



Australian Government
Department of Veterans' Affairs

Excess Laxity of the Shoulder Joint Rotator Cuff Syndrome

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 excess laxity of the shoulder joint could be relevant in causing (or aggravating pre-existing) the claimed condition in this case. The Repatriation Medical Authority (RMA) defines excess laxity of the shoulder joint to mean '**acquired excess instability of the glenohumeral joint as demonstrated by clinical testing or imaging, following shoulder dislocations or tears involving the glenoid labrum or glenohumeral ligaments**'.

1. When was the clinical onset of the claimed condition?

...../...../.....

2. Did the veteran have excess laxity of the shoulder joint (as defined by the RMA above) in the shoulder affected by rotator cuff syndrome for a period of **at least the one year** before the clinical onset of rotator cuff syndrome in that shoulder?

No

Yes - Please provide details, in the table overleaf, of the evidence of the excess laxity of the shoulder joint and, if known, include information about the cause(s) and treatment of the acquired joint instability.

Details of excess laxity of the shoulder joint for the 12 months before the clinical onset of the claimed condition:

Cause of acquired excess instability of glenohumeral joint		Evidence of excess laxity of the shoulder joint	Treatment undertaken	
<u>Diagnosis</u>	<u>Date</u>		<u>Details of treatment</u>	<u>Date</u>

3. Was there any residual excess laxity of the shoulder joint following treatment?

Yes

No – When did the shoulder joint return to normal?

...../...../.....

4. Did the underlying pathology of the claimed condition permanently worsen? Note: For the purposes of the Veterans' Entitlements Act (1986), permanent worsening requires an increase in the gravity of the disease beyond its natural progression. It excludes temporary exacerbations or any deterioration which is part of the normal course of the disease.

- No** - Please sign the form and return it to the Department
- Yes** - When did this occur?

...../...../.....

5. Did the veteran have excess laxity of the shoulder joint (as defined by the RMA above) in the shoulder affected by rotator cuff syndrome for a period of **at least the one year** before the permanent worsening of rotator cuff syndrome in that shoulder?

- No** - Please sign the form and return it to the Department
- Yes** - Please provide details of the evidence of the excess laxity of the shoulder joint and, if known, include information about the cause(s) and treatment of the acquired joint instability.

Cause of acquired excess instability of glenohumeral joint		Evidence of excess laxity of the shoulder joint	Treatment undertaken	
<u>Diagnosis</u>	<u>Date</u>		<u>Details of treatment</u>	<u>Date</u>

Details of Medical Practitioner providing advice:

Stamp

Signature

/ /