

Statement of Principles
concerning

EXTERNAL BURN

No. 42 of 2006

for the purposes of the

Veterans' Entitlements Act 1986
and

Military Rehabilitation and Compensation Act 2004

Title

1. This Instrument may be cited as Statement of Principles concerning external burn No. 42 of 2006.

Determination

2. The Repatriation Medical Authority under subsection **196B(3)** and **(8)** of the *Veterans' Entitlements Act 1986* (the VEA):
 - (a) revokes Instrument No. 38 of 1994, as amended by Instrument No. 196 of 1995 concerning external burns and
 - (b) determines in their place this Statement of Principles.

Kind of injury, disease or death

3.
 - (a) This Statement of Principles is about **external burn** and **death from external burn**.
 - (b) For the purposes of this Statement of Principles, “**external burn**” means a burn due to external application of an agent. This definition excludes burns of the respiratory tract, gastrointestinal tract and internal genitourinary tract but includes burns of the eye. The conditions commonly known as ‘wind burn’ and frostbite are also excluded.
 - (c) External burn attracts ICD-10-AM codes T20-T26, T29-T31, T69.8, L55 or L56.8.

- (d) In the application of this Statement of Principles, the definition of “**external burn**” is that given at paragraph 3(b) above.

Basis for determining the factors

4. On the sound medical-scientific evidence available, the Repatriation Medical Authority is of the view that it is more probable than not that **external burn** and **death from external burn** can be related to relevant service rendered by veterans or members of the Forces under the VEA, or members under the *Military Rehabilitation and Compensation Act 2004* (the MRCA).

Factors that must be related to service

5. Subject to clause 7, at least one of the factors set out in clause 6 must be related to the relevant service rendered by the person.

Factors

6. The factor that must exist before it can be said that, on the balance of probabilities, **external burn** or **death from external burn** is connected with the circumstances of a person’s relevant service is:
- (a) application of heat to the affected area of the body at the time of the clinical onset of external burn; or
 - (b) application of extreme cold to the affected area of the body at the time of the clinical onset of external burn; or
 - (c) application of chemicals to the affected area of the body within the 48 hours before the clinical onset of external burn; or
 - (d) having received a cumulative equivalent dose of at least 2.0 Sieverts of ionising radiation to the affected area of the body within the three months before the clinical onset of external burn; or
 - (e) application of friction to the affected area of the body at the time of the clinical onset of external burn; or
 - (f) application of electric shock or lightning to the affected area of the body at the time of the clinical onset of external burn; or
 - (g) application of radiofrequency or microwave radiation to the affected area of the body at the time of the clinical onset of external burn; or

- (h) application of infrared radiation to the affected area of the body at the time of the clinical onset of external burn; or
- (i) application of non-ionising radiation from the use of laser to the affected area of the body at the time of the clinical onset of external burn; or
- (j) application of ultraviolet radiation to the affected area of the body within the 24 hours before the clinical onset of external burn; or
- (k) application of ultrasound to the affected area of the body at the time of the clinical onset of external burn; or
- (l) inability to obtain appropriate clinical management for external burn.

Factors that apply only to material contribution or aggravation

7. Paragraph 6(l) 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 not arising out of) the person's relevant service.

Inclusion of Statements of Principles

8. In this Statement of Principles if a relevant factor applies and that factor includes an injury or disease in respect of which there is a Statement of Principles then the factors in that last mentioned Statement of Principles apply in accordance with the terms of that Statement of Principles as in force from time to time.

Other definitions

9. For the purposes of this Statement of Principles:

“cumulative equivalent dose” means the total equivalent dose of radiation from all types of ionising radiation. It accounts for the differences in biological effectiveness of various types of radiation and allows doses from different radiations to be combined. Each component is calculated by multiplying the absorbed dose in a particular tissue or organ for a given type of radiation by the radiation weighting factor for that radiation. The unit of equivalent dose is the Sievert;

“death from 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;

“ICD-10-AM code” means a number assigned to a particular kind of injury or disease in The International Statistical Classification of Diseases and Related Health Problems, 10th revision, Australian Modification (ICD-10-AM), Fifth Edition, effective date of 1 July 2006, copyrighted by the National Centre for Classification in Health, Sydney, NSW, and having ISBN 1 86487 772 3;

“relevant service” means:

- (a) eligible war service (other than operational service) under the VEA; or
- (b) defence service (other than hazardous service) under the VEA; or
- (c) peacetime service under the MRCA;

“terminal event” means the proximate or ultimate cause of death and includes:

- (a) pneumonia;
- (b) respiratory failure;
- (c) cardiac arrest;
- (d) circulatory failure; or
- (e) cessation of brain function.

Application

- 10.** This Instrument applies to all matters to which section 120B of the VEA or section 339 of the MRCA applies.

Date of effect

- 11.** This Instrument takes effect from 30 August 2006.

Dated this *seventeenth* day of *August* 2006

The Common Seal of the)
Repatriation Medical Authority)
was affixed to this instrument)
in the presence of:)

KEN DONALD
CHAIRPERSON