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Claimant Report - Consuming Aristolochia Fangchi as a  
Contaminant of Herbal Weight Loss Medication

Malignant Neoplasm of the Bladder

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. Has Aristolochia fangchi as a contaminant of herbal weight loss been consumed?

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

 **Yes**

2. Please provide details on the consumption of Aristolochia fangchi as a contaminant of herbal weight loss medication by completing the following table:

|  |  |  |  |
| --- | --- | --- | --- |
| **Medical condition for which herbal weight loss medication was consumed** | **Name of product containing Aristolochia fangchi** | **Total grams of Aristolochia fangchi consumed** | **Period of Aristolochia fangchi ingestion** |
|  |  |  | / / to / / |
|  |  |  | / / to / / |

Claimant's Signature

***You are reminded that:***

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

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