

SUMMARY OF CHANGES:

INSTRUMENT NOS. 37 to 59 of 2022

Statements of Principles Nos. 37 to 59 of 2022 were signed by the Chairperson of the Repatriation Medical Authority (the Authority) on 29 April 2022. The day of commencement as specified in each of these Instruments is 30 May 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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11 May 2022

SUMMARY OF CHANGES

Instr. No.	Title	Date of Commencement	ICD-10-AM Code		
REPEALS					
37 &38/2022	seizure	30/05/2022	Nil		
39 & 40/2022	malignant neoplasm of the thyroid gland	30/05/2022	C73		
41 & 42/2022	malignant neoplasm of the larynx	30/05/2022	C32		
43 & 44/2022	morbid obesity	30/05/2022	Nil		
45 & 46/2022	sudden unexplained death	30/05/2022	R96		
DETERMINATIONS					
47 & 48/2022	thoracic outlet syndrome	30/05/2022	Nil		
4/ & 40/2022	thoracic outlet syndrollic	30/03/2022	INII		
AMENDMENTS					
49 & 50/2022	diabetes mellitus	30/05/2022	E10,E11,E12,E13, E14.		
71 0 70 /000	1	20/07/2020	2 7 11		
51 & 52/2022	hypogonadism	30/05/2022	Nil		
53 & 54/2022	hypopituitarism	30/05/2022	E23.0		
55 & 56/2022	sensorineural hearing loss	30/05/2022	Nil		
55.0.50/2022		20/05/2022	277		
57 & 58/2022	immune thrombocytopenia	30/05/2022	Nil		
50/2022	a ayyta İvyanılı ələlə əti ə	30/05/2022	Nil		
59/2022	acute lymphoblastic leukaemia/lymphoblastic lymphoma	30/03/2022	INII		

Note:

1. The investigation concerning 'epileptic seizure' has resulted in the determination of Statements of Principles concerning **seizure**.

SUMMARY OF CHANGES 37 & seizure These Instruments result from an investigation notified by the Authority in the Government 38/2022 Notices Gazette of 9 March 2021 concerning epileptic seizure 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 & BoP SoPs (Instrument Nos. 37 & 38/2022) adopting the latest revised Instrument format, which commenced in 2015; specifying a day of commencement for the Instrument in section 2; revising the name of the condition from 'epileptic seizure' to 'seizure'; new definition of 'seizure' in subsection 7(2); new factor in subsection 9(3) concerning having an electrical injury of the brain, for clinical onset only; revising the factor in subsection 9(4) concerning having a surgical procedure which involves a craniotomy or cranioplasty, for clinical onset only; new factor in subsection 9(5) concerning having cardiac surgery or extracorporeal membrane oxygenation, for clinical onset only; new factor in subsection 9(6) concerning having brain radiotherapy, for clinical onset only; revising the factor in subsection 9(7) concerning having an hypoxic cerebral insult, for clinical onset only, by the inclusion of a note; new factor in subsection 9(8) concerning having a central nervous system vascular lesion, for clinical onset only; new factor in subsection 9(9) concerning having autoimmune encephalitis, for clinical onset only; revising the factor in subsection 9(11) concerning having infection with human immunodeficiency virus, for clinical onset only; new factor in subsection 9(12) concerning having septicaemia, for clinical onset only; revising the factor in subsection 9(13) concerning having an intracranial space-occupying lesion, for clinical onset only, by the inclusion of a note; revising the factor in subsection 9(14) concerning having dementia as specified, for clinical onset only; revising the factor in subsection 9(15) concerning having a medical condition affecting the brain, for clinical onset only; revising the factor in subsection 9(16) concerning having alcohol intoxication, alcohol withdrawal or moderate to severe alcohol use disorder, for clinical onset only; revising the factor in subsection 9(17) concerning having malignant hypertension or hypertensive encephalopathy, for clinical onset only; new factor in subsection 9(18) concerning having eclampsia, now included as a separate factor, for clinical onset only; revising the factor in subsection 9(20) concerning having acute renal failure or chronic renal failure, for clinical onset only; new factor in subsection 9(21) concerning having an amniotic fluid embolism or fat embolism, for clinical onset only; revising the factor in subsection 9(22) concerning having hypoglycaemia, for clinical onset only, by the inclusion of a note; revising the factor in subsection 9(23) concerning having hyperglycaemia, for clinical onset new factor in subsection 9(24) concerning having diabetes mellitus, for clinical onset only; revising the factor in subsection 9(25) concerning having an electrolyte abnormality, for clinical onset only; revising the factor in subsection 9(26) concerning having carbon monoxide poisoning, for clinical onset only; new factor in subsection 9(27) concerning having sleep deprivation, for clinical onset only; new factor in subsection 9(28) concerning having exertional heat stroke, for clinical onset only; new factor in subsection 9(29) concerning being dehydrated, for clinical onset only; revising the factor in subsection 9(30) concerning undergoing organ or tissue transplantation, excluding corneal transplant, for clinical onset only; revising the factor in subsection 9(31) concerning taking a drug, for clinical onset only;

SUMMARY OF CHANGES new factor in subsection 9(33) concerning being exposed to radiographic contrast media, for clinical onset only: revising the factor in subsection 9(34) concerning reducing the intake of, or withdrawing from, a chronically administered sedative drug, for clinical onset only, by the inclusion of revising the factor in subsection 9(35) concerning being exposed to partial pressures of oxygen above 1.2 atmospheres absolute (120 kPa), for clinical onset only; revising the factor in subsection 9(36) concerning being exposed to an abrupt reduction in the pressure of the air surrounding the person, for clinical onset only; revising the factor in subsection 9(37) concerning being poisoned with a metal, for clinical onset only; revising the factor in subsection 9(38) concerning inhaling, ingesting or having cutaneous contact with a neurotoxic substance or a food or compound containing a neurotoxic substance, for clinical onset only; deleting the factor concerning having a cerebrovascular accident or subarachnoid haemorrhage, for clinical onset only, as this is now covered by the factor in subsection 9(8) concerning having a central nervous system vascular lesion, for clinical onset only; deleting the factors concerning having central nervous system systemic lupus erythematosus and having an autoimmune disorder affecting the brain, for clinical onset only, as these are now covered by the factor in subsection 9(9) concerning having autoimmune encephalitis, for clinical onset only; deleting the factor concerning undergoing renal dialysis, for clinical onset only, as this is now covered by the factor in subsection 9(20) concerning having acute renal failure or chronic renal failure, for clinical onset only; deleting the factor concerning experiencing a specified physical stimulus, for clinical onset only, as this is now covered by the factors in: subsection 9(27) concerning having sleep deprivation, for clinical onset only; and subsection 9(28) concerning having exertional heat stroke, for clinical onset only; and subsection 9(29) concerning being dehydrated, for clinical onset only; new definitions of 'autoimmune encephalitis', 'chronic renal failure', 'dementia as specified', 'electrolyte abnormality', 'hyperglycaemia', 'hypoglycaemia', 'inhalants', 'iron overload', 'MRCA', 'organ or tissue transplantation', 'organic solvents', 'specified list of central nervous system vascular lesions', 'specified list of medical conditions', 'specified list of metals' and 'VEA' in Schedule 1 - Dictionary; revising the definitions of 'intracranial space-occupying lesion', 'neurotoxic substance or a food or compound containing a neurotoxic substance', 'relevant service' and 'signs and symptoms of poisoning' in Schedule 1 - Dictionary; new table of specified drugs in Schedule 2 - Drugs; and deleting the definitions of 'a drug from Specified List 1', 'a drug or a drug from a class of drugs from the specified list', 'a medical condition from the specified list', 'a specified metal', 'a specified physical stimulus', 'an autoimmune disorder affecting the brain', 'an electrolyte imbalance', 'an inhalant', 'dementia', 'RDX' and 'status epilepticus'. The determining of these Instruments finalises the investigation in relation to epileptic seizure as advertised in the Government Notices Gazette of 9 March 2021. 39 & These Instruments result from an investigation notified by the Authority in the Government malignant neoplasm 40/2022 of the thyroid gland Notices Gazette of 2 November 2021 concerning malignant neoplasm of the thyroid gland 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 medicalscientific 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. 39/2022) 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 'malignant neoplasm of the thyroid gland' 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 received a cumulative equivalent dose of at least 0.1 sievert of ionising radiation to the thyroid gland, for clinical onset only; new factor in subsection 9(2) concerning having received a cumulative equivalent dose of at least 0.05 sievert of ionising radiation to the thyroid gland by the age of 20 years, for clinical onset only;

SUMMARY OF CHANGES new factor in subsection 9(3) concerning having iodine-131 (radioactive iodine) therapy, for clinical onset only: revising the factor in subsection 9(4) concerning being overweight or obese, for clinical onset only: revising the factor in subsection 9(5) concerning having a thyroid condition from the specified list of thyroid conditions, for clinical onset only; new factor in subsection 9(6) concerning having acromegaly, for clinical onset only; new factor in subsection 9(7) concerning having diabetes mellitus, for clinical onset only; new factor in subsection 9(8) concerning having an autoimmune disease from the specified list of autoimmune diseases, for clinical onset only; revising the factor in subsection 9(9) concerning undergoing organ or tissue transplantation, excluding corneal transplant, for clinical onset only; new factor in subsection 9(10) concerning inability to breast feed, for clinical onset only, for parous women only; new factor in subsection 9(11) concerning taking clomiphene, for clinical onset only; new definitions of 'acromegaly', 'BMI', 'MRCA', 'organ or tissue transplantation', 'specified list of autoimmune diseases', 'specified list of thyroid conditions' and 'VEA' in Schedule 1 - Dictionary: revising the definitions of 'being overweight or obese' and 'relevant service' in Schedule 1 - Dictionary; and deleting the definition of 'a specified disorder of the thyroid gland'. For BoP SoP (Instrument No. 40/2022) 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 'malignant neoplasm of the thyroid gland' 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 received a cumulative equivalent dose of at least 0.5 sievert of ionising radiation to the thyroid gland, for clinical onset only, by the inclusion of a note; revising the factor in subsection 9(2) concerning having received a cumulative equivalent dose of at least 0.1 sievert of ionising radiation to the thyroid gland by the age of 20 years, for clinical onset only; new factor in subsection 9(3) concerning having iodine-131 (radioactive iodine) therapy, for clinical onset only; revising the factor in subsection 9(4) concerning being obese, for clinical onset only; revising the factor in subsection 9(5) concerning having a thyroid condition from the specified list of thyroid conditions, for clinical onset only; new factor in subsection 9(6) concerning having acromegaly, for clinical onset only; revising the factor in subsection 9(7) concerning undergoing organ or tissue transplantation, excluding corneal transplant, for clinical onset only; new definitions of 'acromegaly', 'BMI', 'MRCA', 'organ or tissue transplantation', 'specified list of thyroid conditions' and 'VEA' in Schedule 1 - Dictionary; revising the definitions of 'being obese' and 'relevant service' in Schedule 1 - Dictionary; deleting the definition of 'a specified disorder of the thyroid gland'. The determining of these Instruments finalises the investigation in relation to malignant neoplasm of the thyroid gland as advertised in the Government Notices Gazette of 2 November 2021. 41 & These Instruments result from an investigation notified by the Authority in the Government malignant neoplasm 42/2022 of the larynx Notices Gazette of 5 January 2021 concerning malignant neoplasm of the larynx 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 medicalscientific 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. 41/2022) 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 'malignant neoplasm of the larynx' in subsection 7(2);

revising the reference to 'ICD-10-AM code' in subsection 7(4);

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- revising the factor in subsection 9(1) concerning having smoked tobacco products, for clinical onset only;
- revising the factor in subsection 9(2) concerning having been exposed to second-hand smoke, for clinical onset only;
- revising the factor in subsection 9(4) concerning inhaling respirable asbestos fibres in an enclosed space, for clinical onset only;
- revising the factor in subsection 9(5) concerning inhaling respirable asbestos fibres in an open environment, for clinical onset only;
- revising the factor in subsection 9(6) concerning inhaling smoke from the combustion of biomass or fossil fuel in an enclosed space, for clinical onset only;
- revising the factor in subsection 9(7) concerning consuming alcohol, for clinical onset only;
- revising the factor in subsection 9(8) concerning inhaling, ingesting or having cutaneous contact with a chemical agent contaminated by 2,3,7,8-tetrachlorodibenzo-para-dioxin (TCDD), for clinical onset only;
- revising factor in subsection 9(9) concerning being on land in Vietnam, at sea in Vietnamese waters or on board a vessel and consuming potable water supplied on that vessel, when the water supply had been produced by evaporative distillation of estuarine Vietnamese waters, for clinical onset only, by the inclusion of a note;
- new factor in subsection 9(10) concerning inhaling mist from sulphuric, nitric or hydrochloric acid, for clinical onset only;
- revising the factor in subsection 9(11) concerning undergoing solid organ transplantation, excluding corneal transplant, for clinical onset only;
- revising the factor in subsection 9(12) concerning having infection with human immunodeficiency virus, for clinical onset only;
- revising the factor in subsection 9(14) concerning consuming maté, for clinical onset only;
- revising the factor in subsection 9(15) concerning inability to consume fruits and vegetables, for clinical onset only;
- new factor in subsection 9(16) concerning having gastro-oesophageal reflux disease, for clinical onset only;
- new factor in subsection 9(17) concerning inhaling or ingesting opium, for clinical onset only;
- new factor in subsection 9(18) concerning inhaling high concentrations of polycyclic aromatic hydrocarbons, for clinical onset only;
- new factor in subsection 9(19) concerning using manual welding equipment for welding metal, for clinical onset only;
- deleting the factor concerning inhaling mist from a strong inorganic acid, as this is now covered by the factor in subsection 9(10) concerning inhaling mist from sulphuric, nitric or hydrochloric acid, for clinical onset only;
- new definitions of 'having been exposed to second-hand smoke', 'mist', 'MRCA', 'one pack-year', 'opium', 'polycyclic aromatic hydrocarbons', 'printing', 'specified industry, manufacturing process or agent' and 'VEA' in Schedule 1 Dictionary;
- revising the definitions of 'inhaling, ingesting or having cutaneous contact with a chemical agent contaminated by 2,3,7,8-tetrachlorodibenzo-para-dioxin (TCDD)' and 'relevant service' in Schedule 1 Dictionary; and
- deleting the definitions of 'alcohol', 'mist from a strong inorganic acid' and 'pack-years of cigarettes, or the equivalent thereof in other tobacco products'.

For BoP SoP (Instrument No. 42/2022)

- 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 'malignant neoplasm of the larynx' 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 smoked tobacco products, for clinical onset only;
- revising the factor in subsection 9(2) concerning having been exposed to second-hand smoke, for clinical onset only;
- revising the factor in subsection 9(3) concerning inhaling respirable asbestos fibres in an enclosed space, for clinical onset only;
- revising the factor in subsection 9(4) concerning inhaling respirable asbestos fibres in an open environment, for clinical onset only;
- new factor in subsection 9(5) concerning inhaling smoke from the combustion of coal or other fossil fuel in an enclosed space, for clinical onset only;
- revising the factor in subsection 9(6) concerning consuming alcohol, for clinical onset only;

SUMMARY OF CHANGES new factor in subsection 9(7) concerning inhaling mist from sulphuric, nitric or hydrochloric acid, for clinical onset only: revising the factor in subsection 9(8) concerning undergoing solid organ transplantation. excluding corneal transplant, for clinical onset only; revising the factor in subsection 9(9) concerning having infection with human immunodeficiency virus, for clinical onset only; new factor in subsection 9(10) concerning acquiring persistent infection of the laryngeal epithelium with human papillomavirus type 16 or 18, for clinical onset only; new factor in subsection 9(11) concerning consuming maté, for clinical onset only; new factor in subsection 9(12) concerning having gastro-oesophageal reflux disease, for clinical onset only; new factor in subsection 9(13) concerning inhaling opium, for clinical onset only; deleting the factor concerning inhaling mist from a strong inorganic acid, as this is now covered by the factor in subsection 9(7) concerning inhaling mist from sulphuric, nitric or hydrochloric acid, for clinical onset only: deleting the factor concerning being exposed to mustard gas; new definitions of 'having been exposed to second-hand smoke', 'mist', 'MRCA', 'one packyear', 'opium' and 'VEA' in Schedule 1 - Dictionary; revising the definition of 'relevant service' in Schedule 1 - Dictionary; and deleting the definitions of 'alcohol', 'mist from a strong inorganic acid' and 'pack-years of cigarettes, or the equivalent thereof in other tobacco products'. The determining of these Instruments finalises the investigation in relation to malignant neoplasm of the larynx advertised in the Government Notices Gazette of 5 January 2021. 43 & 44/ morbid obesity These Instruments result from an investigation notified by the Authority in the Government 2022 Notices Gazette of 9 March 2021 concerning morbid obesity 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. 43/2022) 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 'morbid obesity' in subsection 7(2) by the inclusion of a note; new factors in subsections 9(2) and 9(16) concerning taking a drug from the specified list new factors in subsections 9(3) and 9(17) concerning taking an antipsychotic drug; new factors in subsections 9(4) and 9(18) concerning taking prednisone per day or equivalent glucocorticoid therapy; revising the factor in subsection 9(5) concerning having binge eating disorder, for clinical onset only: new factors in subsections 9(6) and 9(20) concerning having a clinically significant disorder of mental health as specified; revising the factor in subsection 9(7) concerning having Cushing syndrome, for clinical onset only; revising the factor in subsection 9(8) concerning having hypothyroidism, for clinical onset revising the factor in subsection 9(9) concerning having a hypothalamic disorder causing excessive eating, for clinical onset only, by the inclusion of a note; revising the factor in subsection 9(10) concerning inability to sleep for an average of more than 5 hours per night, for clinical onset only; revising the factors in subsections 9(11) and 9(25) concerning undertaking night shift work; revising the factor in subsection 9(12) concerning permanently ceasing to smoke, in a person with a prior history of a regular smoking habit as specified, for clinical onset only; new factors in subsections 9(13) and 9(27) concerning having consumed alcohol from drinking beer; new factor in subsection 9(14) concerning experiencing severe childhood abuse, for clinical new factor in subsection 9(15) concerning having a caloric intake that is excessive for energy needs, for clinical worsening only; new factor in subsection 9(19) concerning having binge eating disorder or night eating syndrome, for clinical worsening only;

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- new factor in subsection 9(21) concerning having Cushing syndrome, for clinical worsening only;
- new factor in subsection 9(22) concerning having hypothyroidism, for clinical worsening only;
- new factor in subsection 9(23) concerning having a hypothalamic disorder causing excessive eating, for clinical worsening only;
- new factor in subsection 9(24) concerning inability to sleep for an average of more than 5 hours per night, for clinical worsening only;
- new factor in subsection 9(26) concerning permanently ceasing to smoke, in a person with a prior history of a regular smoking habit as specified, for clinical worsening only;
- new definitions of 'clinically significant disorder of mental health as specified', 'DSM-5-TR', 'equivalent glucocorticoid therapy', 'MRCA', 'night eating syndrome', 'night shift work', 'one pack-year', 'regular smoking habit as specified', 'severe childhood abuse', 'specified list of drugs' and 'VEA' in Schedule 1 Dictionary;
- revising the definitions of 'binge eating disorder', 'BMI', 'hypothalamic disorder' and 'relevant service' in Schedule 1 Dictionary; and
- deleting the definitions of 'a clinically significant psychiatric condition as specified' and 'a drug or a drug from a class of drugs from the specified list'.

For BoP SoP (Instrument No. 44/2022)

- 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 'morbid obesity' in subsection 7(2) by the inclusion of a note;
- new factors in subsections 9(2) and 9(15) concerning taking a drug from the specified list of drugs;
- new factors in subsections 9(3) and 9(16) concerning taking an antipsychotic drug, excluding aripiprazole and ziprasidone;
- new factors in subsections 9(4) and 9(17) concerning taking prednisone per day or equivalent glucocorticoid therapy:
- revising the factor in subsection 9(5) concerning having binge eating disorder, for clinical onset only:
- new factors in subsections 9(6) and 9(19) concerning having a clinically significant disorder of mental health as specified;
- revising the factor in subsection 9(7) concerning having Cushing syndrome, for clinical onset only;
- revising the factor in subsection 9(8) concerning having hypothyroidism, for clinical onset only;
- revising the factor in subsection 9(9) concerning having a hypothalamic disorder causing excessive eating, for clinical onset only, by the inclusion of a note;
- revising the factor in subsection 9(10) concerning inability to sleep for an average of more than 5 hours per night, for clinical onset only;
- revising the factors in subsections 9(11) and 9(24) concerning undertaking night shift work;
- revising the factor in subsection 9(12) concerning permanently ceasing to smoke, in a person with a prior history of a regular smoking habit as specified, for clinical onset only;
- new factor in subsection 9(13) concerning experiencing severe childhood abuse, for clinical onset only;
- new factor in subsection 9(14) concerning having a caloric intake that is excessive for energy needs, for clinical worsening only;
- new factor in subsection 9(18) concerning having binge eating disorder or night eating syndrome, for clinical worsening only;
- new factor in subsection 9(20) concerning having Cushing syndrome, for clinical worsening only;
- new factor in subsection 9(21) concerning having hypothyroidism, for clinical worsening only;
- new factor in subsection 9(22) concerning having a hypothalamic disorder causing excessive eating, for clinical worsening only;
- new factor in subsection 9(23) concerning inability to sleep for an average of more than 5 hours per night, for clinical worsening only;
- new factor in subsection 9(25) concerning permanently ceasing to smoke, in a person with a prior history of a regular smoking habit as specified, for clinical worsening only;
- new definitions of 'clinically significant disorder of mental health as specified', 'DSM-5-TR', 'equivalent glucocorticoid therapy', 'MRCA', 'night eating syndrome', 'night shift

SUMMARY OF CHANGES work', 'one pack-year', 'regular smoking habit as specified', 'severe childhood abuse', 'specified list of drugs' and 'VEA' in Schedule 1 - Dictionary; revising the definitions of 'binge eating disorder', 'BMI', 'hypothalamic disorder' and 'relevant service' in Schedule 1 - Dictionary; and deleting the definitions of 'a clinically significant psychiatric condition as specified' and '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 morbid obesity advertised in the Government Notices Gazette of 9 March 2021. 45 & sudden unexplained These Instruments result from an investigation notified by the Authority in the Government 46/2022 death Notices Gazette of 5 January 2021 concerning sudden unexplained death in accordance with section 196G of the VEA. The investigation involved an examination of the sound medicalscientific 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. 45/2022) 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 'sudden unexplained death' in subsection 7(2): revising the reference to 'ICD-10-AM code' in subsection 7(4); new factor in subsection 9(1) concerning experiencing a major, stressful event that causes an intense emotional or psychological response; revising the factor in subsection 9(2) concerning undertaking a bout of intense physical activity; revising the factor in subsection 9(3) concerning receiving a blow to the chest, by the inclusion of a note; revising the factor in subsection 9(4) concerning having a BMI of 35 or greater, by the inclusion of a note: revising the factor in subsection 9(9) concerning taking a drug that prolongs the corrected OT interval; new factor in subsection 9(10) concerning taking a drug from the specified list of drugs; deleting the factor concerning experiencing a direct threat to the person's life that would evoke feelings of substantial distress, anger or fear in that person, as this is now covered by the factor in subsection 9(1) concerning experiencing a major, stressful event that causes an intense emotional or psychological response; deleting the factor concerning being treated with a non-potassium-sparing diuretic, as this is now covered by the factor in subsection 9(9) concerning taking a drug that prolongs the corrected QT interval; deleting the factors concerning using cocaine and concerning using methamphetamine or 3,4-methylenedioxymethamphetamine, as these are now covered by the factor in subsection 9(10) concerning taking a drug from the specified list of drugs; new definitions of 'MRCA', 'specified list of drugs' and 'VEA' in Schedule 1 - Dictionary; revising the definitions of 'blow to the chest', 'BMI' and 'relevant service' in Schedule 1 -Dictionary; and deleting the definitions of 'a direct threat to the person's life' and 'a non-potassium-sparing diuretic'. For BoP SoP (Instrument No. 46/2022) 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 'sudden unexplained death' in subsection 7(2); revising the reference to 'ICD-10-AM code' in subsection 7(4); new factor in subsection 9(1) concerning experiencing a major, stressful event that causes an intense emotional or psychological response; revising the factor in subsection 9(2) concerning undertaking a bout of intense physical activity; revising the factor in subsection 9(3) concerning receiving a blow to the chest, by the inclusion of a note; revising the factor in subsection 9(4) concerning having a BMI of 35 or greater, by the inclusion of a note; new factor in subsection 9(7) concerning having hypertension; revising the factor in subsection 9(9) concerning taking a drug that prolongs the corrected OT interval; revising the factor in subsection 9(10) concerning taking cocaine;

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		 deleting the factor concerning experiencing a direct threat to the person's life that would evoke feelings of substantial distress, anger or fear in that person, as this is now covered by the factor in subsection 9(1) concerning experiencing a major, stressful event that causes an intense emotional or psychological response; deleting the factor concerning being treated with a non-potassium-sparing diuretic, as this is now covered by the factor in subsection 9(9) concerning taking a drug that prolongs the corrected QT interval; new definitions of 'MRCA' and 'VEA' in Schedule 1 - Dictionary; revising the definitions of 'blow to the chest', 'BMI' and 'relevant service' in Schedule 1 - Dictionary; and deleting the definitions of 'a direct threat to the person's life' and 'a non-potassium-sparing diuretic'. The determining of these new Instruments finalises the investigation in relation to sudden unexplained death as advertised in the Government Notices Gazette of 5 January 2021.
47 & 48/2022	thoracic outlet syndrome	New Condition These Instruments result from an investigation notified by the Authority in the Government Notices Gazette of 6 July 2021 concerning thoracic outlet syndrome in accordance with section 196G of the VEA. The investigation involved an examination of the sound medical-scientific evidence available to the Authority. The determining of these new Instruments finalises the investigation in relation to thoracic outlet syndrome as advertised in the Government Notices Gazette of 6 July 2021.
49 & 50/2022	diabetes mellitus	 Amendment These instruments amend Statements of Principles Nos. 48 and 49 of 2020 concerning diabetes mellitus by: For RH SoP(Instrument No. 49/2020) replacing the existing factor in subsections 9(6)(g) and 9(13a) concerning 'taking an immune checkpoint inhibitor or an interferon'; and inserting a definition of 'immune checkpoint inhibitor' in the Schedule 1 – Dictionary. For BoP SoP (Instrument No. 50/2020) replacing the existing factor in subsections 9(6)(e) and 9(13a) concerning 'taking an immune checkpoint inhibitor or an interferon'; and inserting a definition of 'immune checkpoint inhibitor' in the Schedule 1 – Dictionary. The determining of these Instruments finalises the investigation in relation to diabetes mellitus as advertised in the Government Notices Gazette of 12 October 2021.
51 & 52/2022	hypogonadism	Amendment These instruments amend Statements of Principles Nos. 73 and 74 of 2021 concerning hypogonadism by: For RH & BoP SoPs (Instrument Nos. 73 & 74/2021) • replacing the existing definition of 'immune checkpoint inhibitor' in the Schedule 1 – Dictionary The determining of these Instruments finalises the investigation in relation to hypogonadism as advertised in the Government Notices Gazette of 12 October 2021
53 & 54/2022	hypopituitarism	 Amendment These instruments amend Statements of Principles Nos. 11 and 12 of 2019 concerning hypopituitarism by: For RH SoP (Instrument No. 11/2019) replacing the existing factor in subsections 9(16) and 9(34) concerning 'taking an immune checkpoint inhibitor or an interferon'; and replacing the existing definition of 'immune checkpoint inhibitor' in the Schedule 1 – Dictionary. For BoP SoP (Instrument No. 12/2019) replacing the existing factor in subsections 9(13) and 9(27) concerning 'taking an immune checkpoint inhibitor or an interferon'; and replacing the existing definition of 'immune checkpoint inhibitor' in the Schedule 1 – Dictionary. The determining of these Instruments finalises the investigation in relation to hypopituitarism as advertised in the Government Notices Gazette of 12 October 2021

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55 &	sensorineural	Amendment		
56/2022 h	hearing loss	These instruments amend Statements of Principles Nos. 98 and 99 of 2019 concerning <i>sensorineural hearing loss</i> by:		
		For RH SoP (Instrument No. 98/2019)		
		 replacing paragraph (n) in the definition of 'specified list of chemical agents' in the Schedule 1 Dictionary. For BoP SoP (Instrument No. 99/2019) 		
		• replacing paragraph (h) in the definition of 'specified list of chemical agents' in the Schedule 1 Dictionary.		
		The determining of these Instruments finalises the investigation in relation to sensorineural hearing loss as advertised in the Government Notices Gazette of 6 July 2021		
57 & immune 58/2022 thrombocy	immune	Amendment		
	thrombocytopaenia	These instruments amend Statements of Principles Nos. 63 and 64 of 2017 concerning <i>immune thrombocytopaenia</i> by:		
		For RH SoP (Instrument No. 63/2017)		
		• inserting a new paragraph (aa) into the definition of 'specified list of vaccines' in the Schedule 1 – Dictionary;		
		• inserting a new paragraph (oa) into the definition of 'specified list of viral infections' in the Schedule 1 – Dictionary; and		
		 inserting a note to the definition of 'specified list of viral infections' in the Schedule 1 – Dictionary. For BoP SoP (Instrument No. 64/2017) 		
		• inserting a new paragraph (aa) into the definition of 'specified list of vaccines' in the Schedule 1 – Dictionary;		
		• inserting a new paragraph (ma) into the definition of 'specified list of viral infections' in the Schedule 1 – Dictionary; and		
		• inserting a note to the definition of 'specified list of viral infections in the Schedule 1 – Dictionary.		
		The determining of these Instruments finalises the investigation in relation to immune thrombocytopenia as advertised in the Government Notices Gazette of 5 January 2022.		
59/2022	acute lymphoblastic leukaemia/lymphob lastic lymphoma	Amendment		
		This instrument amends the reasonable hypothesis Statement of Principles No.33 of 2021 concerning <i>acute lymphoblastic leukaemia/lymphoblastic lymphoma</i> by:		
		 inserting a definition of '8-hour time-weighted average' in the Schedule 1 – Dictionary; and inserting a note to the definition of 'being exposed to benzene as specified' in the Schedule 1 – Dictionary. The determining of this Instrument finelises the investigation in relation to		
		The determining of this Instrument finalises the investigation in relation to acutelymphoblastic leukaemia/lymphoblastic lymphoma as advertised in the Government Notices Gazette of 4 May 2021.		