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 Hip - Labral Tear with Tendinosis and Greater Trochanteric Bursitis

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 14 October 2025;
- A Diagnosis Form (D9287) by Dr Thomas Perkins, General Practitioner, Veterans Health Centre, dated 14 October 2025;
- A pre-deployment medical examination by the medical officer, dated 19 November 2009;
- Clinical notes and obstetric ultrasound by the air base medical facility, Middle East Area of Operations, dated 30 March 2010;
- An aeromedical evacuation record by the medical officer, dated 6 April 2010;
- A postnatal review and referral by the medical officer, Base health centre, dated 19 July 2010;
- An MR arthrogram right hip by the radiologist, dated 21 October 2010;
- A specialist consultation by the orthopaedic surgeon, dated 29 November 2010;
- A specialist review by the orthopaedic surgeon, dated 7 February 2011;
- An MRI right hip by the radiologist, dated 14 February 2011;
- An operation report by the orthopaedic surgeon, dated 8 September 2011.

Your service

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

8 August 2002 and 11 November 2017

Right Hip - Labral Tear with Tendinosis and Greater Trochanteric Bursitis

You have stated that your condition was caused by:

- *having a significant physical force applied to or through the affected shoulder joint or the affected hip joint at the time of clinical onset*
- *performing forceful and repetitive motions of the affected shoulder joint or the affected hip joint, involving extremes of the normal range of motion, for at least 4 hours per week for the 1 month immediately preceding clinical onset*
- *being in the third trimester of pregnancy within the 1 week before clinical onset of labral tear of the hip joint*

Diagnosis: Labral Tear with Tendinosis and Greater Trochanteric Bursitis

Basis of diagnosis: The diagnosis was made in the Diagnostic Assessment by Dr Thomas Perkins dated 14 October 2025, and is supported by an MR arthrogram right hip by the radiologist, dated 21 October 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 Labral Tear of the Hip and Shoulder (Reasonable Hypothesis) (No. 33 of 2026)

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

I am satisfied that you have met the following factor:

- *having a significant physical force applied to or through the affected shoulder joint or the affected hip joint at the time of clinical onset*
- *performing forceful and repetitive motions of the affected shoulder joint or the affected hip joint, involving extremes of the normal range of motion, for at least 4 hours per week for the 1 month immediately preceding clinical onset*
- *being in the third trimester of pregnancy within the 1 week before clinical onset of labral tear of the hip 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 sudden severe right groin pain with a painful click and could bear weight only with crutches on 30 March 2010.

The Statement of Principles requires relevant symptoms and corresponding clinical signs of a labral tear together with imaging consistent with a tear of the acetabular labrum. You had acute groin pain with a painful click and a positive flexion, adduction and internal rotation test on 30

March 2010, and persisting clicking, catching and later locking. MR arthrogram on 21 October 2010 showed a tear of the anterosuperior labrum, and MRI on 14 February 2011 showed its extension with a paralabral cyst.

This has then led to further investigations and the diagnosis of your condition of *Labral Tear with Tendinosis and Greater Trochanteric Bursitis*. I have accepted your condition of *Labral Tear with Tendinosis and Greater Trochanteric Bursitis*.

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 30 March 2010.

Right Hip - Labral Tear with Tendinosis and Greater Trochanteric Bursitis (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 14 October 2025;
- A Diagnosis Form (D9287) by Dr Thomas Perkins, General Practitioner, Veterans Health Centre, dated 14 October 2025;
- A pre-deployment medical examination by the medical officer, dated 19 November 2009;
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- A specialist review by the orthopaedic surgeon, dated 7 February 2011;
- An MRI right hip by the radiologist, dated 14 February 2011;
- An operation report by the orthopaedic surgeon, dated 8 September 2011.

Your service

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

8 August 2002 and 11 November 2017

Right Hip - Labral Tear with Tendinosis and Greater Trochanteric Bursitis (Worsening)

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

- *inability to obtain appropriate clinical management for labral tear of the hip and shoulder before clinical worsening*

Diagnosis: Labral Tear with Tendinosis and Greater Trochanteric Bursitis (Worsening)

Basis of diagnosis: The diagnosis was made in the Diagnostic Assessment by Dr Thomas Perkins dated 14 October 2025, and is supported by an MR arthrogram right hip by the radiologist, dated 21 October 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 Labral Tear of the Hip and Shoulder (Balance of Probabilities) (No. 34 of 2026)

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 labral tear of the hip and shoulder before clinical worsening*

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 right groin pain with a painful click and could bear weight only with crutches on 30 March 2010.

The Statement of Principles requires relevant symptoms and corresponding clinical signs of a labral tear together with imaging consistent with a tear of the acetabular labrum. You had acute groin pain with a painful click and a positive flexion, adduction and internal rotation test on 30 March 2010, and persisting clicking, catching and later locking. MR arthrogram on 21 October 2010 showed a tear of the anterosuperior labrum, and MRI on 14 February 2011 showed its extension with a paralabral cyst.

After the condition arose, it was worsened during your service. Appropriate management of an acute traumatic labral tear with mechanical symptoms is prompt MR arthrography and orthopaedic review, protected weight bearing with gait rehabilitation, and early arthroscopic repair when symptoms persist.

This has then led to further investigations and the diagnosis of your condition of *Labral Tear with Tendinosis and Greater Trochanteric Bursitis (Worsening)*. I have accepted your condition of *Labral Tear with Tendinosis and Greater Trochanteric Bursitis (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 7 February 2011.

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service details and clinicians are invented. It is not a decision of the Department of Veterans' Affairs.