Australian Government
Repatriation Medical Authority

Statement of Principles concerning ELECTRICAL INJURY (Reasonable Hypothesis) (No. 70 of 2026)

The Repatriation Medical Authority determines the following Statement of Principles under section 370CB of the *Military Rehabilitation and Compensation Act 2004*.

Dated 19 October 2026

Dr Anthony Lynham AO
Chairperson
by and on behalf of
The Repatriation Medical Authority

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1 Name

This is the Statement of Principles concerning *electrical injury (Reasonable Hypothesis)* (No. 70 of 2026).

2 Commencement

This instrument commences on 16 November 2026.

3 Authority

This instrument is made under section 370CB of the *Military Rehabilitation and Compensation Act 2004*.

4 Repeal

The Statement of Principles concerning electrical injury (Reasonable Hypothesis) (No. 41 of 2018) (Federal Register of Legislation No. F2018L00535) made under subsections 196B(2) and (8) of the VEA is repealed.

5 Application

This instrument applies to a claim to which 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 electrical injury and death from electrical injury.

*Meaning of **electrical injury***

(2) For the purposes of this Statement of Principles, electrical injury:

(a) means physical damage to the body as a direct result of the flow of electrical current through the body or across the body surface; and

(b) includes such damage from:

(i) an external manufactured source (including an implanted electrical device);

(ii) being struck by lightning; and

(iii) being in the immediate vicinity of a lightning strike.

Note 1: Electrical injury can include thermal damage due to heat generated as the electrical current passes through tissues and encounters resistance.

Note 2: Examples of electrical injury include burns (e.g., contact and flash burns), muscle necrosis and internal tissue damage. Electrical injury can cause other diseases or injuries, and these are covered by a range of other Statements of Principles in which electrical injury (variously worded) is listed as a risk factor. The relevant Statements of Principles include but are not limited to: carpal tunnel syndrome, cataract, conductive hearing loss, conjunctivitis, dislocation of a joint and subluxation of a joint, Dupuytren disease, epilepsy, erectile dysfunction, gingivitis, joint instability, otitic barotrauma, pericarditis, plantar fibromatosis, seizure, sensorineural hearing loss, tinnitus and traumatic brachial plexopathy.

(3) While electrical injury attracts ICD 10 AM code T75.0 or T75.4, in applying this Statement of Principles the meaning of electrical injury is that given in subsection (2).

(4) For subsection (3), a reference to an ICD-10-AM code is a reference to the code assigned to a particular kind of injury or disease in *The International Statistical Classification of Diseases and Related Health Problems, Tenth Revision, Australian Modification* (ICD-10-AM), Tenth Edition, effective date of 1 July 2017, copyrighted by the Independent Hospital Pricing Authority, ISBN 978-1-76007-296-4.

Death from ***electrical injury***

(5) For the purposes of this Statement of Principles, electrical injury, in relation to a person, includes death from a terminal event or condition that was contributed to by the person's electrical injury.

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 electrical injury and death from electrical injury can be related to relevant service under the MRCA.

Note: ***MRCA*** and ***relevant service*** 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 electrical injury or death from electrical injury with the circumstances of a person's relevant service:

(1) having exposure to electrical current, or an electric arc across the affected area of the body, at the time of clinical onset;

(2) inability to obtain appropriate clinical management for electrical injury 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, or aggravation of, electrical injury where the person's electrical injury 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 section 370CB of the MRCA;

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:

electrical injury—see subsection 7(2).

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

relevant service means:

(a) warlike service;
(b) non-warlike service;
(c) British nuclear test defence service;
(d) hazardous service.

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.