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Medical Report - Treatment with Ototoxic Drugs

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.

Veteran's Details

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Surname** |  | **Given Names** | |  | | **DVA File Number** | |
|  |  | |  | |  | |  | |

Report Detail

A claim for service related compensation in respect of the above named leads the Department to consider whether treatment with ototoxic drugs could be relevant to the development of (insert claimed condition) in this case. Would you please answer the following question:

1. When was the clinical onset of (\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)?………./………./……….

2. Was the veteran being treated with any of the ototoxic drugs specified below within the year before the clinical onset of (\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)?

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

 **Yes** - Please give details of all periods of treatment with any of the following ototoxic drugs:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Aminoglycoside antibiotics | | From | To | Condition treated |
|  | Gentamicin | / / | / / |  |
|  | Kanamycin | / / | / / |  |
|  | Neomycin | / / | / / |  |
|  | Amikacin | / / | / / |  |
|  | Streptomycin | / / | / / |  |
|  | Tobramycin | / / | / / |  |
|  | Vankomycin | / / | / / |  |
|  | Netilmicin | / / | / / |  |
| Drugs used to treat tuberculosis | | From | To | Condition treated |
|  | Viomycin | / / | / / |  |
|  | Erythromycin | / / | / / |  |
| Loop diuretics | | From | To | Condition treated |
|  | Ethacrynic acid | / / | / / |  |
|  | Frusemide | / / | / / |  |
|  | Bumetanide | / / | / / |  |
| Drugs used in the treatment of cancer | | From | To | Condition treated |
|  | Cisplatin | / / | / / |  |
|  | Nitrogen Mustard | / / | / / |  |
|  | 6-amino nicotinamide | / / | / / |  |
|  | Vinblastine | / / | / / |  |
|  | Vincristine | / / | / / |  |
|  | misonidazole | / / | / / |  |
|  | a-difluromethylornithine | / / | / / |  |

3. Has the tinnitus permanently worsened at any time?

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

 **Yes** - Please indicate when this happened.

4. Was the veteran being treated with any of the ototoxic drugs specified below within the year before the permanent worsening of (insert claimed position)?

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

 **Yes** - Please give details of all periods of treatment with any of the following ototoxic drugs:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Aminoglycoside antibiotics | | From | To | Condition treated |
|  | Gentamicin | / / | / / |  |
|  | Kanamycin | / / | / / |  |
|  | Neomycin | / / | / / |  |
|  | Amikacin | / / | / / |  |
|  | Streptomycin | / / | / / |  |
|  | Tobramycin | / / | / / |  |
|  | Vankomycin | / / | / / |  |
|  | Netilmicin | / / | / / |  |
| Drugs used to treat tuberculosis | | From | To | Condition treated |
|  | Viomycin | / / | / / |  |
|  | Erythromycin | / / | / / |  |
| Loop diuretics | | From | To | Condition treated |
|  | Ethacrynic acid | / / | / / |  |
|  | Frusemide | / / | / / |  |
|  | Bumetanide | / / | / / |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Drugs used in the treatment of cancer | | From | To | Condition treated |
|  | Cisplatin | / / | / / |  |
|  | Nitrogen Mustard | / / | / / |  |
|  | 6-amino nicotinamide | / / | / / |  |
|  | Vinblastine | / / | / / |  |
|  | Vincristine | / / | / / |  |
|  | misonidazole | / / | / / |  |

Details of Medical Practitioner providing advice:

|  |  |  |
| --- | --- | --- |
| **Stamp** |  |  |
|  |  |  |
|  |  | **Signature** |
|  |  |  |
|  |  |  |
|  |  | **/ /** |