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 Sacroiliac Joint Strain

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 22 April 2025;
- A Diagnosis Form (D9287) by Dr Thomas Perkins, General Practitioner, Veterans Health Centre, dated 22 April 2025;
- A pre-deployment medical and physical assessment by the medical officer, dated 2 February 2006;
- A regimental aid post record by the regimental medical officer, Iraq, dated 15 August 2006;
- An X-ray pelvis report by the coalition medical facility, Iraq, dated 22 August 2006;
- A sports medicine consultation and MRI sacroiliac joints by the sports physician and radiologist, dated 8 December 2006;
- A casualty record by the combat medic, Afghanistan, dated 6 July 2010;
- MRI sacroiliac joints and pelvis by Role 3 hospital, dated 2 August 2010;
- A sports medicine consultation and procedure report by the sports physician, dated 14 January 2011.

Your service

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

15 April 2002 and 30 June 2015

Right Sacroiliac Joint Strain

You have stated that your condition was caused by:

- *experiencing a significant physical force applied to or through the affected joint, at the time of the clinical onset of a sprain to that joint ligament*
- *forceful stretching or high intensity use of a muscle or tendon at the time of the clinical onset of a strain to that muscle or tendon*

Diagnosis: Right Sacroiliac Joint Strain

Basis of diagnosis: The diagnosis was made in the Diagnostic Assessment by Dr Thomas Perkins dated 22 April 2025, and is supported by a regimental aid post record by the regimental medical officer, Iraq, dated 15 August 2006.

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

Statement of Principles concerning Sprain and Strain (Reasonable Hypothesis) (No. 27 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 significant physical force applied to or through the affected joint, at the time of the clinical onset of a sprain to that joint ligament*
- *forceful stretching or high intensity use of a muscle or tendon at the time of the clinical onset of a strain to that muscle or tendon*

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 sharp, deep right buttock pain over the sacroiliac joint, radiating to the posterior thigh but not below the knee, worse with standing on the right leg, climbing, getting in and out of vehicles and rolling in bed on 15 August 2006.

The diagnosis was made clinically on 15 August 2006 by the regimental medical officer, who found tenderness over the right posterior superior iliac spine and long dorsal sacroiliac ligament with positive thigh thrust, compression and Gaenslen tests, and pain reproduced by resisted external rotation and stretch of the right piriformis, after a documented injury mechanism. Three or more positive sacroiliac provocation tests are the accepted clinical criterion for sacroiliac joint pain.

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

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 14 August 2006.

Right Sacroiliac Joint Strain (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 22 April 2025;
- A Diagnosis Form (D9287) by Dr Thomas Perkins, General Practitioner, Veterans Health Centre, dated 22 April 2025;
- A pre-deployment medical and physical assessment by the medical officer, dated 2 February 2006;
- A regimental aid post record by the regimental medical officer, Iraq, dated 15 August 2006;
- An X-ray pelvis report by the coalition medical facility, Iraq, dated 22 August 2006;
- A sports medicine consultation and MRI sacroiliac joints by the sports physician and radiologist, dated 8 December 2006;
- A casualty record by the combat medic, Afghanistan, dated 6 July 2010;
- MRI sacroiliac joints and pelvis by Role 3 hospital, dated 2 August 2010;
- A sports medicine consultation and procedure report by the sports physician, dated 14 January 2011.

Your service

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

15 April 2002 and 30 June 2015

Right Sacroiliac Joint Strain (Worsening)

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

- *experiencing a significant physical force applied to or through the affected joint, at the time of the clinical worsening of a sprain to that joint ligament*
- *forceful stretching or high intensity use of a muscle or tendon at the time of the clinical worsening of a strain to that muscle or tendon*
- *inability to obtain appropriate clinical management for sprain or strain*

Diagnosis: Right Sacroiliac Joint Strain (Worsening)

Basis of diagnosis: The diagnosis was made in the Diagnostic Assessment by Dr Thomas Perkins dated 22 April 2025, and is supported by a regimental aid post record by the regimental medical officer, Iraq, dated 15 August 2006.

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

Statement of Principles concerning Sprain and Strain (Reasonable Hypothesis) (No. 27 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 significant physical force applied to or through the affected joint, at the time of the clinical worsening of a sprain to that joint ligament*
- *forceful stretching or high intensity use of a muscle or tendon at the time of the clinical worsening of a strain to that muscle or tendon*
- *inability to obtain appropriate clinical management for sprain or strain*

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 sharp, deep right buttock pain over the sacroiliac joint, radiating to the posterior thigh but not below the knee, worse with standing on the right leg, climbing, getting in and out of vehicles and rolling in bed on 15 August 2006.

The diagnosis was made clinically on 15 August 2006 by the regimental medical officer, who found tenderness over the right posterior superior iliac spine and long dorsal sacroiliac ligament with positive thigh thrust, compression and Gaenslen tests, and pain reproduced by resisted external rotation and stretch of the right piriformis, after a documented injury mechanism. Three or more positive sacroiliac provocation tests are the accepted clinical criterion for sacroiliac joint pain.

After the condition arose, it was worsened during your service. The backward fall onto the right buttock under a 50-kilogram load on 6 July 2010, on warlike service in Afghanistan, applied a significant force through the right sacroiliac joint at the time of the worsening, confirmed on MRI on 2 August 2010 by increased ligament oedema and a partial ligament tear. The same fall on 6 July 2010 on warlike service in Afghanistan forcefully stretched the right piriformis and gluteus medius at the time of the worsening, with fresh oedema in both muscles on MRI on 2 August 2010. On warlike service in Iraq from August to November 2006, prescribed physiotherapy and rest could not be provided and you continued to patrol under full load; in Afghanistan in July 2010 you could not be withdrawn from patrols or imaged until 2 August 2010.

This has then led to further investigations and the diagnosis of your condition of *Right Sacroiliac Joint Strain (Worsening)*. I have accepted your condition of *Right Sacroiliac Joint Strain*

(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 6 July 2010.

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