

Amendment Statement of Principles

concerning

INTERVERTEBRAL DISC PROLAPSE
(Reasonable Hypothesis)

(No. 38 of 2020)

The Repatriation Medical Authority determines the following Amendment Statement of Principles under subsections 196B(2) and (8) of the *Veterans' Entitlements Act 1986*.

Dated 24 April 2020

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| The Common Seal of theRepatriation Medical Authoritywas affixed to this instrumentat the direction of: |
| RMA Chairperson signatureProfessor Nicholas Saunders AOChairperson |

Contents

1 Name 3

2 Commencement 3

3 Authority 3

4 Amendment 3

1. Name

This is the Amendment Statement of Principles concerning *intervertebral disc prolapse* *(Reasonable Hypothesis)* (No. 38 of 2020).

1. Commencement

 This instrument commences on 25 May 2020.

1. Authority

This instrument is made under subsections 196B(2) and (8) of the *Veterans' Entitlements Act 1986*.

1. Amendment

The Statement of Principles concerning *intervertebral disc prolapse (Reasonable Hypothesis)* (No. 43 of 2016) (Federal Register of Legislation No. F2016L00563) is amended in the following manner:

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| **Section**  | **Amendment** |
| *Schedule 1 – Dictionary* | *Replace the existing definition of "trauma to the relevant disc" with the following*:***trauma to the relevant disc*** means a discrete event involving the application of significant physical force, including G force, to the affected intervertebral disc, that causes: 1. the development of symptoms and signs of pain and tenderness, and either altered mobility or range of movement of that part of the spine. In the case of sustained unconsciousness or the masking of pain by analgesic medication, these symptoms and signs must appear on return to consciousness or the withdrawal of the analgesic medication; and
2. the persistence of these symptoms and signs for a period of at least seven days following their onset, save for where medical intervention for the trauma to the relevant disc has occurred and that medical intervention involves one of the following:
	* + 1. immobilisation of that part of the spine by splinting or similar external agent;
			2. injection of a corticosteroid or local anaesthetic into that part of the spine; or
			3. surgery to that part of the spine.

Note: ***G force*** is also defined in the Schedule 1 - Dictionary. |