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 Hand - Dorsal Burn

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 28 February 2025;
- A Diagnosis Form (D9287) by Dr Thomas Perkins, General Practitioner, Veterans Health Centre, dated 28 February 2025;
- A pre-deployment medical examination by the medical officer, Garrison health centre, dated 4 December 2012;
- A physiotherapy assessment by the physiotherapist, Role 2 facility, Afghanistan, dated 11 July 2013;
- A physiotherapy treatment record by the physiotherapist, Role 2 facility, Afghanistan, dated 8 August 2013;
- A radiation hazard and laser incident reports by the radiation hazard officer, Afghanistan, dated 8 August 2013;
- An outpatient health record by the medical officer, Role 2 facility, Afghanistan, dated 9 August 2013;
- An outpatient record and microbiology report by the medical officer, Role 2 facility, Afghanistan, dated 13 August 2013;
- A burns unit admission by the burns surgeon, dated 22 August 2013;
- An operation report by the burns surgeon, dated 26 August 2013;
- A specialist consultation by the hand surgeon, dated 17 March 2014;
- An operation report by the hand surgeon, dated 2 June 2014.

Your service

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

16 July 2008 and 21 September 2018

Right Hand - Dorsal Burn

You have stated that your condition was caused by:

- *having exposure to a heat source sufficient to cause at least erythema at the affected area of the body at the time of the clinical onset of heat-induced burn*
- *having exposure to high intensity, focussed ultrasound sufficient to cause at least erythema at the affected area of the body at the time of the clinical onset of heat-induced burn*
- *having exposure to ultraviolet radiation sufficient to cause at least erythema at the affected area of the body at the time of the clinical onset of heat-induced burn*
- *having exposure to solar radiation sufficient to cause at least erythema at the affected area of the body at the time of the clinical onset of heat-induced burn*
- *having laser applied, sufficient to cause at least erythema, at the affected area of the body at the time of the clinical onset of heat-induced burn*
- *having exposure to infrared radiation sufficient to cause at least erythema at the affected area of the body at the time of the clinical onset of heat-induced burn*
- *having exposure to radiofrequency or microwave radiation sufficient to cause at least erythema at the affected area of the body at the time of the clinical onset of heat-induced burn*

Diagnosis: Dorsal Burn

Basis of diagnosis: The diagnosis was made in the Diagnostic Assessment by Dr Thomas Perkins dated 28 February 2025, and is supported by an outpatient health record by the medical officer, Role 2 facility, Afghanistan, dated 9 August 2013.

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

Statement of Principles concerning Heat-Induced Burn (Reasonable Hypothesis) (No. 1 of 2024)

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

I am satisfied that you have met the following factor:

- *having exposure to a heat source sufficient to cause at least erythema at the affected area of the body at the time of the clinical onset of heat-induced burn*
- *having exposure to high intensity, focussed ultrasound sufficient to cause at least erythema at the affected area of the body at the time of the clinical onset of heat-induced burn*
- *having exposure to ultraviolet radiation sufficient to cause at least erythema at the affected area of the body at the time of the clinical onset of heat-induced burn*
- *having exposure to solar radiation sufficient to cause at least erythema at the affected area of the body at the time of the clinical onset of heat-induced burn*

- *having laser applied, sufficient to cause at least erythema, at the affected area of the body at the time of the clinical onset of heat-induced burn*
- *having exposure to infrared radiation sufficient to cause at least erythema at the affected area of the body at the time of the clinical onset of heat-induced burn*
- *having exposure to radiofrequency or microwave radiation sufficient to cause at least erythema at the affected area of the body at the time of the clinical onset of heat-induced burn*

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 burning pain, redness and swelling over the back of the right hand developing through the day of 08 August 2013, with sharp pain and blistering where the hand had touched the generator exhaust on 9 August 2013.

The diagnosis was made clinically on 9 August 2013 by a medical officer at the role 2 facility, who recorded a painful, red, swollen, blanching area over the dorsum of the right hand with a blistered area at the site of contact with the generator exhaust and a punctate laser burn, the day after documented exposure to heat, focused ultrasound, ultraviolet, solar, laser, infrared and microwave sources. These are the features of a superficial partial-thickness heat-induced burn, and they meet the Statement of Principles definition of heat-induced burn.

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

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 August 2013.

Right Hand - Dorsal Burn (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 28 February 2025;
- A Diagnosis Form (D9287) by Dr Thomas Perkins, General Practitioner, Veterans Health Centre, dated 28 February 2025;
- A pre-deployment medical examination by the medical officer, Garrison health centre, dated 4 December 2012;
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- A radiation hazard and laser incident reports by the radiation hazard officer, Afghanistan, dated 8 August 2013;
- An outpatient health record by the medical officer, Role 2 facility, Afghanistan, dated 9 August 2013;
- An outpatient record and microbiology report by the medical officer, Role 2 facility, Afghanistan, dated 13 August 2013;
- A burns unit admission by the burns surgeon, dated 22 August 2013;
- An operation report by the burns surgeon, dated 26 August 2013;
- A specialist consultation by the hand surgeon, dated 17 March 2014;
- An operation report by the hand surgeon, dated 2 June 2014.

Your service

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

16 July 2008 and 21 September 2018

Right Hand - Dorsal Burn (Worsening)

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

- *inability to obtain appropriate clinical management for heat-induced burn before the clinical worsening of heat-induced burn*

Diagnosis: Dorsal Burn (Worsening)

Basis of diagnosis: The diagnosis was made in the Diagnostic Assessment by Dr Thomas Perkins dated 28 February 2025, and is supported by an outpatient health record by the medical officer, Role 2 facility, Afghanistan, dated 9 August 2013.

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

Statement of Principles concerning Heat-Induced Burn (Reasonable Hypothesis) (No. 1 of 2024)

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

I am satisfied that you have met the following factor:

- *inability to obtain appropriate clinical management for heat-induced burn before the clinical worsening of heat-induced burn*

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 burning pain, redness and swelling over the back of the right hand developing through the day of 08 August 2013, with sharp pain and blistering where the hand had touched the generator exhaust on 9 August 2013.

The diagnosis was made clinically on 9 August 2013 by a medical officer at the role 2 facility, who recorded a painful, red, swollen, blanching area over the dorsum of the right hand with a blistered area at the site of contact with the generator exhaust and a punctate laser burn, the day after documented exposure to heat, focused ultrasound, ultraviolet, solar, laser, infrared and microwave sources. These are the features of a superficial partial-thickness heat-induced burn, and they meet the Statement of Principles definition of heat-induced burn.

After the condition arose, it was worsened during your service. On warlike service no burns or hand surgeon, splinting or hand therapy was available, and evacuation was deferred from 09 to 22 August 2013 because aircraft were committed to battle casualties after rocket attacks.

This has then led to further investigations and the diagnosis of your condition of *Dorsal Burn (Worsening)*. I have accepted your condition of *Dorsal Burn (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 13 August 2013.

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