

INSTRUMENT NOS. 60 to 77 of 2022

Statements of Principles Nos. 60 to 77 of 2022 were signed by the Chairperson of the Repatriation Medical Authority (the Authority) on 24 June 2022. The day of commencement as specified in each of these Instruments is 25 July 2022.

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 the Authority's website at http://www.rma.gov.au.

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 also available on the Authority's website at http://www.rma.gov.au.

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7 July 2022

Instr. No.	Title	Date of Commencement	ICD-10-AM Code			
REPEALS						
60 &61/2022	hiatus hernia	25/07/2022	Nil			
62 & 63/2022	otitis media	25/07/2022	H65, H66, H67			
64 & 65/2022	somatic symptom disorder	25/07/2022	Nil			
66 & 67/2022	sick sinus syndrome	25/07/2022	I49.5			
68 & 69/2022	sleep apnoea	25/07/2022	G47.30, G47.31, G47.32, G47.33 G47.39			
70 & 71/2022	dermatomyositis	25/07/2022	Nil			
72 & 73/2022	erectile dysfunction	25/07/2022	F52.2, N48.4			
DETERMINATIONS						
Nil						
AMENDMENTS						
74 & 75/2022	Guillain-Barre syndrome	25/07/2022	G61.0			
76 & 77/2022	osteoarthritis	25/07/2022	M15, M16, M17, M18, M19			

SUMMARY OF CHANGES				
60 & 61/2022	hiatus hernia	These Instruments result from an investigation notified by the Authority in the Government Notices Gazette of 2 November 2021 concerning epileptic <i>seizure</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. The contents of these Instruments are in similar terms as the repealed Instruments. Comparing these Instruments and the repealed Instruments, the differences include: For RH SoP (Instrument No. 60/2022) 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 'hiatus hernia' in subsection 7(2);		
		 revising the factors in subsections 9(1) and 9(9) concerning having a surgical procedure; deleting the factors concerning undergoing a partial or total gastrectomy as this is now covered by factors 9(1) and 9(9) concerning having a surgical procedure; revising the factors in subsections 9(2) and 9(10) concerning having a blunt or penetrating injury; revising the factors in subsections 9(3) and 9(11) concerning having acute elevation of pressure within the abdominal cavity; 		
		 revising the factors in subsections 9(4) and 9(12) concerning being overweight or obese; new factor in subsection 9(5) concerning being pregnant at the time of clinical onset of hiatus hernia; new factors in subsections 9(6) and 9(14) concerning having chronic elevation of pressure within the abdominal cavity due to ascites or peritoneal dialysis; revising the factors in subsections 9(7) and 9(15) concerning 'systemic sclerosis'; revising the factors in subsections 9(8) and 9(16) concerning kyphosis or kyphoscoliosis; new definitions of; 'acute abdomen', 'being overweight or obese' 'BMI', 'MRCA' and 'VEA' in Schedule 1 – Dictionary; revising the definition of 'relevant service' in Schedule 1 – Dictionary; and deleting the definitions of 'being obese' and 'episode of abruptly increased intra-abdominal pressure'. For BoP SoP (Instrument No. 61/2022) 		
(2) P.	atitis modis	 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 'hiatus hernia' in subsection 7(2); revising the factors in subsections 9(1) and 9(5) concerning having a surgical procedure; deleting the factors concerning undergoing a partial or total gastrectomy as this is now covered by factors 9(1) and 9(5); revising the factors in subsections 9(2) and 9(6) concerning having a blunt or penetrating injury; revising the factors in subsections 9(3) and 9(7) concerning being obese; new factor in subsection 9(4) concerning being pregnant at the time of clinical onset of hiatus hernia; new definitions of 'BMI', 'MRCA' and 'VEA' in Schedule 1 – Dictionary; and revising the definitions of 'being obese' and 'relevant service' in Schedule 1 – Dictionary. The determining of these Instruments finalises the investigation in relation to hiatus hernia as advertised in the Government Notices Gazette of 2 November 2021. 		
62 & 63/2022	otitis media	These Instruments result from an investigation notified by the Authority in the Government Notices Gazette of 2 November 2021 concerning <i>otitis media</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. The contents of these Instruments are in similar terms as the repealed Instruments. Comparing these Instruments and the repealed Instruments, the differences include: For RH SoP (Instrument No. 62/2022) 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 'otitis media' in subsection 7(2); revising the reference to 'ICD-10-AM code' in subsection 7(4);		

- revising the factors in subsections 9(1) and 9(16) concerning having an upper respiratory tract infection;
- revising the factor in subsection 9(2) concerning having partial or complete obstruction of the Eustachian tube, for clinical onset, by the inclusion of a note;
- revising the factors in subsections 9(3) and 9(18) concerning having allergic rhinitis or sinusitis;
- revising the factor in subsection 9(4) concerning having a space-occupying mass within the nasopharynx, for clinical onset;
- revising the factor in subsection 9(5) concerning undergoing therapeutic radiation for cancer, for clinical onset;
- deleting the factor concerning having received ionising radiation as this is now covered by the factors in subsections 9(5) and 9(20) concerning undergoing a course of therapeutic radiation;
- revising the factor in subsection 9(6) concerning having an acute rupture of the tympanic membrane, for clinical onset;
- new factors in subsections 9(7) and 9(22) concerning having chronic perforation of the tympanic membrane;
- revising the factors in subsections 9(8) and 9(23) concerning having an episode of otitic barotrauma;
- revising the factor in subsection 9(9) concerning having tuberculosis or nontuberculous mycobacterial disease, for clinical onset;
- revising the factor in subsection 9(11) concerning swimming, diving or water skiing, for clinical onset;
- new factors in subsections 9(12) and 9(27)concerning having ascariasis or myiasis;
- new factors in subsections 9(13) and 9(28) concerning having ANCA-associated vasculitis;
- new factors in subsections 9(14) and 9(29) concerning having infection with human immunodeficiency virus;
- new factors in subsections 9(15) and 9(30) concerning taking an immunosuppressive drug for organ or tissue transplantation;
- new factor in subsection 9(17) concerning having partial or complete obstruction of the Eustachian tube, for clinical worsening;
- new factor in subsection 9(19) concerning having a space-occupying mass within the nasopharynx, for clinical worsening;
- new factor in subsection 9(20) concerning undergoing a course of therapeutic radiation for cancer, for clinical worsening;
- new factor in subsection 9(21) concerning having an acute rupture of the tympanic membrane, for clinical worsening;
- new factor in subsection 9(24) concerning having tuberculosis or nontuberculous mycobacterial disease, for clinical worsening;
- new factor in subsection 9(26) concerning swimming, diving or water-skiing, for clinical worsening;
- new definitions of 'MRCA', 'organ or tissue transplantation' and 'VEA' in the Schedule 1 Dictionary;
- revising the definition of 'relevant service' in Schedule 1 Dictionary; and
- deleting the definition of 'cumulative equivalent dose' in Schedule 1 Dictionary.

For BoP SoP (Instrument No. 63/2022)

- 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 'otitis media' in subsection 7(2);
- revising the reference to ICD-10-AM code in subsection 7(4);
- revising the factors in subsections 9(1) and 9(13) concerning having an upper respiratory tract infection;
- revising the factor in subsection 9(2) concerning having partial or complete obstruction of the Eustachian tube, for clinical onset, by the inclusion of a note;
- revising the factors in subsections 9(3) and 9(15) concerning having allergic rhinitis or sinusitis;
- revising the factor in subsection 9(4) concerning having a space-occupying mass within the nasopharynx, for clinical onset;
- revising the factor in subsection 9(5) concerning undergoing therapeutic radiation for cancer, for clinical onset;

SUMMARY OF CHANGES deleting the factor concerning having received ionising radiation as this is now covered by the factors in subsections 9(5) and 9(17) concerning undergoing a course of therapeutic radiation: revising the factor in subsection 9(6) concerning having an acute rupture of the tympanic membrane, for clinical onset; new factors in subsections 9(7) and 9(19) concerning having chronic perforation of the tympanic membrane; revising the factors in subsections 9(8) and 9(20) concerning having an episode of otitic barotrauma: revising the factor in subsection 9(9) concerning having tuberculosis or nontuberculous mycobacterial disease, for clinical onset; new factors in subsections 9(10) and 9(22) concerning having gastro-oesophageal reflux new factors in subsections 9(11) and 9(23) concerning having ascariasis or myiasis; new factors in subsections 9(12) and 9(24) concerning having ANCA-associated vasculitis: new factor in subsection 9(14) concerning having partial or complete obstruction of the Eustachian tube, for clinical worsening; new factor in subsection 9(16) concerning having a space-occupying mass within the nasopharynx, for clinical worsening; new factor in subsection 9(17) concerning undergoing a course of therapeutic radiation for cancer, for clinical worsening; new factor in subsection 9(18) concerning having an acute rupture of the tympanic membrane, for clinical worsening; new factor in subsection 9(21) concerning having tuberculosis or nontuberculous mycobacterial disease, for clinical worsening; new definitions of 'MRCA', 'organ or tissue transplantation' and 'VEA' in the Schedule 1 - Dictionary; revising the definition of 'relevant service' in Schedule 1 – Dictionary: and deleting the definition of 'cumulative equivalent dose' in Schedule 1 – Dictionary. The determining of these Instruments finalises the investigation in relation to otitis media as advertised in the Government Notices Gazette of 2 November 2021. 64 & These Instruments result from an investigation notified by the Authority in the Government somatic symptom 65/2022 disorder Notices Gazette of 4 May 2021 concerning somatic symptom disorder in accordance with section 196G of the VEA. The investigation involved an examination of the sound medicalscientific evidence now available to the Authority, including the sound medical-scientific evidence it has previously considered. The contents of these Instruments are in similar terms as the repealed Instruments. Comparing these Instruments and the repealed Instruments, the differences include: For RH SoP (Instrument No. 64/2022) 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 'somatic symptom disorder' in subsection 7(2); deleting ICD-10-AM code for 'somatic symptom disorder'; revising the factor in subsection 9(1) concerning experiencing severe childhood abuse; new factors in subsections 9(2) and 9(4) concerning experiencing a category 1A stressor; new factors in subsections 9(3) and 9(5) concerning experiencing a category 1B stressor; new definitions of 'category 1A stressor', 'category 1B stressor', 'corpse', 'eyewitness', 'DSM-5-TR', 'MRCA' and 'VEA' in Schedule 1 - Dictionary; revising the definition of 'relevant service' in Schedule 1 - Dictionary; and deleting the definitions of 'DSM-5' and 'ICD-10-AM code'. For BoP SoP (Instrument No. 65/2022) 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 'somatic symptom disorder' in subsection 7(2); deleting 'ICD-10-AM code' for 'somatic symptom disorder'; revising the factor in subsection 9(1) concerning experiencing severe childhood abuse; new definitions of 'DSM-5-TR', 'MRCA' and 'VEA' in Schedule 1 - Dictionary; revising the definition of 'relevant service' in Schedule 1 - Dictionary; and deleting the definitions of 'DSM-5' and 'ICD-10-AM code'. The determining of these Instruments finalises the investigation in relation to periodontitis advertised in the Government Notices Gazette of 4 May 2021.

66 & 67/2022

sick sinus syndrome

These Instruments result from an investigation notified by the Authority in the Government Notices Gazette of 9 March 2021concerning sick sinus syndrome 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.

The contents of these Instruments are in similar terms as the repealed Instruments. Comparing these Instruments and the repealed Instruments, the differences include:

For RH SoP (Instrument No. 66/2022)

- 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 'sick sinus syndrome' in subsection 7(2);
- including ICD-10-AM codes for 'sick sinus syndrome' in subsection 7(3);
- revising the reference to 'ICD-10-AM code' in subsection 7(4);
- revising the factors in subsections 9(4) and 9(29) concerning having heart failure;
- revising the factors in subsections 9(6) and 9(31) concerning having pericarditis;
- new factors in subsections 9(8) and 9(33) concerning having non-infectious myocarditis;
- new factors in subsections 9(9) and 9(34) concerning having viral myocarditis;
- new factors in subsections 9(10) and 9(35) concerning having a non-viral infection of the myocardium;
- deleting the factors concerning having myocarditis as those factors are now covered by subsections 9(8),9(33), 9(9), 9(34), 9(10) and 9(35);
- new factors in subsections 9(11) and 9(36) concerning having infiltration of the myocardium;
- revising the factors in subsections 9(12) and 9(37) concerning having a benign or malignant neoplasm;
- revising the factors in subsections 9(13) and 9(38) concerning having a non-neoplastic lesion:
- revising the factors in subsections 9(14) and 9(39) concerning having a thyroid condition;
- new factors in subsections 9(15) and 9(40) concerning having an autoimmune disease;
- deleting the factors concerning having a specified autoimmune, infiltrative or inflammatory disease as those factors are now covered by subsections 9(11), 9(36), 9(15) and 9(40);
- revising the factors in subsections 9(16) and 9(41) concerning having obstructive sleep apnoea;
- new factors in subsections 9(17) and 9(42) concerning having a mineral or electrolyte abnormality;
- revising the factors in subsections 9(18) and 9(43) concerning having a thoracic surgical procedure or an invasive cardiac procedure;
- new factors in subsections 9(19) and 9(44) concerning having a heart transplant;
- revising the factors in subsections 9(20) and 9(45) concerning having a surgical procedure involving general or regional anaesthesia;
- new factors in subsections 9(21) and 9(46) concerning having cardiac stereotactic ablative radiotherapy or cryotherapy;
- revising the factors in subsections 9(22) and 9(47) concerning experiencing penetrating trauma to the heart;
- new factors in subsections 9(23) and 9(48) concerning taking a drug from the specified list of drugs;
- deleting the factor concerning being treated with a drug or drug from a class of drugs as those factors are now covered by subsections 9(23) and 9(48);
- revising the factor in subsection 9(24) concerning undertaking strenuous physical activity:
- new factors in subsections 9(25) and 9(49) concerning being envenomated by a snake;
- deleting the factors concerning experiencing a powerful non-penetrating blow to the chest;
- deleting the factors concerning having electrical injury;
- new definitions of 'MRCA', 'obstructive sleep apnoea', 'specified list of autoimmune diseases', 'specified list of drugs', 'specified list of infiltrative diseases', 'specified list of mineral or electrolyte abnormalities', 'specified list of thyroid conditions', 'VEA' in Schedule 1 - Dictionary;
- revising the definition of '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 'a specified autoimmune, infiltrative or inflammatory disease'.

SUMMARY OF CHANGES				
	For BoP SoP (Instrument No. 67/2022)			
	• 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 'sick sinus syndrome' in subsection 7(2);			
	• including ICD-10-AM codes for 'sick sinus syndrome' in subsection 7(3);			
	• revising the reference to 'ICD-10-AM code' in subsection 7(4);			
	• revising the factors in subsections 9(4) and 9(22) concerning having heart failure;			
	• revising the factors in subsections 9(6) and 9(24) concerning having pericarditis;			
	• new factors in subsections 9(8) and 9(26) concerning having non-infectious myocarditis;			
	• new factors in subsections 9(9) and 9(27) concerning having viral myocarditis;			
	• new factors in subsections 9(10) and 9(28) concerning having a non-viral infection of the			
	 myocardium; deleting the factors concerning having myocarditis as those factors are now covered by 			
	subsections 9(8),9(26), 9(9), 9(27), 9(10) and 9(28);			
	• revising the factors in subsections 9(11) and 9(29) concerning having a benign or malignant neoplasm;			
	• revising the factors in subsections 9(12) and 9(30) concerning having a non-neoplastic lesion;			
	• revising the factors in subsections 9(13) and 9(31) concerning having hypothyroidism;			
	• revising the factors in subsections 9(14) and 9(32) concerning having a thoracic surgical			
	procedure or an invasive cardiac procedure;			
	• new factors in subsections 9(15) and 9(33) concerning having a heart transplant;			
	• revising the factors in subsections 9(16) and 9(34) concerning having a surgical procedure involving general or regional anaesthesia;			
	• revising the factors in subsections 9(17) and 9(35) concerning experiencing penetrating			
	trauma to the heart;			
	• new factors in subsections 9(18) and 9(36) concerning taking a drug from the specified list of drugs;			
	• deleting the factor concerning being treated with a drug or drug from a class of drugs as			
	 those factors are now covered by subsections 9(18) and 9(36); deleting the factor concerning undertaking strenuous, high level, endurance physical 			
	• deleting the factor concerning undertaking strenuous, high level, endurance physical activity before clinical onset of sick sinus syndrome;			
	• new definitions of 'MRCA', 'specified list of drugs' and 'VEA' in Schedule 1 - Dictionary;			
	• revising the definition of 'relevant service' in Schedule 1 – Dictionary; and			
	• deleting the definition of 'a drug or a drug from a class of drugs from the specified list'.			
	The determining of these Instruments finalises the investigation in relation to sick sinus			
	syndrome advertised in the Government Notices Gazette of 9 March 2021.			
68 & sleep apnoea	These Instruments result from an investigation notified by the Authority in the Government			
69/2022	Notices Gazette of 5 January 2021 concerning <i>sleep apnoea</i> in accordance with section 196G			
	of the VEA. The investigation involved an examination of the sound medical-scientific			
	evidence available to the Authority.			
	The contents of these Instruments are in similar terms as the repealed Instruments. Comparing			
	these Instruments and the repealed Instruments, the differences include:			
	For RH SoP (Instrument No. 68/2022)			
	• 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 'sleep apnoea' in subsection 7(2);			
	• including ICD-10-AM codes for 'sleep apnoea' in subsection 7(3);			
	• revising the reference to 'ICD-10-AM code' in subsection 7(4);			
	• revising the factors in subsections 9(1) and 9(10) concerning having heart failure;			
	• revising the factors in subsections 9(2) and 9(11) concerning having a central nervous			
	 system lesion or disorder; revising the factors in subsections 9(3) and (12) concerning having autonomic 			
	• revising the factors in subsections 9(3) and (12) concerning having autonomic neuropathy, by the inclusion of a note;			
	• revising the factors in subsections 9(4) and 9(13) concerning having chronic renal failure;			
	• revising the factors in subsections 9(4) and 9(14) concerning having a neuromuscular			
	disease affecting the diaphragm, by the inclusion of a note;			
	• revising the factors in subsections 9(6) and 9(15) concerning having acromegaly;			
	• revising the factors in subsections 9(7) and 9(17) concerning taking an antipsychotic			
	drug;			
	• revising the factor in subsection 9(16) concerning consuming alcohol;			

SUMMARY OF CHANGES revising the factors in paragraphs 9(8)(a) and 9(18)(a) concerning having hypothyroidism, for obstructive sleep apnoea only: revising the factors in paragraphs 9(8)(b) and 9(18)(b) concerning having chronic obstruction or chronic narrowing, for obstructive sleep apnoea only, by the inclusion of a revising the factors in paragraphs 9(8)(c) and 9(18)(c) concerning being obese, for obstructive sleep apnoea only, by the inclusion of a note; new factors in paragraphs 9(8)(d) and 9(18)(d) concerning being in a supine position when sleeping, for obstructive sleep apnoea only; revising the factors in paragraphs 9(8)(e) and 9(18)(e) concerning taking protease inhibitors, for obstructive sleep apnoea only; revising the factors in subsections 9(9) and 9(19) concerning taking a long acting opioid, for central sleep apnoea only; new definitions of 'BMI' 'chronic renal failure', 'MRCA', 'specified list of central nervous system lesions or disorders' and 'VEA' in Schedule 1 - Dictionary; revising the definitions of 'acromegaly', 'autonomic neuropathy' 'being obese', 'long-acting opioid'', 'obstructive sleep apnoea', 'upper airway' and 'relevant service' in Schedule 1 - Dictionary; and deleting the definitions of 'a central nervous system lesion or disorder', 'alcohol', 'a neuromuscular disease' and 'congestive cardiac failure'. For BoP SoP (Instrument No. 69/2022) 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 'sleep apnoea' in subsection 7(2); including ICD-10-AM codes for 'sleep appropa' in subsection 7(3): revising the reference to 'ICD-10-AM code' in subsection 7(4); revising the factors in subsections 9(1) and 9(9) concerning having heart failure; revising the factors in subsections 9(2) and 9(10) concerning having a central nervous system lesion or disorder; revising the factors in subsections 9(3) and (11) concerning having autonomic neuropathy, by the inclusion of a note; revising the factors in subsections 9(4) and 9(12) concerning having chronic renal failure: revising the factors in subsections 9(5) and 9(13) concerning having a neuromuscular disease affecting the diaphragm, by the inclusion of a note; revising the factors in subsections 9(6) and 9(14) concerning having acromegaly: revising the factor in subsection 9(15) concerning consuming alcohol; revising the factors in paragraphs 9(7)(a) and 9(16)(a) concerning having hypothyroidism, for obstructive sleep apnoea only; revising the factors in paragraphs 9(7)(b) and 9(16)(b) concerning having chronic obstruction or chronic narrowing, for obstructive sleep apnoea only, by the inclusion of a revising the factors in paragraphs 9(7)(c) and 9(16)(c) concerning being obese, for obstructive sleep apnoea only, by the inclusion of a note; new factors in paragraphs 9(7)(d) and 9(16)(d) concerning being in a supine position when sleeping, for obstructive sleep apnoea only; deleting the factors concerning being treated with antiretroviral therapy, for obstructive sleep apnoea only; revising the factors in subsection 9(8) and 9(17) concerning taking a long acting opioid, for central sleep apnoea only; new definitions of 'BMI', 'chronic renal failure', 'MRCA', 'specified list of central nervous system lesions or disorders' and 'VEA' in Schedule 1 – Dictionary; revising the definitions of 'acromegaly', 'autonomic neuropathy' 'being obese' 'long-acting opioid', 'obstructive sleep apnoea', 'upper airway' and 'relevant service' in Schedule 1 - Dictionary; and deleting the definitions of 'a central nervous system lesion or disorder', 'alcohol', 'a neuromuscular disease' and 'congestive cardiac failure'. The determining of these new Instruments finalises the investigation in relation to sleep apnoea as advertised in the Government Notices Gazette of 5 January 2021. 70 & These Instruments result from an investigation notified by the Authority in the Government dermatomyositis 71/2022 Notices Gazette of 9 March 2021 concerning dermatomyositis in accordance with section 196G of the VEA. The investigation involved an examination of the sound medical-scientific evidence available to the Authority.

SUMMARY OF CHANGES The contents of these Instruments are in similar terms as the repealed Instruments. Comparing these Instruments and the repealed Instruments, the differences include: For RH SoP (Instrument No. 70/2022) 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 'dermatomyositis' in subsection 7(2); new factors in subsections 9(1) and 9(6) concerning taking a drug from the specified list of drugs: deleting the factors concerning being treated with a drug of the statin class as these factors are now covered by subsections 9(1) and 9(6); deleting the factors concerning being treated with D-penicillamine as these factors are now covered by subsections 9(1) and 9(6); new factors in subsections 9(2) and 9(7) concerning taking hydroxyurea; deleting the factors concerning being treated with hydroxyurea, for amyopathic dermatomyositis only, as those factors are now covered by subsections 9(2) and 9(7): new factors in subsections 9(3) and 9(8) concerning taking an immune checkpoint inhibitor or interferon alfa: revising the factors in subsections 9(4) and 9(9) concerning taking a drug; deleting the factors concerning having a specified viral infection; new definitions of 'MRCA', 'specified list of drugs', and 'VEA' in Schedule 1 - Dictionary; revising the definition of 'relevant service' in Schedule 1 – Dictionary; and deleting the definitions of 'a specified viral infection' and 'amyopathic dermatomyositis'. For RH SoP (Instrument No. 71/2022) 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 'dermatomyositis' in subsection 7(2); new factors in subsections 9(1) and 9(6) concerning taking a drug from the specified list of drugs; deleting the factors concerning being treated with a drug of the statin class as these factors are now covered by subsections 9(1) and 9(6); deleting the factors concerning being treated with D-penicillamine as these factors are now covered by subsections 9(1) and 9(6); new factors in subsections 9(2) and 9(7) concerning taking hydroxyurea; deleting the factors concerning, being treated with hydroxyurea, for amyopathic dermatomyositis only, as those factors are now covered by subsections 9(2) and 9(7); new factors in subsections 9(3) and 9(8) concerning taking an immune checkpoint inhibitor or interferon alfa; revising the factors in subsections 9(4) and 9(9) concerning taking a drug; new definitions of 'MRCA', 'specified list of drugs', and 'VEA' in Schedule 1 - Dictionary; revising the definition of 'relevant service' in the Schedule 1 – Dictionary; and deleting the definitions of 'amyopathic dermatomyositis'. The determining of these new Instruments finalises the investigation in relation to dermatomyositis as advertised in the Government Notices Gazette of 9 March 2021. 72 & erectile dysfunction These Instruments result from an investigation notified by the Authority in the Government 73/2022 Notices Gazette of 5 January 2021 concerning erectile dysfunction in accordance with section 196G of the VEA. The investigation involved an examination of the sound medical-scientific evidence available to the Authority. The contents of these Instruments are in similar terms as the repealed Instruments. Comparing these Instruments and the repealed Instruments, the differences include: For RH SoP (Instrument No. 72/2022) 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 'erectile dysfunction' in subsection 7(2); including ICD-10-AM codes for 'erectile dysfunction' in subsection 7(3); revising the factors in subsections 9(1) and 9(26) concerning having a clinically significant disorder of mental health; new factors in subsections 9(2) and 9(27) concerning having cardiovascular disease; revising the factors in subsections 9(3) and 9(28) concerning having a medical condition; new factors in subsections 9(4) and 9(29) concerning having an autoimmune disease; revising the factors in subsections 9(5) and 9(30) concerning having an endocrine disorder:

- revising the factors in subsections 9(6) and 9(31) concerning having a neurological disorder:
- revising the factors in subsections 9(7) and 9(32) concerning having a urological condition:
- new factors in subsection 9(8) and 9(33) concerning having an infection;
- new factors in subsections 9(9) and 9(34) concerning having herpes zoster:
- revising the factors in subsections 9(10) and 9(35) concerning having hypertension;
- revising the factors in subsections 9(11) and 9(36) concerning having chronic renal failure:
- deleting the factors concerning having a renal transplantation;
- revising the factors in subsections 9(12) and 9(37) concerning having Peyronie disease;
- new factors in subsections 9(13) and 9(38) concerning having hidradenitis suppurativa;
- revising the factors in subsections 9(14) and 9(39) concerning having ischaemic priapism, by the inclusion of a note;
- revising the factors in subsections 9(15) and 9(40) concerning having a surgical operation;
- revising the factors in subsections 9(16) and 9(41) concerning having a trauma or surgery;
- revising the factors in subsections 9(17) and 9(42) concerning having blunt trauma;
- new factors in subsection 9(18) and 9(43) concerning having internal burns, substantial external burns, or electrical injury;
- revising the factors in subsections 9(19) and 9(44) concerning having smoked tobacco products;
- revising the factors in subsections 9(20) and 9(45) concerning undergoing a course of therapeutic radiation for cancer;
- deleting the factors concerning having received a cumulative equivalent dose of ionising radiation as these are now covered by the factors in subsections 9(20) and 9(45);
- revising the factors in subsections 9(21) and 9(46) concerning being obese, by the inclusion of a note;
- revising the factors in subsections 9(22) and 9(47) concerning taking a drug specified in the Schedule 2 Drugs;
- new factors in subsections 9(23) and 9(48) concerning inhaling, ingesting or having cutaneous contact with carbon disulphide;
- revising the factors in subsections 9(24) and 9(49) concerning inability to undertake any physical activity greater than 3 METs, by the inclusion of a note;
- new factor in subsections 9(25) concerning experiencing childhood sexual abuse before clinical onset;
- new definitions of 'active migraine', 'blunt trauma', 'BMI', 'chronic renal failure',
 'clinically significant disorder of mental health as specified', 'DSM-5-TR', 'MRCA',
 'obstructive sleep apnoea', 'one pack-year', 'severe alcohol use disorder', 'specified list of
 autoimmune diseases', 'specified list of cardiovascular diseases', 'specified list of
 endocrine disorders', 'specified list of infections', 'specified list of medical conditions'
 'specified list of neurological disorders', 'specified list of surgical operations', 'specified
 list of urological conditions', 'substantial external burns' and 'VEA' in
 Schedule 1 Dictionary;
- revising the definitions of 'acromegaly' 'being obese', 'Peyronie disease', and 'relevant service' in Schedule 1 –Dictionary;
- deleting the definitions of 'a clinically significant psychiatric disorder from the specified list', 'a condition from the specified list which causes lower urinary tract symptoms', 'a drug or a drug from a class of drugs from the specified list', 'a specified endocrinological disorder', 'a specified medical condition', a specified neurological disorder', 'blunt or penetrating trauma', 'cumulative equivalent dose', 'malignant neoplasm of the reproductive organs' and 'pack years of cigarettes, or the equivalent thereof in other tobacco products'; and
- new table of specified drugs in Schedule 2 Drugs.

For BoP SoP (Instrument No. 73/2022)

- 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 'erectile dysfunction' in subsection 7(2);
- including ICD-10-AM codes for 'erectile dysfunction' in subsection 7(3);
- revising the factors in subsections 9(1) and 9(23) concerning having a clinically significant disorder of mental health;

SUMMARY OF CHANGES new factors in subsections 9(2) and 9(24) concerning having cardiovascular disease; • revising the factors in subsections 9(3) and 9(25) concerning having a medical condition; • new factors in subsections 9(4) and 9(26) concerning having systemic sclerosis; revising the factors in subsections 9(5) and 9(27) concerning having an endocrine disorder; revising the factors in subsections 9(6) and 9(28) concerning having a neurological disorder: revising the factors in subsections 9(7) and 9(29) concerning having a urological condition; new factors in subsection 9(8) and 9(30) concerning having an infection; new factors in subsections 9(9) and 9(31) concerning having herpes zoster; revising the factors in subsections 9(10) and 9(32) concerning having hypertension; revising the factors in subsections 9(11) and 9(33) concerning having chronic renal failure: deleting the factors concerning having a renal transplantation; revising the factors in subsections 9(12) and 9(34) concerning having Peyronie disease; revising the factors in subsection 9(13) and 9(35) concerning having ischaemic priapism, by the inclusion of a note; revising the factors in subsections 9(14) and 9(36) concerning having a surgical operation; revising the factors in subsections 9(15) and 9(37) concerning having a trauma or surgery; revising the factors in subsections 9(16) and 9(38) concerning having blunt trauma; new factors in subsections 9(17) and 9(39) concerning having internal burns, substantial external burns, or electrical injury; revising the factors in subsections 9(18) and 9(40) concerning having smoked tobacco products: revising the factors in subsections 9(19) and 9(41) concerning undergoing a course of therapeutic radiation for cancer; deleting the factors concerning having received a cumulative equivalent dose of ionising radiation as these factors are now covered by the factors in subsections 9(19) and 9(41); revising the factors in subsections 9(20) and 9(42) concerning being obese, by the inclusion of a note; revising the factors in subsections 9(21) and 9(43) concerning taking a drug; revising the factors in subsections 9(22) and 9(44) concerning inability to undertake any physical activity greater than 3 METs; new definitions of 'blunt trauma', 'BMI', 'chronic renal failure', 'clinically significant disorder of mental health as specified', 'MRCA', 'obstructive sleep apnoea', 'one pack-year', 'specified list of cardiovascular diseases', 'specified list of drugs', 'specified list of endocrine disorders', 'specified list of infections', 'specified list of medical conditions', 'specified list of neurological disorders', 'specified list of surgical operations', 'specified list of urological conditions', 'substantial external burns' and 'VEA' in Schedule 1 - Dictionary; revising the definitions of 'acromegaly', 'being obese', 'Peyronie disease' and 'relevant service in Schedule 1 -Dictionary; and deleting the definitions of 'a clinically significant psychiatric disorder from the specified list', 'a condition from the specified list which causes lower urinary tract symptoms', 'a drug or a drug from a class of drugs from the specified list', 'a specified endocrinological disorder', 'a specified organic solvent', ' a specified medical condition', 'a specified neurological disorder', 'blunt or penetrating trauma', 'cumulative equivalent dose', 'malignant neoplasm of the reproductive organs' and 'pack years of cigarettes, or the equivalent thereof in other tobacco products'. The determining of these Instruments finalises the investigation in relation to erectile dysfunction as advertised in the Government Notices Gazette of 5 January 2021. 74 & Guillain-Barre Amendment 75/2022 syndrome These instruments amend Statements of Principles Nos. 23 and 24 of 2018 concerning Guillain-Barre syndrome by: For RH and BoP SoPs (Instrument Nos. 74 & 75/2022) replacing the existing factor in subsection 9(5) concerning 'receiving an influenza vaccine' with the following; 'receiving a vaccine from the specified list of vaccines within the two months before the clinical onset of Guillain-Barre syndrome'; and inserting a definition of 'specified list of vaccines' in the Schedule 1 – Dictionary. The determining of these Instruments finalises the investigation in relation to Guillain-Barre syndrome as advertised in the Government Notices Gazette of 15 March 2022.

SUMMAR	Y OF CHANGES	
76 &	osteoarthritis	Amendment
77/2022		These instruments amend Statements of Principles Nos. 61 and 62 of 2017 concerning <i>osteoarthritis</i> by:
		For RH SoP (Instrument No. 61/2017)
		 replacing the existing factors in subsection 9(13) and 9(35) concerning 'for osteoarthritis of a joint of the upper limb only'; and inserting a definition of 'joint of the upper limb' in the Schedule 1 – Dictionary.
		For BoP SoP (Instrument No. 62/2017)
		 replacing the existing factors in subsections 9(12) and 9(35) concerning 'for osteoarthritis of a joint of the upper limb only'; and inserting a definition of 'joint of the upper limb' in the Schedule 1 – Dictionary. The determining of these Instruments finalises the investigation in relation to osteoarthritis as advertised in the Government Notices Gazette of 5 April 2022.