



Australian Government

Department of Veterans' Affairs

## Medical Report - Trauma to the Plantar Aspect of the Foot Plantar Fasciitis

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 a **trauma to the plantar aspect of the foot\*** could be a factor in the development of plantar fasciitis in this case. **\*Note:** The Repatriation Medical Authority (RMA) defines this trauma to mean 'an injury to the affected fascia that causes the development, within the 24 hours of the injury being sustained, of pain and tenderness, swelling or altered mobility of the affected foot'.

Would you please answer the following questions:

1. Has the veteran ever had a trauma, as defined by the RMA, to the plantar aspect of the foot?
  - No - *Please sign the form and return it to the Department*
  - Yes
2. Please indicate the site of the plantar fasciitis, including date of clinical onset.
  - Left foot ...../...../.....
  - Right foot ...../...../.....
3. Please provide details of all injuries to the plantar aspect of the foot during the **seven days** before the clinical onset of the plantar fasciitis.

Date	Affected foot	Description and circumstances of injury

4. Did the plantar fasciitis clinically worsen? **Note:** Clinical worsening requires an increase in the gravity of the disease beyond its natural progression.

- No** - *Please sign the form and return it to the Department*
- Yes** – Please provide details, including date of worsening:
  - Left foot ...../...../.....
  - Right foot ...../...../.....

5. Please provide details of all injuries to the plantar aspect of the foot during the **seven days** before the clinical worsening of plantar fasciitis.

<b>Date</b>	<b>Affected foot</b>	<b>Description and circumstances of injury</b>

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

**Stamp**

**Signature**

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