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.

Solar Lentigo - Multiple Sites

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 15 October 2025;
- A Diagnosis Form (D9287) by Dr Thomas Perkins, General Practitioner, Veterans Health Centre, dated 15 October 2025;
- A deployed health record by the medical officer, East Timor, dated 18 December 1999;
- A dermatology consultation and phototherapy record by the dermatologist, dated 11 August 2005;
- A periodic health examination by the medical officer, RAAF base health centre, dated 10 October 2006;
- An outpatient health record by the medical officer, RAAF base health centre, dated 21 February 2008;
- A deployed health record by the medical officer, Afghanistan, dated 14 April 2012;
- A dermatology consultation by the dermatologist, dated 18 October 2012;
- A histopathology report by the pathologist, dated 7 November 2012;
- A clinical assessment by the general practitioner, dated 15 October 2025.

Your service

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

10 January 1996 and 2 June 2019

Solar Lentigo - Multiple Sites

You have stated that your condition was caused by:

- *having cumulative exposure of the affected sites to solar ultraviolet radiation of at least 1,000 hours before the clinical onset of solar lentigo*
- *having at least 5 episodes of sunburn of the affected sites before the clinical onset of solar lentigo*
- *working outdoors at a latitude closer to the equator than 30 degrees for at least 2,000 hours before the clinical onset of solar lentigo*
- *working on highly reflective surfaces, including concrete, sand, water or bare metal, with the affected sites exposed to solar ultraviolet radiation for at least 1,000 hours before the clinical onset of solar lentigo*
- *being exposed to artificial ultraviolet radiation from electric arc welding without adequate protection of the affected sites for at least 500 hours before the clinical onset of solar lentigo*
- *having psoralen and ultraviolet A (PUVA) phototherapy of the affected sites, of at least 20 treatments, before the clinical onset of solar lentigo*
- *taking a photosensitising drug, including doxycycline, together with exposure of the affected sites to solar ultraviolet radiation, for at least 4 weeks before the clinical onset of solar lentigo*

Diagnosis: Multiple Sites

Basis of diagnosis: The diagnosis was made in the Diagnostic Assessment by Dr Thomas Perkins dated 15 October 2025, and is supported by an outpatient health record by the medical officer, RAAF base health centre, dated 21 February 2008.

I am satisfied this is the appropriate diagnosis.
There is no Statement of Principles (SOP) for this condition. In determining your claim for this condition, I have therefore considered the available evidence, applying the standard of proof:

Balance of Probabilities (reasonable satisfaction) - no Statement of Principles determined for this condition

which requires the evidence to connect the condition with service.

I am satisfied that the evidence establishes the following link to your service:

- *having cumulative exposure of the affected sites to solar ultraviolet radiation of at least 1,000 hours before the clinical onset of solar lentigo*
- *having at least 5 episodes of sunburn of the affected sites before the clinical onset of solar lentigo*
- *working outdoors at a latitude closer to the equator than 30 degrees for at least 2,000 hours before the clinical onset of solar lentigo*
- *working on highly reflective surfaces, including concrete, sand, water or bare metal, with the affected sites exposed to solar ultraviolet radiation for at least 1,000 hours before the clinical onset of solar lentigo*

- *being exposed to artificial ultraviolet radiation from electric arc welding without adequate protection of the affected sites for at least 500 hours before the clinical onset of solar lentigo*
- *having psoralen and ultraviolet A (PUVA) phototherapy of the affected sites, of at least 20 treatments, before the clinical onset of solar lentigo*
- *taking a photosensitising drug, including doxycycline, together with exposure of the affected sites to solar ultraviolet radiation, for at least 4 weeks before the clinical onset of solar lentigo*

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 flat brown spots on the backs of both hands and then on your forearms, cheeks and forehead, which darkened in summer and after long days on the flight line on 21 February 2008.

The diagnosis was made clinically by the medical officer on 21 February 2008 on the finding of multiple uniformly pigmented brown macules of 3 to 8 mm confined to chronically sun-exposed skin, with a fine reticular pattern on dermoscopy, typical of solar lentigines.

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

Having considered your service records and the available medical evidence, I am satisfied the evidence establishes that this condition is related to your peacetime service.

I have therefore accepted that this condition is related to your service with effect from 14 January 2008.

Solar Lentigo - Multiple Sites (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 15 October 2025;
- A Diagnosis Form (D9287) by Dr Thomas Perkins, General Practitioner, Veterans Health Centre, dated 15 October 2025;
- A deployed health record by the medical officer, East Timor, dated 18 December 1999;
- A dermatology consultation and phototherapy record by the dermatologist, dated 11 August 2005;
- A periodic health examination by the medical officer, RAAF base health centre, dated 10 October 2006;
- An outpatient health record by the medical officer, RAAF base health centre, dated 21 February 2008;
- A deployed health record by the medical officer, Afghanistan, dated 14 April 2012;
- A dermatology consultation by the dermatologist, dated 18 October 2012;
- A histopathology report by the pathologist, dated 7 November 2012;
- A clinical assessment by the general practitioner, dated 15 October 2025.

Your service

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

10 January 1996 and 2 June 2019

Solar Lentigo - Multiple Sites (Worsening)

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

- *having further cumulative exposure of the affected sites to solar ultraviolet radiation of at least 500 hours after the clinical onset and before the clinical worsening of solar lentigo*
- *having sunburn of the affected sites after the clinical onset and before the clinical worsening of solar lentigo*
- *taking a photosensitising drug, including doxycycline, together with exposure of the affected sites to solar ultraviolet radiation, for at least 2 weeks within the 3 months before the clinical worsening of solar lentigo*

- *being exposed to artificial ultraviolet radiation from electric arc welding without adequate protection of the affected sites for at least 200 hours after the clinical onset and before the clinical worsening of solar lentigo*
- *inability to obtain appropriate clinical management for solar lentigo*

Diagnosis: Multiple Sites (Worsening)

Basis of diagnosis: The diagnosis was made in the Diagnostic Assessment by Dr Thomas Perkins dated 15 October 2025, and is supported by an outpatient health record by the medical officer, RAAF base health centre, dated 21 February 2008.

I am satisfied this is the appropriate diagnosis.
There is no Statement of Principles (SOP) for this condition. In determining your claim for this condition, I have therefore considered the available evidence, applying the standard of proof:

Balance of Probabilities (reasonable satisfaction) - no Statement of Principles determined for this condition

which requires the evidence to connect the condition with service.

I am satisfied that the evidence establishes the following link to your service:

- *having further cumulative exposure of the affected sites to solar ultraviolet radiation of at least 500 hours after the clinical onset and before the clinical worsening of solar lentigo*
- *having sunburn of the affected sites after the clinical onset and before the clinical worsening of solar lentigo*
- *taking a photosensitising drug, including doxycycline, together with exposure of the affected sites to solar ultraviolet radiation, for at least 2 weeks within the 3 months before the clinical worsening of solar lentigo*
- *being exposed to artificial ultraviolet radiation from electric arc welding without adequate protection of the affected sites for at least 200 hours after the clinical onset and before the clinical worsening of solar lentigo*
- *inability to obtain appropriate clinical management for solar lentigo*

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 flat brown spots on the backs of both hands and then on your forearms, cheeks and forehead, which darkened in summer and after long days on the flight line on 21 February 2008.

The diagnosis was made clinically by the medical officer on 21 February 2008 on the finding of multiple uniformly pigmented brown macules of 3 to 8 mm confined to chronically sun-exposed skin, with a fine reticular pattern on dermoscopy, typical of solar lentigines.

After the condition arose, it was worsened during your service. Between onset on 14 January 2008 and the documented worsening on 18 October 2012 you continued flight line work at a tropical base and then on warlike service in Afghanistan from 6 February 2012 to 14 August 2012, at altitude with intense ultraviolet radiation. On 14 April 2012, on warlike service in Afghanistan, you had blistering sunburn of the forearms, face and ears after sunscreen supplies ran out at your location. You took doxycycline malaria prophylaxis from 30 January 2012 to 11 September 2012. From January 2008 to October 2012 you continued welding airframe components several times a week with your forearms and hands exposed, more than 200 hours of arc exposure, and the lentigines of the hands and forearms became larger and more confluent by 18 October 2012. Dermatology referral was recommended in 2008 but not obtained until October 2012 because of postings and deployment, you were prohibited from wearing a broad-brimmed hat on the flight line, and sunscreen was unavailable at your location in Afghanistan.

This has then led to further investigations and the diagnosis of your condition of *Multiple Sites (Worsening)*. I have accepted your condition of *Multiple Sites (Worsening)*.

Having considered your service records and the available medical evidence, I am satisfied the evidence establishes 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 18 October 2012.

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