



**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*

/ /

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?*

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


