Statement of Principles concerning otitic barotrauma No. 35 of 2012

made under subsection 196B(2) of the

Veterans' Entitlements Act 1986

Compilation No. 1

Compilation date: 23 January 2017

Includes amendments up to: Amendment Statement of Principles concerning otitic barotrauma No. 15 of 2017 (F2017L00009)

The day of commencement of this Amendment Statement of Principles concerning otitic barotrauma is 23 January 2017.

Prepared by the Repatriation Medical Authority Secretariat, Brisbane
About this compilation

This compilation

This is a compilation of the Statement of Principles concerning otitic barotrauma No 35 of 2012 that shows the text of the law as amended and in force on 23 January 2017.

The notes at the end of this compilation (the endnotes) include information about amending laws and the amendment history of provisions of the compiled law.

Uncommenced amendments

The effect of uncommenced amendments is not shown in the text of the compiled law. Any uncommenced amendments affecting the law are accessible on the Legislation Register (www.legislation.gov.au). The details of amendments made up to, but not commenced at, the compilation date are underlined in the endnotes. For more information on any uncommenced amendments, see the series page on the Legislation Register for the compiled law.

Application, saving and transitional provisions for provisions and amendments

If the operation of a provision or amendment of the compiled law is affected by an application, saving or transitional provision that is not included in this compilation, details are included in the endnotes.

Modifications

If the compiled law is modified by another law, the compiled law operates as modified but the modification does not amend the text of the law. Accordingly, this compilation does not show the text of the compiled law as modified. For more information on any modifications, see the series page on the Legislation Register for the compiled law.

Self-repealing provisions

If a provision of the compiled law has been repealed in accordance with a provision of the law, details are included in the endnotes.
Statement of Principles concerning

OTITIC BAROTRAUMA

No. 35 of 2012

for the purposes of the

Veterans’ Entitlements Act 1986
and

Military Rehabilitation and Compensation Act 2004

Title
1. This Instrument may be cited as Statement of Principles concerning otitic barotrauma No. 35 of 2012.

Determination
2. The Repatriation Medical Authority under subsection 196B(2) and (8) of the Veterans’ Entitlements Act 1986 (the VEA):
   (a) revokes Instrument No. 27 of 2001 concerning otitic barotrauma; and
   (b) determines in its place this Statement of Principles.

Kind of injury, disease or death
3. (a) This Statement of Principles is about otitic barotrauma and death from otitic barotrauma.
   (b) For the purposes of this Statement of Principles, "otitic barotrauma" means damage to the middle or inner ear arising from inequalities in the barometric pressure between the surrounding atmosphere and the air within the middle ear space, and which gives rise to clinical manifestations such as otalgia, tinnitus, hearing loss, perforation of the tympanic membrane, disruption of the ossicle chain, rupture of the round or oval window membranes with vertigo or perilymphatic fistula. Otitic barotrauma is also known as aerotitis media, aviator's ear, aviation otitis, barotitis media or ear squeeze.
   (c) Otitic barotrauma attracts ICD-10-AM code T70.0.
(d) In the application of this Statement of Principles, the definition of "otitic barotrauma" is that given at paragraph 3(b) above.

Basis for determining the factors

4. The Repatriation Medical Authority is of the view that there is sound medical-scientific evidence that indicates that otitic barotrauma and death from otitic barotrauma can be related to relevant service rendered by veterans, members of Peacekeeping Forces, or members of the Forces under the VEA, or members under the Military Rehabilitation and Compensation Act 2004 (the MRCA).

Factors that must be related to service

5. Subject to clause 7, at least one of the factors set out in clause 6 must be related to the relevant service rendered by the person.

Factors

6. The factor that must as a minimum exist before it can be said that a reasonable hypothesis has been raised connecting otitic barotrauma or death from otitic barotrauma with the circumstances of a person’s relevant service is:

(a) experiencing a change in ambient barometric pressure as specified, within the 24 hours before the clinical onset of otitic barotrauma; or

(b) being exposed to a blast, including the blast from a lightning strike, within the 24 hours before the clinical onset of otitic barotrauma; or

(c) receiving mechanical ventilation involving a face mask within the 24 hours before the clinical onset of otitic barotrauma; or

(d) breathing 100 percent oxygen for at least 30 minutes within the 24 hours before the clinical onset of otitic barotrauma; or

(e) having eustachian tube dysfunction within the 24 hours before the clinical onset of otitic barotrauma; or

(f) experiencing a change in ambient barometric pressure as specified, within the 24 hours before the clinical worsening of otitic barotrauma; or

(g) being exposed to a blast, including the blast from a lightning strike, within the 24 hours before the clinical worsening of otitic barotrauma; or

(h) receiving mechanical ventilation involving a face mask within the 24 hours before the clinical worsening of otitic barotrauma; or
(i) breathing 100 percent oxygen for at least 30 minutes within the 24 hours before the clinical worsening of otitic barotrauma; or

(j) having eustachian tube dysfunction within the 24 hours before the clinical worsening of otitic barotrauma; or

(k) inability to obtain appropriate clinical management for otitic barotrauma.

Factors that apply only to material contribution or aggravation

7. Paragraphs 6(f) to 6(k) apply only to material contribution to, or aggravation of, otitic barotrauma where the person’s otitic barotrauma was suffered or contracted before or during (but not arising out of) the person’s relevant service.

Inclusion of Statements of Principles

8. In this Statement of Principles if a relevant factor applies and that factor includes an injury or disease in respect of which there is a Statement of Principles then the factors in that last mentioned Statement of Principles apply in accordance with the terms of that Statement of Principles as in force from time to time.

Other definitions

9. For the purposes of this Statement of Principles:

"a change in the ambient barometric pressure as specified" means a significant and rapid reduction or increase in the pressure surrounding the person, including in such circumstances as:

(a) ascending from a submerged craft or device or a submarine escape training facility;
(b) decompression or compression in a hypobaric or hyperbaric chamber;
(c) flying;
(d) sky diving;
(e) underwater diving;
(f) working in a submarine; or
(g) working in a pressurised chamber or tunnel;

"death from otitic barotrauma" in relation to a person includes death from a terminal event or condition that was contributed to by the person’s otitic barotrauma;

"eustachian tube dysfunction" means an inability to equalise pressure in the middle ear to the pressure surrounding the individual from any of several conditions including:
(a) deviation of nasal septum;
(b) rhinitis (including allergic rhinitis and non-allergic rhinitis);
(c) sinusitis; or
(d) upper respiratory tract infection;

"ICD-10-AM code" means a number assigned to a particular kind of injury or disease in The International Statistical Classification of Diseases and Related Health Problems, 10th Revision, Australian Modification (ICD-10-AM), Seventh Edition, effective date of 1 July 2010, copyrighted by the National Centre for Classification in Health, Sydney, NSW, and having ISBN 978 1 74210 154 5;

"mechanical ventilation" means an artificial method of ventilation in which air is forced into the lungs of a person via mechanical means, and includes anaesthetic and continuous positive airway pressure (CPAP) use;

"relevant service" means:
(a) operational service under the VEA;
(b) peacekeeping service under the VEA;
(c) hazardous service under the VEA;
(d) British nuclear test defence service under the VEA;
(e) warlike service under the MRCA; or
(f) non-warlike service under the MRCA;

"terminal event" means the proximate or ultimate cause of death and includes:
(a) pneumonia;
(b) respiratory failure;
(c) cardiac arrest;
(d) circulatory failure; or
(e) cessation of brain function.

Application
10. This Instrument applies to all matters to which section 120A of the VEA or section 338 of the MRCA applies.

Date of effect
11. This Instrument takes effect from 2 May 2012.
Endnotes

Endnote 1—About the endnotes

The endnotes provide information about this compilation and the compiled law.

The following endnotes are included in every compilation:

Endnote 1—About the endnotes
Endnote 2—Abbreviation key
Endnote 3—Legislation history
Endnote 4—Amendment history

Abbreviation key—Endnote 2

The abbreviation key sets out abbreviations that may be used in the endnotes.

Legislation history and amendment history—Endnotes 3 and 4

Amending laws are annotated in the legislation history and amendment history.

The legislation history in endnote 3 provides information about each law that has amended (or will amend) the compiled law. The information includes commencement details for amending laws and details of any application, saving or transitional provisions that are not included in this compilation.

The amendment history in endnote 4 provides information about amendments at the provision (generally section or equivalent) level. It also includes information about any provision of the compiled law that has been repealed in accordance with a provision of the law.

Misdescribed amendments

A misdescribed amendment is an amendment that does not accurately describe the amendment to be made. If, despite the misdescription, the amendment can be given effect as intended, the amendment is incorporated into the compiled law and the abbreviation “(md)” added to the details of the amendment included in the amendment history.

If a misdescribed amendment cannot be given effect as intended, the abbreviation “(md not incorp)” is added to the details of the amendment included in the amendment history.
Endnote 2—Abbreviation key

ad = added or inserted  o = order(s)
am = amended Ord = Ordinance
amdt = amended orig = original
ample = amendment par = paragraph(s)/subparagraph(s)
c = clause(s) /sub-subparagraph(s)
C[x] = Compilation No. x
Ch = Chapter(s)
def = definition(s)
Dict = Dictionary

disallowed = disallowed by Parliament
prev = previous
(prev…) = previously

Div = Division(s)

d = editorial change

exp = expires/expired or ceases/ceased to have
  effect
F = Federal Register of Legislation

gaz = gazette

LA = Legislation Act 2003 Sch = Schedule(s)
LIA = Legislative Instruments Act 2003

Lt = Legislation

(md) = misdescribed amendment can be given
  effect
(md not incorp) = misdescribed amendment
  cannot be given effect
mod = modified/modification

No. = Number(s)

F = Federal Register of Legislation

LA = Legislation Act 2003
LIA = Legislative Instruments Act 2003

Sdiv = Subdivision(s)

SLI = Select Legislative Instrument
SR = Statutory Rules
Sub-Ch = Sub-Chapter(s)
SubPt = Subpart(s)

underlining = whole or part not

commenced or to be commenced
### Endnote 3—Legislation history

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<th>Name</th>
<th>Registration</th>
<th>Commencement</th>
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<td>2 May 2012</td>
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## Endnote 4—Amendment history

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<td>Clause 9 “a change in the ambient barometric pressure as specified”.</td>
<td>rs. Instrument No. 15 of 2017</td>
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