

Statement of Principles concerning pilonidal sinus (Reasonable Hypothesis) (No. 27 of 2019)

made under subsection 196B(2) of the

Veterans' Entitlements Act 1986

Compilation No. 1

Compilation date: 20 December 2021

Includes amendments up to: Amendment Statement of Principles concerning

pilonidal sinus (Reasonable Hypothesis) (No.

115 of 2021) (F2021L01633)

The day of commencement of this Amendment Statement of Principles concerning pilonidal sinus is 20 December 2021.

Prepared by the Repatriation Medical Authority Secretariat, Brisbane

About this compilation

This compilation

This is a compilation of the *Statement of Principles concerning pilonidal sinus (Reasonable Hypothesis) (No. 27 of 2019)* that shows the text of the law as amended and in force on 20 December 2021.

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If a provision of the compiled law has been repealed in accordance with a provision of the law, details are included in the endnotes.

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1 Name

This is the Statement of Principles concerning *pilonidal sinus (Reasonable Hypothesis)* (No. 27 of 2019).

3 Authority

This instrument is made under subsection 196B(2) of the *Veterans' Entitlements Act 1986*.

5 Application

This instrument applies to a claim to which section 120A of the VEA or section 338 of the *Military Rehabilitation and Compensation Act 2004* applies.

6 Definitions

The terms defined in the Schedule 1 - Dictionary have the meaning given when used in this instrument.

7 Kind of injury, disease or death to which this Statement of Principles relates

(1) This Statement of Principles is about pilonidal sinus and death from pilonidal sinus.

Meaning of pilonidal sinus

- (2) For the purposes of this Statement of Principles, pilonidal sinus:
 - (a) means an inflammatory tissue reaction of the skin to an embedded hair which is manifested by the development of a sinus or fistula; and
 - (b) includes pilonidal cyst and pilonidal fistula; and
 - (c) excludes ingrown hair.

Note: Pilonidal sinus principally occurs in the sacrococcygeal region, but can also occur in the interdigital webs of the hands and in other regions of the body.

- (3) While pilonidal sinus attracts ICD-10-AM code L05, in applying this Statement of Principles the meaning of pilonidal sinus is that given in subsection (2).
- (4) For subsection (3), a reference to an ICD-10-AM code is a reference to the code assigned to a particular kind of injury or disease in *The International Statistical Classification of Diseases and Related Health Problems, Tenth Revision, Australian Modification* (ICD-10-AM),

Tenth Edition, effective date of 1 July 2017, copyrighted by the Independent Hospital Pricing Authority, ISBN 978-1-76007-296-4.

Death from pilonidal sinus

(5) For the purposes of this Statement of Principles, pilonidal sinus, in relation to a person, includes death from a terminal event or condition that was contributed to by the person's pilonidal sinus.

Note: *terminal event* is defined in the Schedule 1 – Dictionary.

8 Basis for determining the factors

The Repatriation Medical Authority is of the view that there is sound medical-scientific evidence that indicates that pilonidal sinus and death from pilonidal sinus 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 MRCA.

Note: MRCA, relevant service and VEA are defined in the Schedule 1 – Dictionary.

9 Factors that must exist

At least one of the following factors must as a minimum exist before it can be said that a reasonable hypothesis has been raised connecting pilonidal sinus or death from pilonidal sinus with the circumstances of a person's relevant service:

- (1) for pilonidal sinus of the hand or foot only:
 - (a) working as a hairdresser or barber within the six months before the clinical onset of pilonidal sinus; or
 - (b) having cutaneous exposure to animal hair within the six months before the clinical onset of pilonidal sinus;

Note: *having cutaneous exposure to animal hair* is defined in the Schedule 1 - Dictionary.

- (2) for pilonidal sinus of the sacrococcygeal region only:
 - (a) driving or being a seated passenger in a motorised vehicle for an average of at least 20 hours per week for a period of at least three months, within the six months before the clinical onset of pilonidal sinus; or
 - (aa) sitting on a hard or vibrating surface for an average of at least 20 hours per week for a period of at least three months, within the six months before the clinical onset of pilonidal sinus; or

(b) being overweight or obese within the six months before the clinical onset of pilonidal sinus;

Note: being overweight or obese is defined in the Schedule 1 - Dictionary.

- (3) for pilonidal sinus of the sacrococcygeal and umbilical regions only, inability to shower or bathe more than two times per week for a period of at least four weeks, within the six months before the clinical onset of pilonidal sinus;
- (4) for pilonidal sinus of the hand or foot only:
 - (a) working as a hairdresser or barber within the six months before the clinical worsening of pilonidal sinus; or
 - (b) having cutaneous exposure to animal hair within the six months before the clinical worsening of pilonidal sinus;

Note: *having cutaneous exposure to animal hair* is defined in the Schedule 1 - Dictionary.

- (5) for pilonidal sinus of the sacrococcygeal region only:
 - (a) driving or being a seated passenger in a motorised vehicle for an average of at least 20 hours per week for a period of at least three months, within the six months before the clinical worsening of pilonidal sinus; or
 - (aa) sitting on a hard or vibrating surface for an average of at least 20 hours per week for a period of at least three months, within the six months before the clinical worsening of pilonidal sinus; or
 - (b) being overweight or obese within the six months before the clinical worsening of pilonidal sinus;

Note: *being overweight or obese* is defined in the Schedule 1 - Dictionary.

- (6) for pilonidal sinus of the sacrococcygeal and umbilical regions only, inability to shower or bathe more than two times per week for a period of at least four weeks, within the six months before the clinical worsening of pilonidal sinus;
- (7) inability to obtain appropriate clinical management for pilonidal sinus.

10 Relationship to service

- (1) The existence in a person of any factor referred to in section 9, must be related to the relevant service rendered by the person.
- (2) The factors set out in subsections 9(4) to 9(7) apply only to material contribution to, or aggravation of, pilonidal sinus where the person's pilonidal sinus was suffered or contracted before or during (but did not arise out of) the person's relevant service.

11 Factors referring to an injury or disease covered by another Statement of Principles

In this Statement of Principles:

- (1) if a factor referred to in section 9 applies in relation to a person; and
- (2) that factor refers to an injury or disease in respect of which a Statement of Principles has been determined under subsection 196B(2) of the VEA;

then the factors in that Statement of Principles apply in accordance with the terms of that Statement of Principles as in force from time to time.

Schedule 1 - Dictionary

Note: See Section 6

1 Definitions

In this instrument:

being overweight or obese means having a Body Mass Index (BMI) of 25 or greater.

Note: **BMI** is also defined in the Schedule 1 - Dictionary.

BMI means W/H² where:

W is the person's weight in kilograms; and H is the person's height in metres.

having cutaneous exposure to animal hair means milking, shearing, grooming, clipping or slaughtering animals.

MRCA means the Military Rehabilitation and Compensation Act 2004.

pilonidal sinus—see subsection 7(2).

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.

Note: MRCA and VEA are also defined in the Schedule 1 - Dictionary.

terminal event means the proximate or ultimate cause of death and includes the following:

- (a) pneumonia;
- (b) respiratory failure;
- (c) cardiac arrest;
- (d) circulatory failure; or
- (e) cessation of brain function.

VEA means the *Veterans' Entitlements Act 1986*.

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

Div = Division(s)

o = order(s)
ad = added or inserted
Ord = Ordinance
am = amended
orig = original

 $amdt = amendment \\ par = paragraph(s)/subparagraph(s)$

c = clause(s) /sub-subparagraph(s)

C[x] = Compilation No. x pres = present Ch = Chapter(s) prev = previous def = definition(s) (prev...) = previously

Dict = Dictionary Pt = Part(s)

disallowed = disallowed by Parliament r = regulation(s)/rule(s)

exp = expires/expired or ceases/ceased to have reloc = relocated

effect renum = renumberedF = Federal Register of Legislation rep = repealed

gaz = gazette rs = repealed and substituted LA = Legislation Act 2003 s = section(s)/subsection(s)

LA = Legislation Act 2003 s = section(s)/subsection(s)

LIA = Legislative Instruments Act 2003 Sch = Schedule(s)
(md) = misdescribed amendment can be given Sdiv = Subdivision(s)

effect SLI = Select Legislative Instrument

(md not incorp) = misdescribed amendmentSR = Statutory Rulescannot be given effectSub-Ch = Sub-Chapter(s)mod = modified/modificationSubPt = Subpart(s)

No. = Number(s) <u>underlining</u> = whole or part not commenced or to be commenced

Endnote 3—Legislation history

Name	Registration	Commencement	Application, saving and transitional provisions
Statement of Principles	5 March 2019	25 March 2019	
concerning pilonidal sinus (Reasonable Hypothesis) (No. 27 of 2019)	F2019L00248		
Amendment Statement of	29 November 2021	20 December 2021	
Principles concerning pilonidal sinus (Reasonable Hypothesis) (No. 115 of 2021)	F2021L01633		

Endnote 4—Amendment history

Provision affected	How affected
Section 2	rep LA s 48D
Section 4	rep LA s 48C
Subsection 9(2)(aa)	ad No. 115 of 2021
Subsection 9(5)(aa)	ad No. 115 of 2021