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.

Thoracic Spine - 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 23 April 2025;
- A Diagnosis Form (D9287) by Dr Thomas Perkins, General Practitioner, Veterans Health Centre, dated 23 April 2025;
- A pre-deployment aircrew medical examination by the medical officer, RAAF base health centre, dated 14 May 2007;
- An outpatient record by the detachment medical officer, Middle East, dated 3 October 2007;
- An X-ray report by the radiologist, Air base medical facility, Middle East, dated 5 October 2007;
- An MRI report by the radiologist, dated 12 March 2008;
- An outpatient health record by the medical officer, RAAF base health centre, dated 12 March 2008;
- An in-flight casualty record by the flight medic, dated 18 June 2013;
- An MRI report by the radiologist, dated 15 October 2013;
- A specialist consultation by the sports physician, dated 15 October 2013;
- A procedure report by the pain specialist, dated 17 February 2015.

Your service

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

11 February 1998 and 2 October 2017

Thoracic Spine - 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: Strain

Basis of diagnosis: The diagnosis was made in the Diagnostic Assessment by Dr Thomas Perkins dated 23 April 2025, and is supported by an X-ray report by the radiologist, Air base medical facility, Middle East, dated 5 October 2007.

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 sudden severe right mid-back pain with muscle spasm, pain on twisting, bending and deep breathing, and difficulty lifting or sitting upright in the aircraft on 3 October 2007.

The diagnosis was made clinically by the detachment medical officer, who recorded spasm and tenderness of the right thoracic paraspinal muscles from T6 to T9 and focal tenderness over the right T7/8 facet joint with painful restricted rotation on 3 October 2007, after a sudden forceful bracing injury. X-ray on 5 October 2007 excluded a fracture.

This has then led to further investigations and the diagnosis of your condition of *Strain*. I have accepted your condition of *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 3 October 2007.

Thoracic Spine - 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 23 April 2025;
- A Diagnosis Form (D9287) by Dr Thomas Perkins, General Practitioner, Veterans Health Centre, dated 23 April 2025;
- A pre-deployment aircrew medical examination by the medical officer, RAAF base health centre, dated 14 May 2007;
- An outpatient record by the detachment medical officer, Middle East, dated 3 October 2007;
- An X-ray report by the radiologist, Air base medical facility, Middle East, dated 5 October 2007;
- An MRI report by the radiologist, dated 12 March 2008;
- An outpatient health record by the medical officer, RAAF base health centre, dated 12 March 2008;
- An in-flight casualty record by the flight medic, dated 18 June 2013;
- An MRI report by the radiologist, dated 15 October 2013;
- A specialist consultation by the sports physician, dated 15 October 2013;
- A procedure report by the pain specialist, dated 17 February 2015.

Your service

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

11 February 1998 and 2 October 2017

Thoracic Spine - 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: Strain (Worsening)

Basis of diagnosis: The diagnosis was made in the Diagnostic Assessment by Dr Thomas Perkins dated 23 April 2025, and is supported by an X-ray report by the radiologist, Air base medical facility, Middle East, dated 5 October 2007.

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 sudden severe right mid-back pain with muscle spasm, pain on twisting, bending and deep breathing, and difficulty lifting or sitting upright in the aircraft on 3 October 2007.

The diagnosis was made clinically by the detachment medical officer, who recorded spasm and tenderness of the right thoracic paraspinal muscles from T6 to T9 and focal tenderness over the right T7/8 facet joint with painful restricted rotation on 3 October 2007, after a sudden forceful bracing injury. X-ray on 5 October 2007 excluded a fracture.

After the condition arose, it was worsened during your service. Being thrown against the cargo restraints on 18 June 2013 occurred on a tactical descent into a forward airfield in Afghanistan on warlike service in the Middle East Area of Operations. In the same incident on warlike service on 18 June 2013 the thoracic paraspinal muscles were forcefully stretched as your trunk twisted on landing, at the time of the clinical worsening of the strain, shown by new muscle oedema from T6 to T10 on MRI and the rise in the Oswestry Disability Index from 14 to 38 per cent. On warlike service in the Middle East in 2007 no physiotherapy was available at the air base, and the operational flying programme returned you to loading after seven days.

This has then led to further investigations and the diagnosis of your condition of *Strain (Worsening)*. I have accepted your condition of *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 18 June 2013.

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.