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 Wrist - Ganglion Cyst

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 July 2025;
- A Diagnosis Form (D9287) by Dr Thomas Perkins, General Practitioner, Veterans Health Centre, dated 3 July 2025;
- A pre-deployment medical examination by the medical officer, Garrison health centre, dated 15 January 2009;
- A casualty record by the crew medic, Afghanistan, dated 12 March 2009;
- An X-ray right wrist report by Role 2 facility, Afghanistan, dated 13 March 2009;
- An outpatient health record by the medical officer, Afghanistan, dated 21 September 2009;
- An ultrasound right wrist report by the radiologist, dated 8 February 2010;
- An outpatient health record and surgical referral by the medical officer, Garrison health centre, dated 8 February 2010;
- An outpatient health record by the medical officer, Afghanistan, dated 14 November 2011;
- An MRI right wrist report by the radiologist, dated 19 January 2012;
- An operation and histopathology reports by the hand surgeon and pathologist, dated 23 March 2012.

Your service

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

14 July 2000 and 18 August 2017

Right Wrist - Ganglion Cyst

You have stated that your condition was caused by:

- *having acute trauma due to a significant physical force applied to the affected joint or tendon within the 1 year before clinical onset*

Diagnosis: Ganglion Cyst

Basis of diagnosis: The diagnosis was made in the Diagnostic Assessment by Dr Thomas Perkins dated 3 July 2025, and is supported by an ultrasound right wrist report by the radiologist, dated 8 February 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 Ganglion (Reasonable Hypothesis) (No. 7 of 2025)

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

I am satisfied that you have met the following factor:

- *having acute trauma due to a significant physical force applied to the affected joint or tendon within the 1 year before clinical onset*

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 a firm lump on the back of the right wrist with aching on gripping, wrist extension and weight bearing through the hand, such as push-ups and climbing on and off your vehicle on 21 September 2009.

The diagnosis was made clinically on 21 September 2009, when a medical officer found a firm, smooth, transilluminating 10 mm swelling over the scapholunate interval and aspirated clear gelatinous fluid, which is diagnostic of a ganglion. It was confirmed on ultrasound on 8 February 2010, which showed a 14 mm multiloculated cyst with a stalk arising from the dorsal scapholunate ligament, meeting the Statement of Principles definition of ganglion.

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

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 21 September 2009.

Right Wrist - Ganglion Cyst (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 July 2025;
- A Diagnosis Form (D9287) by Dr Thomas Perkins, General Practitioner, Veterans Health Centre, dated 3 July 2025;
- A pre-deployment medical examination by the medical officer, Garrison health centre, dated 15 January 2009;
- A casualty record by the crew medic, Afghanistan, dated 12 March 2009;
- An X-ray right wrist report by Role 2 facility, Afghanistan, dated 13 March 2009;
- An outpatient health record by the medical officer, Afghanistan, dated 21 September 2009;
- An ultrasound right wrist report by the radiologist, dated 8 February 2010;
- An outpatient health record and surgical referral by the medical officer, Garrison health centre, dated 8 February 2010;
- An outpatient health record by the medical officer, Afghanistan, dated 14 November 2011;
- An MRI right wrist report by the radiologist, dated 19 January 2012;
- An operation and histopathology reports by the hand surgeon and pathologist, dated 23 March 2012.

Your service

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

14 July 2000 and 18 August 2017

Right Wrist - Ganglion Cyst (Worsening)

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

- *inability to obtain appropriate clinical management for ganglion before clinical worsening*

Diagnosis: Ganglion Cyst (Worsening)

Basis of diagnosis: The diagnosis was made in the Diagnostic Assessment by Dr Thomas Perkins dated 3 July 2025, and is supported by an ultrasound right wrist report by the radiologist,

dated 8 February 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 Ganglion (Reasonable Hypothesis) (No. 7 of 2025)

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 ganglion 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 a firm lump on the back of the right wrist with aching on gripping, wrist extension and weight bearing through the hand, such as push-ups and climbing on and off your vehicle on 21 September 2009.

The diagnosis was made clinically on 21 September 2009, when a medical officer found a firm, smooth, transilluminating 10 mm swelling over the scapholunate interval and aspirated clear gelatinous fluid, which is diagnostic of a ganglion. It was confirmed on ultrasound on 8 February 2010, which showed a 14 mm multiloculated cyst with a stalk arising from the dorsal scapholunate ligament, meeting the Statement of Principles definition of ganglion.

After the condition arose, it was worsened during your service. On warlike service in Afghanistan in 2009 the ganglion was aspirated by a medical officer without imaging and refilled within weeks, and no hand surgeon was available.

This has then led to further investigations and the diagnosis of your condition of *Ganglion Cyst (Worsening)*. I have accepted your condition of *Ganglion Cyst (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 14 November 2011.

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