

Amendment Statement of Principles concerning GANGLION (Reasonable Hypothesis) (No. 37 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

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

haran

Professor Nicholas Saunders AO Chairperson

Amendment Statement of Principles concerning Ganglion (Reasonable Hypothesis) (No. 37 of 2020) Veterans' Entitlements Act 1986

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1 Name

This is the Amendment Statement of Principles concerning *ganglion* (*Reasonable Hypothesis*) (No. 37 of 2020).

2 Commencement

This instrument commences on 25 May 2020.

3 Authority

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

4 Amendment

The Statement of Principles concerning *ganglion (Reasonable Hypothesis)* (No. 71 of 2016) (Federal Register of Legislation No. F2016L01356) is amended in the following manner:

Section	Amendment
Schedule 1 – Dictionary	<i>Replace the existing definition of "acute trauma to the affected joint or tendon" with the following:</i>
	<i>acute trauma to the affected joint or tendon</i> means a discrete event involving the application of significant physical force to or through the affected joint or tendon, that causes:
	 (a) damage to the joint or tendon; and (b) the development, within 24 hours of the event occurring, of symptoms and signs of pain and tenderness, and either altered mobility or range of movement of the joint or tendon. 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 (c) the persistence of symptoms and signs for a period of at least seven days following their onset, save for where medical intervention for the trauma to that joint or tendon has occurred and that medical intervention involves one of the following: (i) immobilisation of the joint, tendon or limb by splinting or similar external agent; (ii) injection of a corticosteroid or local anaesthetic into that joint or tendon.

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