



Australian Government
Department of Veterans' Affairs

Claimant Report – Coughing or Sneezing Inguinal Hernia

This form is in connection with your claim for pension and medical treatment and the information you supply will assist in deciding eligibility for benefits under the Veterans' Entitlements Act 1986 and/or Military Rehabilitation and Compensation Act 2004. In the event of an appeal against a decision, this information may be provided to the Veterans' Review Board, Administrative Appeals Tribunal or Federal Court.

Veteran's Details

Surname	Given Names	DVA File Number

Report Detail

1. Is there a history of coughing or sneezing forceful enough to result in increased pressure within the abdominal cavity?

- No** - *Please sign the form and return it to the Department*
 Yes

2. When did the first signs or symptoms of (_____) develop? *Please be as specific as possible*

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3. Were there episodes of coughing or sneezing within the 30 days immediately before the first signs or symptoms of (_____)?

- No**
 Yes - *When did the coughing or sneezing occur?*

/ /

4. Please describe the circumstances and conditions which led to such coughing or sneezing:

5. Was medical attention sought for such coughing or sneezing?

- No
- Yes - Please state when this occurred, describe any treatment received and give details of the name and address of the doctor or hospital consulted.

6. Did the (insert claimed position) become permanently worse at any time?

- No - Please sign the form and return it to the Department
- Yes - Please describe when the permanent worsening occurred

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7. Were there episodes of coughing or sneezing within the 30 days immediately before the permanent worsening of (insert claimed position)?

- No
- Yes - When did the coughing or sneezing occur?

/ /

8. What caused these episodes of coughing or sneezing and what treatment was provided? Please provide details including dates of treatment and name and address of the attending doctor.

Claimant's Signature

You are reminded that:

- The Declaration you signed on the claim form also covers the information you supply on this form.
- There are penalties for knowingly making false or misleading statements.

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