

Medical Report - Appropriate Clinical Management

The information you provide on this form 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.

Board, Administrative Appeals Tribunal or Federal Court.				
Vet	eran's Details			
Surname		Given Names	DVA File Number	
Røn	oort Detail			
A cla	aim for service related comp ider whether there was an ir	nability to obtain appropriate clini	named requires the Department to ical management that could be a use answer the following questions:	
1.	Has the veteran ever suffered from the claimed condition?			
	No - Please sign theYes	form and return it to the Departr	ment	
2.	Was the veteran ever unab condition?	le to obtain appropriate clinical n	nanagement for the claimed	
	□ No - Please sign the □ Yes	form and return it to the Departr	ment	
3.	Did this inability to obtain appropriate clinical management contribute to a permanent worsening of the claimed condition?			
	No - Please sign theYes	form and return it to the Departi	ment	
4.	When did this inability to obtain appropriate clinical management occur?			
			/ /	
5.	What do you believe to ha management for the claim	ve been the cause of the inability ed condition?	to obtain appropriate clinical	

advice:	
advice: Signature	

Folio: