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 Knee - Lateral Meniscal Tear

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 3 February 2025;
- A Diagnosis Form (D9287) by Dr Thomas Perkins, General Practitioner, Veterans Health Centre, dated 3 February 2025;
- A pre-deployment medical examination by the medical officer, dated 20 February 2012;
- A deployed health record by the medic and medical officer, patrol base, Afghanistan, dated 17 July 2012;
- A deployed health record and aeromedical evacuation request by the medical officer, Afghanistan, dated 21 July 2012;
- A deployed health record by the medic, patrol base, Afghanistan, dated 2 September 2012;
- A deployed health record by the medical officer, Afghanistan, dated 11 October 2012;
- An MRI right knee by the radiologist, dated 14 December 2012;
- A specialist consultation by the orthopaedic surgeon, dated 10 January 2013;
- An operation report (arthroscopic partial lateral meniscectomy) by the orthopaedic surgeon, dated 21 February 2013;
- A deployed health record by the medical officer, Iraq, dated 22 October 2015;
- An MRI right knee and sports medicine consultation by the radiologist and sports physician, dated 5 August 2018.

Your service

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

24 January 2011 and 15 December 2019

Right Knee - Lateral Meniscal Tear

You have stated that your condition was caused by:

- *having a significant physical force applied to or through the affected knee joint at the time of the clinical onset of acute meniscal tear of the knee*

Diagnosis: Lateral Meniscal Tear

Basis of diagnosis: The diagnosis was made in the Diagnostic Assessment by Dr Thomas Perkins dated 3 February 2025, and is supported by an MRI right knee by the radiologist, dated 14 December 2012.

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

Statement of Principles concerning Acute Meniscal Tear of the Knee (Reasonable Hypothesis) (No. 25 of 2019)

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 knee joint at the time of the clinical onset of acute meniscal tear of the knee*

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 tearing pain on the outer side of the right knee, swelling over the following hours, pain on deep bending and squatting, and catching and giving way when turning on the leg on 17 July 2012.

The diagnosis was confirmed by MRI of the right knee on 14 December 2012, which showed a radial tear of the body of the lateral meniscus extending into a horizontal cleavage tear of the posterior horn with a displaced flap, together with bone bruising of the lateral tibial plateau, and by direct visualisation at arthroscopy on 21 February 2013. This meets the Statement of Principles definition of acute meniscal tear of the knee: an injury causing tearing of a meniscus of the knee joint resulting in a sudden onset of pain and tenderness, and not a chronic tear or degenerative disease of the meniscus.

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

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 17 July 2012.

Right Knee - Lateral Meniscal Tear (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 3 February 2025;
- A Diagnosis Form (D9287) by Dr Thomas Perkins, General Practitioner, Veterans Health Centre, dated 3 February 2025;
- A pre-deployment medical examination by the medical officer, dated 20 February 2012;
- A deployed health record by the medic and medical officer, patrol base, Afghanistan, dated 17 July 2012;
- A deployed health record and aeromedical evacuation request by the medical officer, Afghanistan, dated 21 July 2012;
- A deployed health record by the medic, patrol base, Afghanistan, dated 2 September 2012;
- A deployed health record by the medical officer, Afghanistan, dated 11 October 2012;
- An MRI right knee by the radiologist, dated 14 December 2012;
- A specialist consultation by the orthopaedic surgeon, dated 10 January 2013;
- An operation report (arthroscopic partial lateral meniscectomy) by the orthopaedic surgeon, dated 21 February 2013;
- A deployed health record by the medical officer, Iraq, dated 22 October 2015;
- An MRI right knee and sports medicine consultation by the radiologist and sports physician, dated 5 August 2018.

Your service

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

24 January 2011 and 15 December 2019

Right Knee - Lateral Meniscal Tear (Worsening)

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

- *inability to obtain appropriate clinical management for acute meniscal tear of the knee*

Diagnosis: Lateral Meniscal Tear (Worsening)

Basis of diagnosis: The diagnosis was made in the Diagnostic Assessment by Dr Thomas Perkins dated 3 February 2025, and is supported by an MRI right knee by the radiologist, dated 14 December 2012.

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

Statement of Principles concerning Acute Meniscal Tear of the Knee (Reasonable Hypothesis) (No. 25 of 2019)

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 acute meniscal tear of the knee*

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 tearing pain on the outer side of the right knee, swelling over the following hours, pain on deep bending and squatting, and catching and giving way when turning on the leg on 17 July 2012.

The diagnosis was confirmed by MRI of the right knee on 14 December 2012, which showed a radial tear of the body of the lateral meniscus extending into a horizontal cleavage tear of the posterior horn with a displaced flap, together with bone bruising of the lateral tibial plateau, and by direct visualisation at arthroscopy on 21 February 2013. This meets the Statement of Principles definition of acute meniscal tear of the knee: an injury causing tearing of a meniscus of the knee joint resulting in a sudden onset of pain and tenderness, and not a chronic tear or degenerative disease of the meniscus.

After the condition arose, it was worsened during your service. On warlike service in Afghanistan from 17 July 2012 to 28 November 2012 you were at a forward patrol base with no imaging or surgical capability.

This has then led to further investigations and the diagnosis of your condition of *Lateral Meniscal Tear (Worsening)*. I have accepted your condition of *Lateral Meniscal Tear (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 21 July 2012.

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