

Statement of Principles

concerning

EXTERNAL BURN

(Reasonable Hypothesis)

(No. 110 of 2015)

The Repatriation Medical Authority determines the following Statement of Principles under subsection 196B(2) of the *Veterans’ Entitlements Act 1986*.

Dated 21 August 2015

The Common Seal of the  
Repatriation Medical Authority  
was affixed to this instrument  
at the direction of:



Professor Nicholas Saunders AO

Chairperson

Contents

1 Name 3

2 Commencement 3

3 Authority 3

4 Revocation 3

5 Application 3

6 Definitions 3

7 Kind of injury, disease or death to which this Statement of Principles relates 3

8 Basis for determining the factors 4

9 Factors that must exist 4

10 Relationship to service 5

11 Factors referring to an injury or disease covered by another Statement of Principles 5

Schedule 1 - Dictionary 6

1 Definitions 6

1. Name

This is the Statement of Principles concerning *external burn**(Reasonable Hypothesis)* (No. 110 of ).

1. Commencement

This instrument commences on **21 September 2015**.

1. Authority

This instrument is made under subsection 196B(2) of the *Veterans’ Entitlements Act 1986*.

1. Revocation

The Statement of Principles concerning external burn No. 41 of 2006 made under subsection 196B(2) of the VEA is revoked.

1. Application

This instrument applies to a claim to which section 120A of the VEA or section 338 of the *Military Rehabilitation and Compensation Act 2004* applies.

1. Definitions

The terms defined in the Schedule 1 - Dictionary have the meaning given when used in this instrument.

1. Kind of injury, disease or death to which this Statement of Principles relates
   1. This Statement of Principles is about external burn and death from external burn.

*Meaning of* ***external burn***

* 1. For the purposes of this Statement of Principles, external burn:
     1. means a burn due to external application of an agent; and
     2. includes burns of the eye and sunburn; and
     3. excludes burns of the respiratory tract, gastrointestinal tract and internal genitourinary tract, 'wind burn', frostbite and burns due to electrical injury or friction.

*Death from* ***external burn***

* 1. For the purposes of this Statement of Principles, external burn,in relation to a person, includes death from a terminal event or condition that was contributed to by the person’s external burn.

Note: ***terminal event*** is defined in the Schedule 1 – Dictionary.

1. Basis for determining the factors

The Repatriation Medical Authority is of the view that there is sound medical‑scientific evidence that indicates that external burn and death from external burn can be related to relevant service rendered by veterans, members of Peacekeeping Forces, or members of the Forces under the VEA, or members under the MRCA.

Note: ***relevant service*** is defined in the Schedule 1 – Dictionary.

1. Factors that must exist

At least one of the following factors must as a minimum exist before it can be said that a reasonable hypothesis has been raised connecting external burn or death from external burn with the circumstances of a person’s relevant service:

* 1. having exposure to a heat source sufficient to cause erythema at the affected area of the body at the time of the clinical onset of external burn;
  2. having exposure to extreme cold sufficient to cause erythema at the affected area of the body at the time of the clinical onset of external burn;

Note: ***extreme cold*** is defined in the Schedule 1 - Dictionary.

* 1. having contact with vesicant or corrosive chemicals sufficient to cause erythema at the affected area of the body within the 48 hours before the clinical onset of external burn;
  2. having received a cumulative equivalent dose of at least 1.0 sievert of ionising radiation to the affected area of the body within the 30 days before the clinical onset of external burn;

Note: ***cumulative equivalent dose*** is defined in the Schedule 1 - Dictionary.

* 1. having exposure to radiofrequency or microwave radiation sufficient to cause erythema at the affected area of the body at the time of the clinical onset of external burn;
  2. having exposure to infrared radiation sufficient to cause erythema at the affected area of the body at the time of the clinical onset of external burn;
  3. having laser applied, sufficient to cause erythema, at the affected area of the body at the time of the clinical onset of external burn;
  4. having exposure to ultraviolet radiation sufficient to cause erythema at the affected area of the body at the time of the clinical onset of external burn;
  5. having exposure to high intensity, focussed ultrasound sufficient to cause erythema at the affected area of the body at the time of the clinical onset of external burn;
  6. inability to obtain appropriate clinical management for external burn.

1. Relationship to service
   1. The existence in a person of any factor referred to in section 9 must be related to the relevant service rendered by the person.
   2. The factor set out in subsection 9(10) applies only to material contribution to, or aggravation of, external burn where the person’s external burn was suffered or contracted before or during (but did not arise out of) the person’s relevant service.
2. Factors referring to an injury or disease covered by another Statement of Principles

In this Statement of Principles:

* 1. if a factor referred to in section 9 applies in relation to a person; and
  2. that factor refers to an injury or disease in respect of which a Statement of Principles has been determined under subsection 196B(2) of the VEA;

then the factors in that Statement of Principles apply in accordance with the terms of that Statement of Principles as in force from time to time.

Schedule 1 - Dictionary

Note: See Section 6

1. Definitions
   1. In this instrument:
      1. ***cumulative equivalent dose*** means the total dose of ionising radiation received by the particular organ or tissue. The formula used to calculate the cumulative equivalent dose allows doses from multiple types of ionising radiation to be combined, by accounting for their differing biological effect. The unit of equivalent dose is the sievert. For the purposes of this Statement of Principles, the calculation of cumulative equivalent dose excludes doses received from normal background radiation, but includes therapeutic radiation, diagnostic radiation, cosmic radiation at high altitude, radiation from occupation-related sources and radiation from nuclear explosions or accidents.
      2. ***external burn***—see subsection 7(2).
      3. ***extreme cold*** means zero degrees Celsius or below.
      4. ***MRCA*** means the *Military Rehabilitation and Compensation Act 2004*.
      5. ***relevant service*** means:
2. operational service under the VEA;
3. peacekeeping service under the VEA;
4. hazardous service under the VEA;
5. British nuclear test defence service under the VEA;
6. warlike service under the MRCA; or
7. non-warlike service under the MRCA.
   * 1. ***terminal event*** means the proximate or ultimate cause of death and includes the following:
        1. pneumonia;
        2. respiratory failure;
        3. cardiac arrest;
        4. circulatory failure; or
        5. cessation of brain function.
     2. ***VEA*** means the *Veterans' Entitlements Act 1986*.