The following RMA SOPS take effect on 23 July, 2018

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<th>New SOPs</th>
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**Note-worthy features**

- This new SOP covers inflammation / infection of the olecranon bursa at the tip of the elbow. The olecranon bursa is a thin sac of fluid that helps the skin slide over the bone at that site.
Knee bursitis

- This new SOP covers inflammation / infection of any of the multiple bursae around the knee, except for bursitis of the gastrocnemius-semimembranosus bursa, which is covered by the SOP for popliteal cyst (AKA Baker’s cyst). Bursae around the knee are thin sacs of fluid that generally sit between muscle/tendon and bone and help to reduce friction.
- Many of the factors in the SOP are restricted to particular sites/types of bursitis.

Bipolar disorder

- The definition has been updated, with DSM-5 based criteria. This is the last of the SOPs to be updated, with all psychiatric SOPs now having definitions based on DSM-5 criteria.
- The category 1B stressor definition has been changed, with a reorganisation/reorder of the listed traumatic events and a change from plural to singular for ‘corpse’ and ‘critically injured casualty’. There is also a new and limiting definition of ‘corpse’, which is restricted to cases involving ‘violent or horrific death’.
- A number of existing factors have updated wording, to now be consistent with other more recently issued psychiatric SOPs.
- There are changes to the drug factors due to the DSM-5 classification. Some new drugs have been added in the specified list of drugs factor/definition (this applies to ‘substance/medication-induced bipolar and related disorder’ only).
- There are new RH only factors for insomnia (as specified), and concussion or moderate to severe traumatic brain injury.
- There are new RH only factors, for ‘substance/medication-induced bipolar and related disorder’ only, for organic solvent exposure and increased caffeine intake (as specified).
- There are new RH and BOP factors, for worsening only, for deep brain stimulation for Parkinson’s disease and for vagus nerve stimulation.
Panic disorder

Revocation – 55 & 56 of 2018
Replaces 68 & 69 of 2009

- The same changes as for bipolar disorder have been made to the category 1B stressor definition (see above).
- The childhood abuse factor has been amended, with the removal of the ‘within 20 years’ requirement in RH and the ‘within 15 years’ requirement in BOP. A worsening factor for childhood abuse has also been added.
- The ‘death of a significant other’ factor has been amended, with extension of the temporal period from ‘within 2 years’ (RH) or 1 yr (BOP), to 10 yrs and 5 yrs.
- There are new factors (RH and BOP) for a severe chronic medical condition, sleep apnoea, concussion and a category 2 stressor.
- There is a new RH only factor for migraine.

Cluster headache

Revocation – 57 & 58 of 2018
Replaces 20 & 21 of 2010

- The definition has been changed, to exclude some short lasting headache types that are now classified as being separate from cluster headache.
- The head trauma factor (RH and onset only) has been updated to now require onset within 7 days (previously 14) and to now propagate to the concussion and moderate to severe traumatic brain injury SOPs.
- One new drug has been added to the worsening factor for taking nitrates.
- There are new RH only factors for eye extenteration (removal), sleep apnoea, smoking, cocaine use, alcohol consumption and taking sildenafil (the last two for worsening only).

Macular degeneration

Revocation – 59 & 60 of 2018
Replaces 13 & 14 of 2009

- The definition has been updated, but SOP coverage remains the same.
- The RH passive smoking factor has been updated to the “exposed to second hand smoke” format.
- There has been a significant reduction in the required dose in the alcohol factors.
- There are new RH only factors (onset and worsening) for an abnormal lipid profile (high HDL), diabetes mellitus and hypertension.
- The previous cataract surgery factor has been removed from the BOP SOP and confined to apply to wet macular degeneration only in the RH SOP.
- The previous anticoagulant therapy or thrombolytic therapy factor has been restricted to worsening only in both RH and BOP (previously a factor for onset and worsening).

**Localised sclerosis**

<table>
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- The definition has been updated, with the addition of further exclusions and notes on clinical manifestations.
- Factors for graft vs host disease, trichloroethylene and vinyl chloride have been removed from both RH and BOP SOPs.
- The silica dust factor has been removed from the BOP SOP.
- A new RH only onset factor has been added for skin injury at the affected site.

**Lumbar spondylosis**

<table>
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**Thoracic spondylosis**

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- The same changes have been made for both conditions.
- The changes are to the minimum weight requirements in the lifting loads and carrying loads factors.
- The changes apply to both onset and worsening factors.
- All loads (for lifting and for carrying) are now “at least 20” kg (down from 25 kg in RH and from 35 kg in BOP).
- For the lifting loads factors the cumulative total requirement is now:
• “at least 100 000” kg for RH (down from 120 000 kg); and
• “at least 150 000” kg for BOP (down from 168 000 kg).
• The carrying loads factors for RH and BOP retain the requirement for a cumulative total time of 3 800 hours (unchanged).
• The “within the 25 years” stipulations in the BOP factors have also been retained.

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