years before the clinical onset of osteoarthritis in that joint*
- *for osteoarthritis of a hip or knee joint only: (a) kneeling or squatting for a cumulative period of at least one hour per day, on more days than not, for a continuous period of at least two years before the clinical onset of osteoarthritis in that joint; and (b) where the clinical onset of osteoarthritis in that joint occurs within the 25 years following that period*
- *for osteoarthritis of a knee joint only, having internal derangement of the affected joint before the clinical onset of osteoarthritis in that joint*
- *for osteoarthritis of the patello-femoral joint only, having chondromalacia patella before the clinical onset of osteoarthritis in that joint*
- *having a disorder associated with loss of pain sensation or proprioception involving the affected joint before the clinical onset of osteoarthritis in that joint*
- *having Paget's disease of bone of the affected joint before the clinical onset of osteoarthritis in that joint*
- *having acromegaly before the clinical onset of osteoarthritis in that joint*
- *having joint instability or dislocation of the affected joint, at least one year before the clinical onset of osteoarthritis in that joint*
- *for osteoarthritis of a hip joint only, having femoroacetabular impingement syndrome of the affected joint, before the clinical onset of osteoarthritis in that joint*

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 deep aching pain in the right shoulder with stiffness, grinding and catching, worse with overhead work, lifting and lying on the right side, and pain that woke you at night on 20 September 2011.

The diagnosis was made on the history of deep aching pain, stiffness and grinding of the right shoulder with night pain, the examination findings of crepitus and painful restriction of external rotation and abduction, and X-ray on 22 September 2011 showing narrowing of the glenohumeral joint space, an inferior humeral head osteophyte and subchondral sclerosis. An orthopaedic surgeon confirmed right glenohumeral osteoarthritis on 10 October 2011. This meets the Statement of Principles definition of osteoarthritis, a degenerative joint disease with loss of articular cartilage and bony changes.

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

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 peacetime service.

I have therefore accepted that this condition is related to your service with effect from 12 September 2011.

Right Glenohumeral Joint - Osteoarthritis (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 2 October 2025;
- A Diagnosis Form (D9287) by Dr Thomas Perkins, General Practitioner, Veterans Health Centre, dated 2 October 2025;
- A field hospital admission and X-ray report by the surgeon, Somalia, dated 8 April 1993;
- A neurology consultation and nerve conduction studies by the neurologist, dated 20 July 1993;
- An arthroscopy report by the orthopaedic surgeon, dated 16 August 1993;
- An operation report by the orthopaedic surgeon, dated 12 March 1997;
- A treatment record and X-ray report by the medical officer, East Timor, dated 3 November 1999;
- A hospital admission (microbiology and operation report) by the surgeon, East Timor, dated 14 February 2000;
- A CT right shoulder report by the radiologist, dated 12 June 2000;
- A specialist consultation and ultrasound report by the rheumatologist, dated 6 May 2002;
- A trauma admission and MRI left knee report by the orthopaedic surgeon, dated 17 August 2004;
- An MRI right shoulder report by the radiologist, dated 15 March 2006;
- A joint aspiration and specialist consultation by the rheumatologist, dated 22 October 2007;
- An outpatient health record by the medical officer, Afghanistan, dated 23 February 2008;
- An endocrinology consultation and MRI pituitary report by the endocrinologist, dated 4 September 2008;
- An MRI arthrogram right shoulder report by the radiologist, dated 30 August 2008;
- A bone densitometry report by the radiologist, dated 11 March 2009;
- An MRI arthrogram left hip and orthopaedic consultation by the orthopaedic surgeon, dated 2 September 2009;
- An isotope bone scan and X-ray report by the nuclear medicine physician, dated 14 January 2010;
- An outpatient health record by the medical officer, Garrison health centre, dated 20 September 2011;
- An X-ray right shoulder report by the radiologist, dated 22 September 2011;

- A specialist consultation by the orthopaedic surgeon, dated 10 October 2011;
- An MRI right shoulder report by the radiologist, dated 21 March 2018;
- A bone densitometry report by the radiologist, dated 4 April 2018;
- An X-ray right shoulder report and orthopaedic consultation by the orthopaedic surgeon, dated 18 June 2019;
- An operation report by the orthopaedic surgeon, dated 11 March 2020.

Your service

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

19 January 1987 and 14 July 2022

Right Glenohumeral Joint - Osteoarthritis (Worsening)

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

- *having inflammatory joint disease as specified, of the affected joint before the clinical worsening of osteoarthritis in that joint*
- *having an infection of the affected joint as specified before the clinical worsening of osteoarthritis in that joint*
- *having an intra-articular fracture of the affected joint before the clinical worsening of osteoarthritis in that joint*
- *having haemarthrosis of the affected joint before the clinical worsening of osteoarthritis in that joint*
- *having a depositional joint disease as specified, in the affected joint before the clinical worsening of osteoarthritis in that joint*
- *having trauma to the affected joint within the 25 years before the clinical worsening of osteoarthritis in that joint*
- *having an acute articular cartilage tear of the affected joint within the 25 years before the clinical worsening of osteoarthritis in that joint*
- *having an acute meniscal tear of the affected knee within the 25 years before the clinical worsening of osteoarthritis in that joint*
- *having frostbite involving the affected joint before the clinical worsening of osteoarthritis in that joint*
- *having disordered joint mechanics of the affected joint for at least five years before the clinical worsening of osteoarthritis in that joint*
- *having necrosis of the subchondral bone near the affected joint, including that from dysbaric osteonecrosis, before the clinical worsening of osteoarthritis in that joint*
- *for osteoarthritis of a joint of the upper limb only, performing any combination of repetitive activities or tasks involving repeated or sustained pinch grip or hand/power grip, for an*

average of at least 30 hours per week, for a cumulative period of at least ten years within a continuous period of 15 years, before the clinical worsening of osteoarthritis in that joint

- *for osteoarthritis of a joint of the hand, wrist or elbow joint only, using a hand-held, vibrating percussive tool or object on more days than not, for a cumulative period of at least ten years, within the 25 years before the clinical worsening of osteoarthritis in that joint*
- *for osteoarthritis of a joint of the lower limb only: having: (i) an amputation involving either leg; or (ii) an asymmetric gait; for at least five years before the clinical worsening of osteoarthritis in that joint*
- *for osteoarthritis of a joint of the lower limb only: lifting loads of at least 20 kilograms while bearing weight through the affected joint: (i) to a cumulative total of at least 150 000 kilograms within any ten year period before the clinical worsening of osteoarthritis in that joint; and (ii) where the clinical worsening of osteoarthritis in that joint occurs within the 25 years following that period*
- *for osteoarthritis of a joint of the lower limb only: carrying loads of at least 20 kilograms while bearing weight through the affected joint: (i) to a cumulative total of at least 3 800 hours within any ten year period before the clinical worsening of osteoarthritis in that joint; and (ii) where the clinical worsening of osteoarthritis in that joint occurs within the 25 years following that period*
- *for osteoarthritis of a joint of the lower limb only: ascending or descending at least 150 stairs or rungs of a ladder per day, on more days than not, for a continuous period of at least five years, within the 25 years before the clinical worsening of osteoarthritis in that joint*
- *for osteoarthritis of a joint of the lower limb or hand joint only: being overweight for at least ten years before the clinical worsening of osteoarthritis in that joint*
- *for osteoarthritis of a joint of the lower limb or hand joint only: for males, having a waist circumference exceeding 102 centimetres for at least ten years before the clinical worsening of osteoarthritis in that joint*
- *for osteoarthritis of a joint of the lower limb or hand joint only: for females, having a waist circumference exceeding 88 centimetres for at least ten years before the clinical worsening of osteoarthritis in that joint*
- *for osteoarthritis of a hip or knee joint only: (a) kneeling or squatting for a cumulative period of at least one hour per day, on more days than not, for a continuous period of at two years before the clinical worsening of osteoarthritis in that joint; and (b) where the clinical worsening of osteoarthritis in that joint occurs within the 25 years following that period*
- *for osteoarthritis of a knee joint only, having internal derangement of the affected joint before the clinical worsening of osteoarthritis in that joint*
- *for osteoarthritis of the patello-femoral joint only, having chondromalacia patella before the clinical worsening of osteoarthritis in that joint*

- *having a disorder associated with loss of pain sensation or proprioception involving the affected joint before the clinical worsening of osteoarthritis in that joint*
- *having Paget's disease of bone of the affected joint before the clinical worsening of osteoarthritis in that joint*
- *having acromegaly before the clinical worsening of osteoarthritis in that joint*
- *having joint instability or dislocation of the affected joint, at least one year before the clinical worsening of osteoarthritis in that joint*
- *for osteoarthritis of a hip joint only, having femoroacetabular impingement syndrome of the affected joint, before the clinical worsening of osteoarthritis in that joint*
- *inability to obtain appropriate clinical management for osteoarthritis*

Diagnosis: Osteoarthritis (Worsening)

Basis of diagnosis: The diagnosis was made in the Diagnostic Assessment by Dr Thomas Perkins dated 2 October 2025, and is supported by an X-ray right shoulder report by the radiologist, dated 22 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 Osteoarthritis (Balance of Probabilities) (No. 62 of 2017)

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

I am satisfied that you have met the following factor:

- *having inflammatory joint disease as specified, of the affected joint before the clinical worsening of osteoarthritis in that joint*
- *having an infection of the affected joint as specified before the clinical worsening of osteoarthritis in that joint*
- *having an intra-articular fracture of the affected joint before the clinical worsening of osteoarthritis in that joint*
- *having haemarthrosis of the affected joint before the clinical worsening of osteoarthritis in that joint*
- *having a depositional joint disease as specified, in the affected joint before the clinical worsening of osteoarthritis in that joint*
- *having trauma to the affected joint within the 25 years before the clinical worsening of osteoarthritis in that joint*
- *having an acute articular cartilage tear of the affected joint within the 25 years before the clinical worsening of osteoarthritis in that joint*
- *having an acute meniscal tear of the affected knee within the 25 years before the clinical worsening of osteoarthritis in that joint*

- *having frostbite involving the affected joint before the clinical worsening of osteoarthritis in that joint*
- *having disordered joint mechanics of the affected joint for at least five years before the clinical worsening of osteoarthritis in that joint*
- *having necrosis of the subchondral bone near the affected joint, including that from dysbaric osteonecrosis, before the clinical worsening of osteoarthritis in that joint*
- *for osteoarthritis of a joint of the upper limb only, performing any combination of repetitive activities or tasks involving repeated or sustained pinch grip or hand/power grip, for an average of at least 30 hours per week, for a cumulative period of at least ten years within a continuous period of 15 years, before the clinical worsening of osteoarthritis in that joint*
- *for osteoarthritis of a joint of the hand, wrist or elbow joint only, using a hand-held, vibrating percussive tool or object on more days than not, for a cumulative period of at least ten years, within the 25 years before the clinical worsening of osteoarthritis in that joint*
- *for osteoarthritis of a joint of the lower limb only: having: (i) an amputation involving either leg; or (ii) an asymmetric gait; for at least five years before the clinical worsening of osteoarthritis in that joint*
- *for osteoarthritis of a joint of the lower limb only: lifting loads of at least 20 kilograms while bearing weight through the affected joint: (i) to a cumulative total of at least 150 000 kilograms within any ten year period before the clinical worsening of osteoarthritis in that joint; and (ii) where the clinical worsening of osteoarthritis in that joint occurs within the 25 years following that period*
- *for osteoarthritis of a joint of the lower limb only: carrying loads of at least 20 kilograms while bearing weight through the affected joint: (i) to a cumulative total of at least 3 800 hours within any ten year period before the clinical worsening of osteoarthritis in that joint; and (ii) where the clinical worsening of osteoarthritis in that joint occurs within the 25 years following that period*
- *for osteoarthritis of a joint of the lower limb only: ascending or descending at least 150 stairs or rungs of a ladder per day, on more days than not, for a continuous period of at least five years, within the 25 years before the clinical worsening of osteoarthritis in that joint*
- *for osteoarthritis of a joint of the lower limb or hand joint only: being overweight for at least ten years before the clinical worsening of osteoarthritis in that joint*
- *for osteoarthritis of a joint of the lower limb or hand joint only: for males, having a waist circumference exceeding 102 centimetres for at least ten years before the clinical worsening of osteoarthritis in that joint*
- *for osteoarthritis of a joint of the lower limb or hand joint only: for females, having a waist circumference exceeding 88 centimetres for at least ten years before the clinical worsening of osteoarthritis in that joint*
- *for osteoarthritis of a hip or knee joint only: (a) kneeling or squatting for a cumulative period of at least one hour per day, on more days than not, for a continuous period of at*

two years before the clinical worsening of osteoarthritis in that joint; and (b) where the clinical worsening of osteoarthritis in that joint occurs within the 25 years following that period

- *for osteoarthritis of a knee joint only, having internal derangement of the affected joint before the clinical worsening of osteoarthritis in that joint*
- *for osteoarthritis of the patello-femoral joint only, having chondromalacia patella before the clinical worsening of osteoarthritis in that joint*
- *having a disorder associated with loss of pain sensation or proprioception involving the affected joint before the clinical worsening of osteoarthritis in that joint*
- *having Paget's disease of bone of the affected joint before the clinical worsening of osteoarthritis in that joint*
- *having acromegaly before the clinical worsening of osteoarthritis in that joint*
- *having joint instability or dislocation of the affected joint, at least one year before the clinical worsening of osteoarthritis in that joint*
- *for osteoarthritis of a hip joint only, having femoroacetabular impingement syndrome of the affected joint, before the clinical worsening of osteoarthritis in that joint*
- *inability to obtain appropriate clinical management for osteoarthritis*

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 deep aching pain in the right shoulder with stiffness, grinding and catching, worse with overhead work, lifting and lying on the right side, and pain that woke you at night on 20 September 2011.

The diagnosis was made on the history of deep aching pain, stiffness and grinding of the right shoulder with night pain, the examination findings of crepitus and painful restriction of external rotation and abduction, and X-ray on 22 September 2011 showing narrowing of the glenohumeral joint space, an inferior humeral head osteophyte and subchondral sclerosis. An orthopaedic surgeon confirmed right glenohumeral osteoarthritis on 10 October 2011. This meets the Statement of Principles definition of osteoarthritis, a degenerative joint disease with loss of articular cartilage and bony changes.

After the condition arose, it was worsened during your service. Rheumatoid arthritis continued to involve the right glenohumeral joint after onset, with synovitis on ultrasound on 5 February 2019, before the documented worsening on 18 June 2019. The septic arthritis of the right glenohumeral joint of 14 February 2000 preceded the worsening on 18 June 2019. The intra-articular Hill-Sachs and glenoid rim fractures of 3 April 1993 preceded the worsening on 18 June 2019. The haemarthroses of the right glenohumeral joint of April 1993 and May 2008 preceded the worsening on 18 June 2019. Gout continued to involve the right shoulder, with a further crystal-proven attack on 11 November 2016, before the worsening on 18 June 2019. The fall of 3 November 1999 and the re-dislocation of 14 May 2008 each fall within the 25 years before the worsening, from 18 June 1994 to 18 June 2019. The acute chondral defect of the humeral head shown on 30 August 2008 falls within the 25 years before the worsening, from 18 June 1994 to

18 June 2019. The acute lateral meniscal tear of the left knee of 17 August 2004 falls within the 25 years before the worsening on 18 June 2019. The frostbite of the right shoulder of 21 February 2008 preceded the worsening on 18 June 2019. The malunion of the right humeral neck persisted unchanged from 2000, so disordered joint mechanics were present for more than five years before the worsening on 18 June 2019. The avascular necrosis of the humeral head progressed to subchondral collapse on MRI on 21 March 2018, before the worsening on 18 June 2019. The sustained power grip of 1990 to 2004, more than ten years within a continuous 15-year period, preceded the worsening on 18 June 2019. Vibrating percussive tool use on more days than not from 1994 to 2004 alone amounts to ten years within the 25 years before the worsening, from 18 June 1994 to 18 June 2019. The asymmetric gait present since 2005 continued for more than five years before the worsening on 18 June 2019. The lifting of about 190,000 kilograms from 1990 to 2000 preceded the worsening, which occurred within 25 years of that period. The carrying of about 4,400 hours from 1990 to 2000 preceded the worsening, which occurred within 25 years of that period. The ladder and stair climbing of 2000 to 2006 was a continuous period of more than five years within the 25 years before the worsening on 18 June 2019. You remained overweight, with a BMI of 31.4 in 2019, for more than ten years before the worsening on 18 June 2019. Your waist circumference exceeded 102 centimetres throughout the ten years before the worsening, from 18 June 2009 to 18 June 2019, measuring 110 cm in 2019. Your waist circumference exceeded 88 centimetres throughout the ten years before the worsening, from 18 June 2009 to 18 June 2019. The kneeling and squatting of 1990 to 1997 preceded the worsening, which occurred within 25 years of that period. The internal derangement of the left knee of 2004 persisted before the worsening on 18 June 2019. Chondromalacia patellae of the left knee, diagnosed in 1991, preceded the worsening on 18 June 2019. The reduced pain sensation and proprioception of the right shoulder from the 1993 brachial plexopathy persisted before the worsening on 18 June 2019. Paget's disease of the right scapula and proximal humerus remained active, with alkaline phosphatase of 380 U/L in 2018, before the worsening on 18 June 2019. Acromegaly, present from 2008 until surgery in 2012, preceded the worsening on 18 June 2019. The dislocations of 1993 to 2008 occurred more than one year before the worsening on 18 June 2019. Femoroacetabular impingement syndrome of the left hip, diagnosed in 2009, preceded the worsening on 18 June 2019. In captivity in April 1993 the dislocated right shoulder was left unreduced for five days, and arthroscopy was delayed until August 1993; in East Timor in 1999 the humeral neck fracture could not be reduced or fixed in theatre and healed malunited; and after the re-dislocation in Afghanistan in May 2008 specialist review was delayed until your return.

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

I have therefore accepted that the worsening of this condition is related to your service with effect from 18 June 2019.

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.