



SUMMARY OF CHANGES:

INSTRUMENT NOS. 3 to 20 of 2020; 17 & 18 OF 2015 – REPEAL

Statements of Principles Nos. 3 to 20 of 2020, and Nos. 17 & 18 of 2015 – Repeal, were signed by the Chairperson of the Repatriation Medical Authority (the Authority) on 28 February 2020. The day of commencement as specified in each of these Instruments is 23 March 2020.

These Instruments have been lodged and registered with the Federal Register of Legislation, pursuant to section 15G of the *Legislation Act 2003* (Legislation Act). In accordance with the Legislation Act, the Office of Parliamentary Counsel must generally deliver a legislative instrument for laying before each House of the Parliament within six sitting days of that House after the instrument is registered with the instrument's registered explanatory statement. The Instruments and the associated Explanatory Statements registered with the Federal Register of Legislation are available from <http://www.legislation.gov.au>.

Copies of each Instrument, the associated Explanatory Statement and a list of references relating to each Statement of Principles, are available in accordance with the *Veterans' Entitlements Act 1986* (the VEA), on written request from the RMA Secretariat.

The 'User Guide to the RMA Statements of Principles' explains the meaning and purpose of each section of the Statement of Principles template which commenced in 2015. This document is available on the Authority's website at <http://www.rma.gov.au>.

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6 March 2020

SUMMARY OF CHANGES

Instr. No.	Title	Date of Commencement	ICD-10-AM Code
REPEALS			
3 & 4/2020	chronic multisymptom illness	23/03/2020	Nil
5 & 6/2020	acute pancreatitis	23/03/2020	K85
7 & 8/2020	hypersensitivity pneumonitis	23/03/2020	J67
9 & 10/2020	malignant neoplasm of the nasopharynx	23/03/2020	C11
11 & 12/2020	multiple sclerosis	23/03/2020	G35
17 & 18/2015 - Repeal	dysbaric osteonecrosis	23/03/2020	Nil
DETERMINATIONS			
13 & 14/2020	osteonecrosis	23/03/2020	K10.2, M87, M90.3, M90.4 or M90.5
AMENDMENTS			
15 & 16/2020	migraine	23/03/2020	N/A
17/2020	acute myeloid leukaemia	23/03/2020	N/A
18/2020	malignant neoplasm of the lung	23/03/2020	N/A
19 & 20/2020	malignant neoplasm of the eye	23/03/2020	N/A

Note:

1. The investigation concerning 'extrinsic allergic alveolitis' has resulted in the determination of Statements of Principles concerning hypersensitivity pneumonitis.
2. The investigation concerning osteonecrosis, including dysbaric osteonecrosis, has resulted in the determination of Statements of Principles concerning osteonecrosis, Nos. 13 & 14 of 2020, and the repeal of the Statements of Principles concerning dysbaric osteonecrosis, Nos. 17 & 18 of 2015. Dysbaric osteonecrosis is now included in the Statements of Principles concerning osteonecrosis.
3. Following its focussed review in respect of insecticides as a factor in acute myeloid leukaemia, the Authority proposes to amend Statement of Principles No. 71 of 2015. The Authority does not propose to amend Statement of Principles No. 72 of 2015 and a Declaration is expected to appear in the Government Notices Gazette on 11 March 2020 advising of this outcome.

4. Following its focussed review in respect of insecticides as a factor in malignant neoplasm of the lung, the Authority proposes to amend Statement of Principles No. 92 of 2014. The Authority does not propose to amend Statement of Principles No. 93 of 2014 and a Declaration is expected to appear in the Government Notices Gazette on 11 March 2020 advising of this outcome.

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<p>3 & 4/2020</p>	<p>chronic multisymptom illness</p>	<p>These Instruments result from an investigation notified by the Authority in the Government Notices Gazette of 7 May 2019 concerning <i>chronic multisymptom illness</i> in accordance with section 196G of the VEA. The investigation involved an examination of the sound medical-scientific evidence now available to the Authority, including the sound medical-scientific evidence it has previously considered.</p> <p>The contents of these Instruments are in similar terms as the repealed Instruments. Comparing these Instruments and the repealed Instruments, the differences include:</p> <p>For RH SoP (Instrument No. 3/2020)</p> <ul style="list-style-type: none"> • adopting the latest revised Instrument format, which commenced in 2015; • specifying a day of commencement for the Instrument in section 2; • including a note in section 4 emphasising that although the investigation that commenced on 31 October 2012 related to Gulf War veterans, a Statement of Principles was determined under subsection 196B(2) of the VEA concerning chronic multisymptom illness. The sound medical-scientific evidence available to the Authority did not limit this disease to any particular conflict and the new Instrument concerning chronic multisymptom illness continues to apply to all veterans and serving members with relevant service who have an illness which meets the definition; • revising the definition of 'chronic multisymptom illness' in subsection 7(2); • revising the factor in subsection 9(1) concerning 'a hostile or life-threatening environment'; • revising the factor in subsection 9(2) concerning experiencing a category 1A stressor, with the inclusion of a note; • revising the factor in subsection 9(3) concerning experiencing a category 1B stressor, with the inclusion of a note; • new definitions of 'MRCA' and 'VEA' in Schedule 1 - Dictionary; and • revising the definitions of 'category 1B stressor', by the inclusion of a note, and 'relevant service', by the inclusion of a note, in Schedule 1 – Dictionary. <p>For BoP SoP (Instrument No. 4/2020)</p> <ul style="list-style-type: none"> • adopting the latest revised Instrument format, which commenced in 2015; • specifying a date of effect for the Instrument in section 2; • including a note in section 4 emphasising that although the investigation that commenced on 31 October 2012 related to Gulf War veterans, a Statement of Principles was determined under subsection 196B(3) of the VEA concerning chronic multisymptom illness. The sound medical-scientific evidence available to the Authority did not limit this disease to any particular conflict and the new Instrument concerning chronic multisymptom illness continues to apply to all veterans and serving members with relevant service who have an illness which meets the definition; • revising the definition of 'chronic multisymptom illness' in subsection 7(2); • new definitions of 'MRCA' and 'VEA' in Schedule 1 - Dictionary; and • revising the definition of 'relevant service', by the inclusion of a note, in Schedule 1- Dictionary. <p>The determining of these Instruments finalises the investigation in relation to <i>chronic multisymptom illness</i> as advertised in the Government Notices Gazette of 7 May 2019.</p>
<p>5 & 6/2020</p>	<p>acute pancreatitis</p>	<p>These Instruments result from an investigation notified by the Authority in the Government Notices Gazette of 6 November 2018 concerning <i>acute pancreatitis</i> in accordance with section 196G of the VEA. The investigation involved an examination of the sound medical-scientific evidence now available to the Authority, including the sound medical-scientific evidence it has previously considered.</p> <p>The contents of these Instruments are in similar terms as the repealed Instruments. Comparing these Instruments and the repealed Instruments, the differences include:</p> <p>For RH & BoP SoPs (Instrument Nos. 5 & 6/2020)</p> <ul style="list-style-type: none"> • adopting the latest revised Instrument format, which commenced in 2015; • specifying a day of commencement for the Instrument in section 2; • revising the definition of 'acute pancreatitis' in subsection 7(2); • revising the reference to 'ICD-10-AM code' in subsection 7(4); • revising the factor in subsection 9(1) concerning smoking; • revising the factor in subsection 9(2) concerning alcohol; • revising the factor in subsection 9(4) concerning biliary microlithiasis or biliary sludge, with the inclusion of a note; • revising the factor in subsection 9(5) concerning pancreatic outflow obstruction, with the inclusion of a note;

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		<ul style="list-style-type: none"> • revising the factor in subsection 9(6) concerning penetrating or major blunt trauma; • new factor in subsection 9(7) concerning spinal cord injury; • new factor in subsection 9(8) concerning undergoing a procedure; • revising the factor in subsection 9(10) concerning a course of peritoneal dialysis or haemodialysis; • revising the factor in subsection 9(11) concerning solid organ transplant; • revising the factor in subsection 9(12) concerning being treated with a drug or a drug from a class of drugs; • revising the factor in subsection 9(13) concerning being treated with a drug which is associated in the individual with specified requirements; • new factor in subsection 9(14) concerning diabetes mellitus; • revising the factor in subsection 9(15) concerning having hypertriglyceridaemia; • revising the factor in subsection 9(17) concerning having a disease; • revising the factor in subsection 9(19) concerning acute infection with an organism; • revising the factor in subsection 9(20) concerning infection with human immunodeficiency virus; • revising the factor in subsection 9(21) concerning an infestation; • revising the factor in subsection 9(22) concerning being envenomated by a snake or scorpion; • revising the factor in subsection 9(23) concerning acute toxicity after oral ingestion of mushrooms, with the inclusion of a note; • revising the factor in subsection 9(24) concerning ingesting an agent; • new factor in subsection 9(25) concerning being obese, for severe acute pancreatitis only; • deleting the factor concerning undergoing intra-abdominal or intrathoracic surgery, as it is subsumed by the factor in subsection 9(8) concerning undergoing a procedure; • deleting the factor concerning ascariasis or clonorchiasis, as it is subsumed by the factor in subsection 9(21) concerning an infestation; • new definitions of 'acute infection with an organism', 'being obese', 'BMI', 'MRCA', 'pancreatic outflow obstruction', 'severe acute pancreatitis', 'specified list of agents', 'specified list of diseases', 'specified list of drugs', 'specified list of infestations', 'specified list of procedures' and 'VEA' in Schedule 1 - Dictionary; • revising the definitions of 'pack-years of cigarettes, or the equivalent thereof in other tobacco products' and 'relevant service' in Schedule 1 - Dictionary; and • deleting the definitions of 'a disease from the specified list', 'acute infection with an organism from the specified list', 'an agent from the specified list', 'being treated with a drug from the specified table' and 'pancreatic outflow obstruction due to a disorder from the specified list'. <p>The determining of these Instruments finalises the investigation in relation to <i>acute pancreatitis</i> as advertised in the Government Notices Gazette of 6 November 2018.</p>
<p>7 & 8/2020</p>	<p>hypersensitivity pneumonitis</p>	<p>These Instruments result from an investigation notified by the Authority in the Government Notices Gazette of 6 November 2018 concerning <i>extrinsic allergic alveolitis</i> in accordance with section 196G of the VEA. The investigation involved an examination of the sound medical-scientific evidence now available to the Authority, including the sound medical-scientific evidence it has previously considered.</p> <p>The contents of these Instruments are in similar terms as the repealed Instruments. Comparing these Instruments and the repealed Instruments, the differences include:</p> <p><i>For RH & BoP SoPs (Instrument Nos. 7 & 8/2020)</i></p> <ul style="list-style-type: none"> • adopting the latest revised Instrument format, which commenced in 2015; • specifying a day of commencement for the Instrument in section 2; • changing the title of the Instrument to 'hypersensitivity pneumonitis'; • new definition of 'hypersensitivity pneumonitis' in subsection 7(2); • revising the reference to 'ICD-10-AM code' in subsection 7(4); • revising the factors in subsections 9(1) & 9(2) concerning inhaling the specific antigen responsible for the hypersensitivity pneumonitis; • new definitions of 'MRCA', 'specific antigen responsible for the hypersensitivity pneumonitis' and 'VEA' in Schedule 1 - Dictionary; • revising the definitions of 'antigen' and 'relevant service' in Schedule 1 - Dictionary; and • deleting the definitions of 'an antigenic source' and 'the specific antigen responsible for the extrinsic allergic alveolitis'.

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		<p>The determining of these Instruments finalises the investigation in relation <i>extrinsic allergic alveolitis</i> as advertised in the Government Notices Gazette of 6 November 2018.</p>
<p>9 & 10/2020</p>	<p>malignant neoplasm of the nasopharynx</p>	<p>These Instruments result from an investigation notified by the Authority in the Government Notices Gazette of 6 November 2018 concerning <i>malignant neoplasm of the nasopharynx</i> in accordance with section 196G of the VEA. The investigation involved an examination of the sound medical-scientific evidence now available to the Authority, including the sound medical-scientific evidence it has previously considered.</p> <p>The contents of these Instruments are in similar terms as the repealed Instruments. Comparing these Instruments and the repealed Instruments, the differences include:</p> <p>For RH SoP (Instrument No. 9/2020)</p> <ul style="list-style-type: none"> • adopting the latest revised Instrument format, which commenced in 2015; • specifying a day of commencement for the Instrument in section 2; • revising the definition of 'malignant neoplasm of the nasopharynx' in subsection 7(2); • revising the reference to 'ICD-10-AM code' in subsection 7(4); • revising the factor in subsection 9(1) concerning infection with the Epstein-Barr virus; • revising the factor in subsection 9(2) concerning infection with human immunodeficiency virus; • revising the factor in subsection 9(3) concerning smoking; • revising the factor in subsection 9(4) concerning consuming alcohol; • revising the factor in subsection 9(6) concerning inhaling wood dust, with the inclusion of a note; • revising the factor in subsection 9(7) concerning inhaling formaldehyde; • revising the factor in subsection 9(9) concerning consuming Chinese-style salted fish; • revising the factor in subsection 9(10) concerning consuming preserved vegetables; • revising the factor in subsection 9(11) concerning an inability to consume fresh fruit and vegetables; • new factor in subsection 9(12) concerning chronic sinusitis or chronic rhinitis; • new definitions of 'MRCA' and 'VEA' in Schedule 1 - Dictionary; • revising the definitions of 'Chinese-style salted fish', 'pack-years of cigarettes, or the equivalent thereof in other tobacco products' and 'relevant service' in Schedule 1- Dictionary; and • deleting the definition of 'alcohol'. <p>For BoP SoP (Instrument No. 10/2020)</p> <ul style="list-style-type: none"> • adopting the latest revised Instrument format, which commenced in 2015; • specifying a day of commencement for the Instrument in section 2; • revising the definition of 'malignant neoplasm of the nasopharynx' in subsection 7(2); • revising the reference to 'ICD-10-AM code' in subsection 7(4); • revising the factor in subsection 9(1) concerning having infection with the Epstein-Barr virus; • revising the factor in subsection 9(2) concerning smoking; • revising the factor in subsection 9(4) concerning inhaling wood dust, with the inclusion of a note; • revising the factor in subsection 9(5) concerning inhaling formaldehyde; • revising the factor in subsection 9(6) concerning consuming Chinese-style salted fish; • new factor in subsection 9(7) concerning consuming preserved vegetables; • deleting the factor concerning human immunodeficiency virus; • new definitions of 'MRCA', 'preserved vegetables' and 'VEA' in Schedule 1 - Dictionary; • revising the definitions of 'Chinese-style salted fish', 'pack-years of cigarettes, or the equivalent thereof in other tobacco products' and 'relevant service' in Schedule 1 – Dictionary. <p>On 4 October 2019, the Authority wrote to organisations representing veterans, service personnel and their dependants regarding the proposed Instruments and the medical-scientific material considered by the Authority. This letter emphasised the deletion of a factor relating to <i>human immunodeficiency virus</i> from the balance of probabilities Instrument. The Authority provided an opportunity to the organisations to make representations in relation to the proposed Instruments prior to their determination. No submissions were received for consideration by the Authority. A minor change was made to the proposed reasonable hypothesis Instrument following this consultation process.</p>

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		<p>The determining of these Instruments finalises the investigation in relation <i>malignant neoplasm of the nasopharynx</i> as advertised in the Government Notices Gazette of 6 November 2018.</p>
<p>11 & 12/2020</p>	<p>multiple sclerosis</p>	<p>These Instruments result from an investigation notified by the Authority in the Government Notices Gazette of 6 November 2018 concerning <i>multiple sclerosis</i> in accordance with section 196G of the VEA. The investigation involved an examination of the sound medical-scientific evidence now available to the Authority, including the sound medical-scientific evidence it has previously considered.</p> <p>The contents of these Instruments are in similar terms as the repealed Instruments. Comparing these Instruments and the repealed Instruments, the differences include:</p> <p>For RH SoP (Instrument No. 11/2020)</p> <ul style="list-style-type: none"> • adopting the latest revised Instrument format, which commenced in 2015; • specifying a day of commencement for the Instrument in section 2; • revising the definition of 'multiple sclerosis' in subsection 7(2); • revising the reference to 'ICD-10-AM code' in subsection 7(4); • new factor in subsection 9(1) concerning having acute infectious mononucleosis; • revising the factors in subsections 9(2) & 9(12) concerning smoking, with the inclusion of a note; • new factors in subsections 9(3) & 9(13) concerning being exposed to second-hand smoke; • revising the factor in subsection 9(4) concerning an organic solvent; • new factor in subsection 9(6) concerning an inability to meet the specified sunlight exposure levels; • revising the factor in subsection 9(7) concerning having vitamin D deficiency; • new factors in subsections 9(8) & 9(16) concerning undergoing a course of treatment with an immune checkpoint inhibitor; • new factor in subsection 9(9) concerning being overweight, for clinical onset only; • new factor in subsection 9(10) concerning having type 1 diabetes mellitus, for clinical onset only; • new factor in subsection 9(14) concerning undergoing a course of treatment with a tumour necrosis factor alpha antagonist, for clinical worsening; • new factor in subsection 9(15) concerning undergoing a course of treatment with granulocyte colony-stimulating factor or interferon, for clinical worsening only; • revising the factor in subsection 9(17) concerning experiencing the death of a significant other, with the inclusion of a note; • revising the factor in subsection 9(18) concerning experiencing a category 1A stressor, with the inclusion of a note; • revising the factor in subsection 9(19) concerning experiencing a category 1B stressor, with the inclusion of a note; • revising the factor in subsection 9(20) concerning experiencing a category 2 stressor, with the inclusion of two notes; • revising the factor in subsection 9(22) concerning using hormonal assisted reproductive therapy, for women only; • revising the factor in subsection 9(23) concerning undergoing a course of therapeutic radiation; • revising the factor in subsection 9(24) concerning ionising radiation, with the inclusion of a note; • new factor in subsection 9(25) concerning having dyslipidaemia, for clinical worsening only; • deleting the factor concerning being infected with Epstein-Barr virus, as it is now covered by the factor in subsection 9(1) concerning acute infectious mononucleosis; • deleting the factor concerning undergoing a course of treatment with a drug or a drug from a class of drugs, as it is now subsumed by the factor in subsection 9(14) concerning undergoing a course of treatment with a tumour necrosis factor alpha antagonist, and the factor in subsection 9(15) concerning undergoing a course of treatment with granulocyte colony-stimulating factor or interferon; • deleting the factor concerning having evidence of vitamin D insufficiency as it is now covered by the factor in subsection 9(6) concerning an inability to meet the specified sunlight exposure levels, and the factor in subsection 9(7) concerning having vitamin D deficiency; • deleting the factor concerning experiencing the death of a related child; • deleting the factor concerning being within six months postpartum;

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- new definitions of 'being exposed to second-hand smoke', 'being overweight', 'BMI', 'dyslipidaemia', 'hormonal assisted reproductive therapy', 'MRCA' and 'VEA' in Schedule 1 - Dictionary;
- revising the definitions of 'category 1A stressor', 'category 1B stressor', with the inclusion of a note, 'category 2 stressor', with the inclusion of a note, 'pack-years of cigarettes, or the equivalent thereof in other tobacco products', 'relevant service' and 'specified sunlight exposure levels' in Schedule 1 - Dictionary; and
- deleting the definitions of 'a course of therapeutic radiation', 'a drug or a drug from a class of drugs from the specified list', 'a related child', 'assisted reproductive technology', 'being infected with Epstein-Barr virus', 'having evidence of vitamin D insufficiency' and 'vitamin D deficiency'.

For BoP SoP (Instrument No. 12/2020)

- adopting the latest revised Instrument format, which commenced in 2015;
- specifying a day of commencement for the Instrument in section 2;
- revising the definition of 'multiple sclerosis' in subsection 7(2);
- revising the reference to 'ICD-10-AM code' in subsection 7(4);
- revising the factors in subsections 9(2) & 9(7) concerning smoking, with the inclusion of a note;
- new factors in subsections 9(3) & 9(8) concerning being exposed to second-hand smoke;
- revising the factor in subsection 9(4) concerning having vitamin D deficiency;
- new factor in subsection 9(5) concerning being obese, for clinical onset only;
- new factor in subsection 9(9) concerning undergoing a course of treatment with a tumour necrosis factor alpha antagonist, for clinical worsening only;
- new factor in subsection 9(10) concerning undergoing a course of treatment with granulocyte colony-stimulating factor or interferon, for clinical worsening only;
- new factor in subsection 9(11) concerning undergoing a course of treatment with an immune checkpoint inhibitor, for clinical worsening only;
- revising the factor in subsection 9(12) concerning experiencing the death of a significant other, with the inclusion of a note;
- revising the factor in subsection 9(13) concerning experiencing a category 1A stressor, with the inclusion of a note;
- revising the factor in subsection 9(14) concerning experiencing a category 1B stressor, with the inclusion of a note;
- revising the factor in subsection 9(15) concerning experiencing a category 2 stressor, with the inclusion of two notes;
- new factor in subsection 9(17) concerning using hormonal assisted reproductive therapy, for women only, for clinical worsening only;
- new factor in subsection 9(18) concerning undergoing a course of therapeutic radiation;
- deleting the factor concerning undergoing a course of treatment with a drug or a drug from a class of drugs, as it is now subsumed by the factor in subsection 9(9) concerning undergoing a course of treatment with a tumour necrosis factor alpha antagonist, and the factor in subsection 9(10) concerning undergoing a course of treatment with granulocyte colony-stimulating factor or interferon;
- new definitions of 'being exposed to second-hand smoke', 'being obese', 'BMI', 'hormonal assisted reproductive therapy', 'MRCA' and 'VEA' in Schedule 1 - Dictionary;
- revising the definitions of 'category 1A stressor', 'category 1B stressor', with the inclusion of a note, 'category 2 stressor', with the inclusion of a note, 'pack-years of cigarettes, or the equivalent thereof in other tobacco products' and 'relevant service' in Schedule 1 - Dictionary; and
- deleting the definitions of 'a drug or a drug from a class of drugs from the specified list' and 'vitamin D deficiency'.

On 4 October 2019, the Authority wrote to organisations representing veterans, service personnel and their dependants regarding the proposed Instruments and the medical-scientific material considered by the Authority. This letter emphasised the deletion of factors relating to *experiencing the death of a related child* and *being within six months postpartum* from the reasonable hypothesis Instrument. The Authority provided an opportunity to the organisations to make representations in relation to the proposed Instruments prior to their determination. No submissions were received for consideration by the Authority. No changes were made to the proposed Instruments following this consultation process.

The determining of these Instruments finalises the investigation in relation *multiple sclerosis* as advertised in the Government Notices Gazette of 6 November 2018.

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17 & 18 of 2015 - Repeal	dysbaric osteonecrosis	<p>These Instruments result from an investigation notified by the Authority in the Government Notices Gazette of 7 May 2019 concerning <i>osteonecrosis, including dysbaric osteonecrosis</i>, in accordance with section 196G of the VEA. The investigation involved an examination of the sound medical-scientific evidence now available to the Authority, including the sound medical-scientific evidence it has previously considered concerning dysbaric osteonecrosis.</p> <p>The Authority is repealing the existing Statements of Principles concerning dysbaric osteonecrosis, Nos. 17 and 18 of 2015, for the reason that the Authority has included dysbaric osteonecrosis in the new Statements of Principles concerning osteonecrosis, Nos. 13 and 14 of 2020. The repeal of these Instruments removes the possibility of confusion for claimants and decision makers with regard to the relevant Instruments to be applied in claims for osteonecrosis made under the VEA or the <i>Military Rehabilitation and Compensation Act 2004</i>.</p> <p>The determining of these Instruments finalises the investigation in relation to osteonecrosis, including dysbaric osteonecrosis, as advertised in the Government Notices Gazette of 7 May 2019.</p>
13 & 14/2020	osteonecrosis	<p>New Condition</p> <p>Following its investigation in relation to <i>osteonecrosis, including dysbaric osteonecrosis</i>, the Authority is including clinical onset factors for dysbaric osteonecrosis in the new Instruments concerning osteonecrosis and is repealing the existing Statements of Principles concerning dysbaric osteonecrosis, Nos. 17 and 18 of 2015.</p> <p>The determining of these new Instruments finalises the investigation in relation to osteonecrosis, including dysbaric osteonecrosis, as advertised in the Government Notices Gazette of 7 May 2019.</p>
15 & 16/2020	migraine	<p>Amendment</p> <p>These instruments amend Statements of Principles Nos. 7 & 8 of 2018 concerning <i>migraine</i> by:</p> <p>For RH & BoP SoPs (Instrument Nos. 15 & 16/2020)</p> <ul style="list-style-type: none"> replacing the definition of 'migraine' in subsection 7(2); and inserting new definitions of 'chronic migraine', 'ICHD-3', 'migraine with aura', 'migraine without aura' and 'vestibular migraine' in alphabetical order in the Schedule 1 – Dictionary. <p>The determining of these Instruments finalises the investigation in relation to migraine as advertised in the Government Notices Gazette of 3 September 2019.</p>
17/2020	acute myeloid leukaemia	<p>Amendment</p> <p>This instrument amends Statement of Principles No. 71 of 2015 concerning <i>acute myeloid leukaemia</i> by:</p> <p>For RH SoP (Instrument No. 17/2020)</p> <ul style="list-style-type: none"> inserting a new factor in subsection 9(13a) concerning inhaling, ingesting or having cutaneous contact with dieldrin or aldrin; and inserting a new factor in subsection 9(13b) concerning inhaling, ingesting or having cutaneous contact with diazinon. <p>The determining of this Instrument finalises the investigation in relation to acute myeloid leukaemia as advertised in the Government Notices Gazette of 29 October 2019.</p>
18/2020	malignant neoplasm of the lung	<p>Amendment</p> <p>This instrument amends Statement of Principles No. 92 of 2014 concerning <i>malignant neoplasm of the lung</i> by:</p> <p>For RH SoP (Instrument No. 18/2020)</p> <ul style="list-style-type: none"> inserting new factor "(ya)" following factor "(y)" in clause 6 concerning inhaling, ingesting or having cutaneous contact with diazinon. <p>The determining of this Instrument finalises the investigation in relation to malignant neoplasm of the lung as advertised in the Government Notices Gazette of 29 October 2019.</p>
19 & 20/2020	malignant neoplasm of the eye	<p>Amendment</p> <p>These instruments amend Statements of Principles Nos. 7 & 8 of 2018 concerning <i>malignant neoplasm of the eye</i> by:</p> <p>For RH & BoP SoPs (Instrument Nos. 19 & 20/2020)</p>

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| | | <ul style="list-style-type: none">• replacing the existing factor in subsection 9(4) concerning being treated with an immunosuppressive drug; and• replacing the existing definition of 'immunosuppressive drug' in Schedule 1 – Dictionary. <p>The determining of these Instruments finalises the investigation in relation to <i>malignant neoplasm of the eye</i> as advertised in the Government Notices Gazette of 29 October 2019.</p> |
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