

Amendment Statement of Principles

concerning

INGUINAL HERNIA
(Reasonable Hypothesis)

(No. 79 of 2025)

The Repatriation Medical Authority determines the following Amendment Statement of Principles under subsections 196B(2) and (8) of the *Veterans' Entitlements Act 1986*.

Dated 9 September 2025

Professor Terence Campbell AM

Chairperson

by and on behalf of

The Repatriation Medical Authority

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1. Name

This is the Amendment Statement of Principles concerning *inguinal hernia* *(Reasonable Hypothesis)* (No. 79 of 2025).

1. Commencement

 This instrument commences on **22 September 2025.**

1. Authority

This instrument is made under subsections 196B(2) and (8) of the *Veterans' Entitlements Act 1986*.

1. Amendment

The Statement of Principles concerning *inguinal hernia* *(Reasonable Hypothesis)* (No. 47 of 2021) (Federal Register of Legislation No. F2021L00485) is amended in the following manner:

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| **Section**  | **Amendment** |
| *9(1)* | *Replace subsection 9(1) with the following*:having acute elevation of pressure within the abdominal cavity due to any one of the following:* + 1. anti-G straining manoeuvre;
		2. lifting heavy weights;
		3. physical trauma to the abdomen involving a direct blow to the abdomen;
		4. pneumoperitoneum induced for laparoscopic surgery;
		5. significant coughing;
		6. significant sneezing;
		7. straining at micturition due to bladder outlet or urethral obstruction; or
		8. straining at stool due to constipation or diarrhoea;

within the 30 days before the clinical onset of inguinal hernia;Note: ***clinical onset*** is defined in the Schedule 1 – Dictionary. |
| *Schedule 1 – Dictionary* | *Insert the following definition of "clinical onset" in alphabetical order*:***clinical onset*** means the point backwards in time from the date of presentation to a registered medical practitioner first confirming the presence of inguinal hernia, to the date at which the signs and/or symptoms of the inguinal hernia were persistently present, as assessed by a registered medical practitioner. |