



**Australian Government**  
**Department of Veterans' Affairs**

## Medical Report - Development of Dislocation

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 the development of dislocation in this case. Would you please answer the following questions:

1. In which joint did the dislocation occur? *(Please identify the site and side of the body, where appropriate):*

  


2. When did the dislocation occur?

  


3. How did the dislocation occur? If it occurred as a consequence of a medical or surgical condition (eg, a fall occurring as a result of a transient ischaemic attack), please name the condition:

  
  
  


4. Did the underlying pathology of {+SubstituteClaimedCondition,I} permanently worsen?

- No** - Please sign the form and return it to the Department
- Yes** - When did this occur and what do you believe to have been the cause of the worsening?

*Folio:* \_\_\_\_\_


---

***Details of Medical Practitioner providing advice:***

**Stamp**

--

**Signature**

--