



Australian Government
Repatriation Medical Authority

Statement of Principles
concerning
LABRAL TEAR OF THE HIP AND
SHOULDER
(Balance of Probabilities)
(No. 34 of 2026)

The Repatriation Medical Authority determines the following Statement of Principles under subsection 196B(3) of the *Veterans' Entitlements Act 1986*.

Dated 24 April 2026

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

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1 Name

This is the Statement of Principles concerning *labral tear of the hip and shoulder (Balance of Probabilities)* (No. 34 of 2026).

2 Commencement

This instrument commences on **25 May 2026**.

3 Authority

This instrument is made under subsection 196B(3) of the *Veterans' Entitlements Act 1986*.

4 Repeal

The Statement of Principles concerning labral tear (Balance of Probabilities) (No. 37 of 2017) (Federal Register of Legislation No. F2017L00886) made under subsection 196B(3) of the VEA is repealed.

5 Application

This instrument applies to a claim to which section 120B of the VEA or section 339 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 labral tear of the hip and shoulder and death from labral tear of the hip and shoulder.

Meaning of labral tear of the hip and shoulder

- (2) For the purposes of this Statement of Principles, labral tear of the hip and shoulder:
 - (a) means an injury involving tearing of the fibrocartilaginous rim of the hip or shoulder joint, in the presence of:
 - (b) relevant symptoms and corresponding clinical signs; and
 - (c) excludes degenerative tears of the labrum associated with osteoarthritis of the relevant joint, and acetabular labral tears associated with femoroacetabular impingement syndrome.

Note 1: The most common symptom of acetabular (hip) labral tears is pain in the groin area which may also radiate to the outer thigh. In glenoid (shoulder) labral tears, pain mainly occurs in the anterior or superior part of the shoulder and may radiate down the arm. Other symptoms of acetabular and glenoid labral tears include instability, reduced joint mobility, clicking or locking.

Note 2: Clinical signs include hip and shoulder physical examination tests that reproduce the patient's typical pain, a limited range of motion, gait abnormalities, and weakness or tenderness around the hip or shoulder.

- (3) This Statement of Principles applies to labral tears of the hip and shoulder that have been diagnosed on the basis of:
- (a) relevant symptoms and corresponding clinical signs of labral tears of the hip and shoulder; and
 - (b) imaging findings that are consistent with labral tears occurring in the acetabulum or glenoid.

Note 1: It will usually be the case that the date of the imaging findings of abnormal morphology at the hip or shoulder joint is after the date of clinical onset.

Note 2: *clinical onset* is defined in the schedule 1 – Dictionary.

Death from labral tear of the hip and shoulder

- (4) For the purposes of this Statement of Principles, labral tear of the hip and shoulder, in relation to a person, includes death from a terminal event or condition that was contributed to by the person's labral tear of the hip and shoulder.

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

8 Basis for determining the factors

On the sound medical-scientific evidence available, the Repatriation Medical Authority is of the view that it is more probable than not that labral tear of the hip and shoulder and death from labral tear of the hip and shoulder can be related to relevant service rendered by veterans 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 exist before it can be said that, on the balance of probabilities, labral tear of the hip and shoulder or death from labral tear of the hip and shoulder is connected with the circumstances of a person's relevant service:

- (1) having a significant physical force applied to or through the affected shoulder joint or the affected hip joint at the time of clinical onset;

Note: Examples of activities or significant physical forces may include sporting activities, motor vehicle accidents and falls.

- (2) performing forceful and repetitive motions of the affected shoulder joint or the affected hip joint, involving extremes of the normal range of motion, for at least 4 hours per week for the 1 month immediately preceding clinical onset;

Note 1: Examples of activities involving forceful and repetitive motions of the shoulder at extremes of the normal range of motion may include swimming, basketball, football, line or rope handling, rope ladder climbing, loading ammunition, physical employment standards training and participating in obstacle courses, infantry minor tactics courses and high rope courses.

Note 2: Examples of activities involving forceful and repetitive motions of the hip at extremes of the normal range of motion may include golf, hockey, rowing, running, physical employment standards training and participating in obstacle courses and infantry minor tactics courses.

- (3) being in the third trimester of pregnancy within the 1 week before clinical onset of labral tear of the hip joint;
- (4) inability to obtain appropriate clinical management for labral tear of the hip and shoulder 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 clinical worsening aspect of factors set out in section 9 apply only to material contribution to, labral tear of the hip and shoulder where the person's labral tear of the hip and shoulder 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(3) 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:

clinical onset means the point backwards in time from the first date of imaging findings of abnormal morphology at the hip or shoulder joint, to the date at which the symptoms of a labral tear were persistently present, as assessed by a registered medical practitioner.

labral tear of the hip and shoulder—see subsection 7(2).

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

relevant service means:

- (a) eligible war service (other than operational service) under the VEA;
- (b) defence service (other than hazardous service and British nuclear test defence service) under the VEA; or
- (c) peacetime service under the MRCA.

Note: ***MRCA*** and ***VEA*** are also 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.

VEA means the *Veterans' Entitlements Act 1986*.