

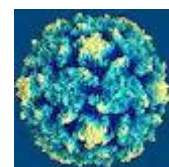


Australian Government
Department of Veterans' Affairs

Rehabilitation & Entitlements Policy Group



SOP Bulletin No. 156



09 January 2012

THE FOLLOWING RMA SOPs ARE TO TAKE EFFECT ON 11 JANUARY, 2012

New SOPs	Nil
Revocations & Replacements	Conjunctivitis Acute infectious mononucleosis (replaces Symptomatic Epstein-Barr virus infection) Psoriatic arthropathy Adhesive capsulitis of the shoulder Aortic aneurysm Dementia pugilistica
Amendments	Nil

NOTEWORTHY FEATURES

Conjunctivitis	Revocation – 01 & 02 of '12 Replaces 111 and 112 of '96
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- There are minor wording changes to the definition.
- There has been a substantial reorganisation of the factors in this SOP.
- Six previous infection factors have been consolidated into one combined factor.
- Three previous disease factors have been consolidated into one factor. The associated definition has a specified list of diseases that includes a range of new conditions.
- Other existing factors have been retained but substantially reworded in some cases.
- There is a new onset only factor (RH & BOP) for being in an immunosuppressed state (previously a worsening factor only).

Acute infectious mononucleosis	Revocation – 03 & 04 of '12 Replaces 25 and 26 of '98
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- The name of this SOP has changed, but it is still about acute clinical illness due to Epstein-Barr virus infection.
- The previous two onset factors for contact with oral secretions and transfusion/ transplantation have been reorganised into one factor, for being exposed to the virus. The pathways of exposure, that were previously in the factors, are now in the associated definition. The time window for exposure has been widened (was 21 to 49 days before onset, now 12 to 50 days).

Psoriatic arthropathy	Revocation – 05 & 06 of '12
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Replaces 27 and 28 of '98

- There are changes to the definition, with no operational effect.
- There are two new onset factors (RH and BOP) for a discrete injury to an affected joint (where the clinical onset is in that joint) and for treatment with efalizumab (a psoriasis treatment withdrawn from the Australian market in 2009).

Adhesive capsulitis of the shoulder

Revocation – 07 & 08 of '12

Replaces 17 and 18 of '99

As amended by 28 & 29 of '02

- The definition has been changed to emphasise the clinical aspects of the condition, but SOP coverage is unchanged.
- The previous non-specific shoulder trauma factor has been replaced by an injury factor and associated definition that now has a discrete list of specific types of shoulder injury.
- There are multiple new onset and worsening factors concerning the following:
 - RH and BOP:
 - A musculoskeletal disorder as specified (localised tendonitis or arthritis);
 - A malignant neoplasm of the region;
 - A malignant neoplasm of the lung;
 - Hyperthyroidism or hypothyroidism;
 - Parkinson's disease;
 - Highly active antiretroviral therapy for HIV infection;
 - Immobilisation of the affected shoulder.
 - RH only:
 - Myocardial infarction;
 - Pulmonary TB, chronic bronchitis or emphysema.

Aortic aneurysm

Revocation – 09 & 10 of '12

Replaces 66 and 67 of '98

- There are minor changes to the definition, with no operational effect.
- There are new RH only factors for passive smoking (onset and worsening) and for chronic bronchitis and emphysema (worsening only).
- There are new RH and BOP factors for hyperhomocysteinaemia (onset and worsening).

Dementia pugilistica

Revocation – 11 & 12 of '12

Replaces 07 and 08 of '00

- The definition has been reworded, but SOP coverage is unchanged.
- The existing factor concerning episodes of multiple blows to the head has been reworded, as has the associated definition. A new onset factor concerning a total cumulative number of blows to the head has been added.

* Image of Epstein-Barr virus

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