SOP Bulletin No. 195

13 March 2017

THE FOLLOWING RMA SOPS TAKE EFFECT ON 27 MARCH, 2017

<table>
<thead>
<tr>
<th>New SOPs</th>
<th>Nil</th>
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| Revocations & Replacements | Presbyopia  
Spondylolisthesis and spondylolysis |
| Amendments | Suicide and attempted suicide |

NOTEWORTHY FEATURES

- Presbyopia  
  Revocation - 22 & 23 of '17  
  Replaces 117 and 118 of '07
- There are no material changes. The SOP format/template has been updated.
Spondylolisthesis and spondylolysis

- Retrolisthesis (backward displacement of a vertebra) has been added to the conditions covered by the SOP. Previously only forward displacement (anterolisthesis) was covered.
- The repetitive and forceful activities factor has been changed by: extending the factor coverage to now include the cervical spine (previously lumbar spine only); reducing the hours in the BOP SOP to match the RH SOP (10 hrs per week); and providing a note that gives examples of activities that can involve the required movements.
- The spondylosis factor and the two factors covering spinal surgery are also now no longer limited to the lumbar spine.
- The spondylosis and obesity factors were previously onset factors only, but have now been added as worsening factors. The obesity factor applies to anterolisthesis only.
- The previously stipulated limited circumstances in which the inability to obtain appropriate clinical management factor could apply have been removed.

Suicide and attempted suicide

- The previous 1A and 1B stressor factors required the stressors to be within 5 years for RH and 2 years for BOP. Those limits have been removed and the stressors can now have been any time before.
- There are also changes to the category 2 stressor factors. In the BOP SOP the previous requirement for the stressor to be within 2 years has been changed to 5 years (same as RH). In both SOPs the “problems with a long-term relationship” component of the category 2 stressor definition has been separated out into a new factor, which has a longer latency (within the 10 years before).

Contact for this bulletin:

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