Statement of Principles concerning otitis externa
No. 59 of 2012

made under subsection 196B(3) of the

Veterans' Entitlements Act 1986

Compilation No. 1

Compilation date: 18 September 2017
Includes amendments up to: Veterans' Entitlements (Statements of
Principles—Cumulative Equivalent Dose)
Amendment Determination 2017 (No. 58 of
2017) (F2017L01067)

The day of commencement of this Amendment Determination is 18 September 2017.

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

This compilation

This is a compilation of the Statement of Principles concerning otitis externa No. 59 of 2012 that shows the text of the law as amended and in force on 18 September 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If a provision of the compiled law has been repealed in accordance with a provision of the law, details are included in the endnotes.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

OTITIS EXTERNA

No. 59 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 otitis externa No. 59 of 2012.

Determination

2. The Repatriation Medical Authority under subsection 196B(3) and (8) of the Veterans’ Entitlements Act 1986 (the VEA):
   (a) revokes Instrument No. 74 of 2001, as amended by Instrument No. 43 of 2002, concerning otitis externa; and
   (b) determines in their place this Statement of Principles.

Kind of injury, disease or death

3. (a) This Statement of Principles is about otitis externa and death from otitis externa.
(b) For the purposes of this Statement of Principles, "otitis externa" means infective or non-infective inflammation of the external auditory canal.

(c) Otitis externa attracts ICD-10-AM code H60, H62.0, H62.1, H62.2, H62.3 or H62.4.

(d) In the application of this Statement of Principles, the definition of "otitis externa" is that given at paragraph 3(b) above.

Basis for determining the factors

4. On the sound medical-scientific evidence available, the Repatriation Medical Authority is of the view that it is more probable than not that otitis externa and death from otitis externa can be related to relevant service rendered by veterans 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 exist before it can be said that, on the balance of probabilities, otitis externa or death from otitis externa is connected with the circumstances of a person’s relevant service is:

(a) swimming, diving or participating in other aquatic activities within the ten days before the clinical onset of otitis externa; or

(b) undergoing a course of therapeutic radiation to the head or neck region for cancer, within the two years before the clinical onset of otitis externa; or

(c) having received a cumulative equivalent dose of at least 20 sieverts of ionising radiation to the head or neck region within the two years before the clinical onset of otitis externa; or

(d) having trauma to the external ear canal of the affected ear within the ten days before the clinical onset of otitis externa; or

(e) having a foreign object or implement inserted into, or removed from, the external ear canal of the affected ear within the ten days before the clinical onset of otitis externa; or

(f) having a specified condition involving the external auditory canal of the affected ear at the time of the clinical onset of otitis externa; or
(g) having chronic suppurative otitis media of the affected ear within the one month before the clinical onset of otitis externa; or

(h) having diabetes mellitus at the time of the clinical onset of otitis externa; or

(i) being in an immunocompromised state at the time of the clinical onset of otitis externa; or

(j) having a narrowing or obstruction of the external auditory canal of the affected ear at the time of the clinical onset of otitis externa; or

(k) blocking the external auditory canal of the affected ear for an average of two hours per day, on more days than not, for the two weeks before the clinical onset of otitis externa; or

(l) for otomycosis only, using a course of oral antibiotic therapy or ototopical therapy for the treatment of otitis externa of the affected ear within the two weeks before the clinical onset of otomycosis; or

(m) swimming, diving or participating in other aquatic activities within the ten days before the clinical worsening of otitis externa; or

(n) undergoing a course of therapeutic radiation to the head or neck region for cancer, within the two years before the clinical worsening of otitis externa; or

(o) having received a cumulative equivalent dose of at least 20 sieverts of ionising radiation to the head or neck region within the two years before the clinical worsening of otitis externa; or

(p) having trauma to the external ear canal of the affected ear within the ten days before the clinical worsening of otitis externa; or

(q) having a foreign object or implement inserted into, or removed from, the external ear canal of the affected ear within the ten days before the clinical worsening of otitis externa; or

(r) having a specified condition involving the external auditory canal of the affected ear at the time of the clinical worsening of otitis externa; or

(s) having chronic suppurative otitis media of the affected ear within the one month before the clinical worsening of otitis externa; or

(t) having diabetes mellitus at the time of the clinical worsening of otitis externa; or

(u) being in an immunocompromised state at the time of the clinical worsening of otitis externa; or
(v) having a narrowing or obstruction of the external auditory canal of the affected ear at the time of the clinical worsening of otitis externa; or

(w) blocking the external auditory canal of the affected ear for an average of two hours per day, on more days than not, for the two weeks before the clinical worsening of otitis externa; or

(x) for otomycosis only, using a course of oral antibiotic therapy or ototopical therapy for the treatment of otitis externa of the affected ear within the two weeks before the clinical worsening of otomycosis; or

(y) inability to obtain appropriate clinical management for otitis externa.

Factors that apply only to material contribution or aggravation

7. Paragraphs 6(m) to 6(y) apply only to material contribution to, or aggravation of, otitis externa where the person’s otitis externa 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 narrowing or obstruction of the external auditory canal" means an occlusion or narrowing of the ear canal due to anatomical anomalies (for example, exostosis, stenosis, osteoma), cerumen build-up or foreign objects;

"a specified condition" means one of the following conditions:

(a) acne;
(b) allergic contact dermatitis;
(c) dermatomycosis;
(d) herpes simplex;
(e) herpes zoster;
(f) irritant contact dermatitis;
(g) neurodermatitis;
(h) psoriasis;
(i) relapsing polychondritis;
(j) sarcoidosis;
(k) seborrhoeic dermatitis;
(l) Sézary syndrome;
(m) Sjögren's syndrome; or
(n) systemic lupus erythematosus;

"an immunocompromised state" means a state where the immune response has been attenuated by administration of immunosuppressive drugs, ionising radiation, malnutrition, a malignant disease process or certain types of infection;

"blocking the external auditory canal" means wearing or using ear protection or devices which occlude the canal or create a seal over the ear, including:

(a) ear plugs;
(b) hearing aids;
(c) hearing protection ear muffs; or
(d) stethoscopes;

"chronic suppurative otitis media" means a recurrent or continuous infective disorder of the middle ear characterised by perforation of the tympanic membrane, long standing painless aural discharge and varying degrees of hearing loss;

"cumulative equivalent dose" means the total dose of ionising radiation received by the particular organ or tissue from external exposure, internal exposure or both, apart from normal background radiation exposure in Australia, calculated in accordance with the methodology set out in Guide to calculation of 'cumulative equivalent dose' for the purpose of applying ionising radiation factors contained in Statements of Principles determined under Part XIA of the Veterans' Entitlements Act 1986 (Cth), Australian Radiation Protection and Nuclear Safety Agency, as in force on 2 August 2017;

Note 1: Examples of circumstances that might lead to exposure to ionising radiation include being present during or subsequent to the testing or use of nuclear weapons, undergoing diagnostic or therapeutic medical procedures involving ionising radiation, and being a member of an aircrew, leading to increased levels of exposure to cosmic radiation.

Note 2: For the purpose of dose reconstruction, dose is calculated as an average over the mass of a specific tissue or organ. If a tissue is exposed to multiple sources of ionising radiation, the various dose estimates for each type of radiation must be combined.

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

"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
"other aquatic activities" means any activity where the external ear opening is submerged in water or prolonged pooling of water in the ear canal occurs. Such activities may include water sports, trekking through watercourses, prolonged exposure to heavy rains or being doused in water for lengthy periods;

"otomycosis" means a fungal infection of the external auditory canal;

Centre for Classification in Health, Sydney, NSW, and having ISBN 978 1 74210 154 5;
"relevant service" means:
(a) eligible war service (other than operational service) under the VEA;
(b) defence service (other than hazardous service and British nuclear test defence service) under the VEA; or
(c) peacetime 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;
"trauma to the external ear canal" means any injury affecting the integrity of the epithelium of the external ear canal by mechanisms, including thermal, electrical and chemical burns and blunt or penetrating trauma. This definition includes:
(a) surgical or medical procedures; or
(b) bites or stings from insects, mites, ticks or other arachnids.

Application

10. This Instrument applies to all matters to which section 120B of the VEA or section 339 of the MRCA applies.

Date of effect

11. This Instrument takes effect from 5 September 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.

Misdcribed 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 3—Legislation history

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### Endnote 4—Amendment history

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