



**Australian Government**  
**Repatriation Medical Authority**

**Statement of Principles**  
**concerning**  
**TRAUMATIC CONTUSION OR**  
**HAEMATOMA**  
**(Reasonable Hypothesis)**  
**(No. 43 of 2024)**

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The Repatriation Medical Authority determines the following Statement of Principles under subsection 196B(2) of the *Veterans' Entitlements Act 1986*.

Dated 21 June 2024.

Professor Terence Campbell AM  
Chairperson  
by and on behalf of  
The Repatriation Medical Authority

# Contents

1	Name.....	3
2	Commencement .....	3
3	Authority .....	3
4	Repeal .....	3
5	Application.....	3
6	Definitions .....	3
7	Kind of injury, disease or death to which this Statement of Principles relates .....	3
8	Basis for determining the factors .....	4
9	Factors that must exist.....	4
10	Relationship to service.....	4
11	Factors referring to an injury or disease covered by another Statement of Principles .....	5
<b>Schedule 1 - Dictionary .....</b>		<b>6</b>
1	Definitions .....	6

**1 Name**

This is the Statement of Principles concerning *traumatic contusion or haematoma (Reasonable Hypothesis)* (No. 43 of 2024).

**2 Commencement**

This instrument commences on 23 July 2024.

**3 Authority**

This instrument is made under subsection 196B(2) of the *Veterans' Entitlements Act 1986*.

**4 Repeal**

The Statement of Principles concerning external bruise No. 5 of 2016 (Federal Register of Legislation No. F2016L00008) made under subsection 196B(2) of the VEA is repealed.

**5 Application**

This instrument applies to a claim to which section 120A of the VEA or section 338 of the *Military Rehabilitation and Compensation Act 2004* applies.

**6 Definitions**

The terms defined in the Schedule 1 - Dictionary have the meaning given when used in this instrument.

**7 Kind of injury, disease or death to which this Statement of Principles relates**

- (1) This Statement of Principles is about traumatic contusion or haematoma and death from traumatic contusion or haematoma.

*Meaning of traumatic contusion or haematoma*

- (2) For the purposes of this Statement of Principles, traumatic contusion or haematoma:
- (a) means a blood collection in the skin, tissue or organ as a result of application of physical force causing tissue damage and internal bleeding; and
  - (b) includes traumatic contusion of organs including the heart, pericardium, lung, pleura, liver, spleen, and kidneys, bone, joint, eye, orbit; and
  - (c) excludes:
    - (i) blood collections associated with a fracture; and

- (ii) blood collections associated with subarachnoid haemorrhage, subdural haemorrhage, extradural haemorrhage or cerebrovascular accident;

Note 1: If traumatic haematoma is only affecting the brain, then the moderate to severe traumatic brain injury SoP would be preferred.

Note 2: Some traumatic contusions or haemorrhage can continue to enlarge due to persistent bleeding.

Note 3: Some haematomas can compress surrounding structures such as nerves, and vessels. An acute compartment syndrome due to the blood collection is considered an integral manifestation of the contusion.

#### *Death from traumatic contusion or haematoma*

- (3) For the purposes of this Statement of Principles, traumatic contusion or haematoma, in relation to a person, includes death from a terminal event or condition that was contributed to by the person's traumatic contusion or haematoma.

Note: *terminal event* is defined in the Schedule 1 – Dictionary.

### **8 Basis for determining the factors**

The Repatriation Medical Authority is of the view that there is sound medical-scientific evidence that indicates that traumatic contusion or haematoma and death from traumatic contusion or haematoma can be related to relevant service rendered by veterans, members of Peacekeeping Forces, or members of the Forces under the VEA, or members under the MRCA.

Note: *MRCA*, *relevant service* and *VEA* are defined in the Schedule 1 – Dictionary.

### **9 Factors that must exist**

At least one of the following factors must as a minimum exist before it can be said that a reasonable hypothesis has been raised connecting traumatic contusion or haematoma or death from traumatic contusion or haematoma with the circumstances of a person's relevant service:

- (1) having trauma involving the affected site within the 24 hours before clinical onset;
- (2) inability to obtain appropriate clinical management for traumatic contusion or haematoma before clinical worsening.

### **10 Relationship to service**

- (1) The existence in a person of any factor referred to in section 9, must be related to the relevant service rendered by the person.
- (2) The factor set out in subsection 9(2) applies only to material contribution to, or aggravation of, traumatic contusion or haematoma where the person's traumatic contusion or haematoma was suffered or

contracted before or during (but did not arise out of) the person's relevant service.

**11 Factors referring to an injury or disease covered by another Statement of Principles**

In this Statement of Principles:

- (1) if a factor referred to in section 9 applies in relation to a person; and
- (2) that factor refers to an injury or disease in respect of which a Statement of Principles has been determined under subsection 196B(2) of the VEA;

then the factors in that Statement of Principles apply in accordance with the terms of that Statement of Principles as in force from time to time.

# Schedule 1 - Dictionary

Note: See Section 6

## 1 Definitions

In this instrument:

**MRCA** means the *Military Rehabilitation and Compensation Act 2004*.

**relevant service** means:

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

Note: **MRCA** and **VEA** are defined in the Schedule 1 - Dictionary.

**terminal event** means the proximate or ultimate cause of death and includes the following:

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

**traumatic contusion or haematoma**—see subsection 7(2).

**VEA** means the *Veterans' Entitlements Act 1986*.