

Statement of Principles concerning

SUDDEN UNEXPLAINED DEATH No. 57 of 2013

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 sudden unexplained death No. 57 of 2013.

Determination

- 2. The Repatriation Medical Authority under subsection **196B(2)** and **(8)** of the *Veterans' Entitlements Act 1986* (the VEA):
 - (a) revokes Instrument No. 43 of 2005 concerning sudden unexpected death; and
 - (b) determines in its place this Statement of Principles.

Kind of injury, disease or death

- **3.** (a) This Statement of Principles is about **sudden unexplained death**.
 - (b) For the purposes of this Statement of Principles, "sudden unexplained death" means death without evidence of disease or injury which could account for the death, and within twenty-four hours of first onset of symptoms or signs. This includes death delayed beyond 24 hours because of life support by mechanical devices.
 - (c) Sudden unexplained death attracts ICD-10-AM code R96.
 - (d) In the application of this Statement of Principles, the definition of **"sudden unexplained death"** is that given at paragraph 3(b) above.

Basis for determining the factors

4. The Repatriation Medical Authority is of the view that there is sound medical-scientific evidence that indicates that **sudden unexplained death** 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 *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 as a minimum exist before it can be said that a reasonable hypothesis has been raised connecting **sudden unexplained death** with the circumstances of a person's relevant service is:
 - (a) experiencing a direct threat to the person's life within the 24 hours before the sudden unexplained death, and that direct threat to the person's life would evoke feelings of substantial distress, anger or fear in that person; or
 - (b) undertaking physical activity greater than five METs within the one hour before the sudden unexplained death; or
 - (c) receiving a blow to the chest immediately before the sudden unexplained death; or
 - (d) having a BMI of 35 or greater at the time of the sudden unexplained death; or
 - (e) having a blood alcohol content of at least 0.15 percent at the time of the sudden unexplained death; or
 - (f) having diabetes mellitus at the time of the sudden unexplained death; or
 - (g) having epilepsy at the time of the sudden unexplained death; or
 - (h) having hypertension at the time of the sudden unexplained death; or
 - (i) being treated with:
 - (i) a drug which prolongs the corrected QT interval; or
 - (ii) a non-potassium-sparing diuretic, within the seven days before the sudden unexplained death; or
 - (j) using cocaine within the 24 hours before the sudden unexplained death; or
 - (k) using methamphetamine, or 3,4-methylenedioxymethamphetamine, within the 24 hours before the sudden unexplained death.

Inclusion of Statements of Principles

7. 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

- **8.** For the purposes of this Statement of Principles:
 - "a blow to the chest" means a blunt, forceful, non-penetrating blow to the anterior chest without structural injury to the ribs, sternum or heart;
 - "a direct threat to the person's life" means a major, stressful event which is life-threatening to the person and which includes, but is not limited to:
 - (a) being subject to a life-threatening attack;
 - (b) being assaulted, including sexual assault; or
 - (c) direct exposure to a life-threatening disaster or incident;
 - "a non-potassium-sparing diuretic" means a drug known as a loop diuretic or one of the thiazide group;
 - "BMI" means body mass index and is calculated as follows:

The BMI = W/H^{T} where:

W is the person's weight in kilograms; and

H is the person's height in metres;

"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), Eighth Edition, effective date of 1 July 2013, copyrighted by the Independent Hospital Pricing Authority, and having ISBN 978-1-74128-213-9;

"MET" means a unit of measurement of the level of physical exertion. 1 MET = 3.5 ml of oxygen/kg of body weight per minute, or 1.0 kcal/kg of body weight per hour, or resting metabolic rate;

"relevant service" means:

- (a) operational service under the VEA;
- (b) peacekeeping service under the VEA;
- (c) hazardous service under the VEA;
- (d) British nuclear test defence service under the VEA;
- (e) warlike service under the MRCA; or
- (f) non-warlike service under the MRCA.

Application

9. This Instrument applies to all matters to which section 120A of the VEA or section 338 of the MRCA applies.

Date of effect

10. This Instrument takes effect from 4 September 2013.

Dated this twenty-sixth day of August 2013

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

PROFESSOR NICHOLAS SAUNDERS AO CHAIRPERSON