


**NVLSP**  
NATIONAL VETERANS LEGAL SERVICES PROGRAM

# HOW TO REVIEW A RECORD AND READ A RATING DECISION



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## AGENDA

**PART I – Reviewing the Record**

- A. The Basics
- B. Categories of Records
- C. Developing the Record
- D. Lost Records and Remedies
- E. The Mechanics of Reviewing the Record
- F. Using VBMS and Other VA Systems

**PART II - Reading a Rating Decision**

- A. Parts of a Rating Decision
- B. Code Sheet and Notification Letter
- C. Requirements for AMA Rating Decisions

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# PART 1: REVIEWING THE RECORD

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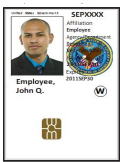
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### THE BASICS: ACCESS

- Accreditation
- POA – VA Form 21-22
- PIV Card = VBMS access through Citrix or Azure
- VA Regional Office contact for access: Local Change Management Agent



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### THE BASICS

**“The Record” – aka Claims File, C-File, efolder**

**All communications VA has sent to the claimant, everything claimant has sent VA, records/evidence VA has obtained, VA decisional documents, and internal VA communications/documents.**

**Think of them as grouped into the following categories....**



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### CATEGORIES OF RECORDS

- **Military Service**
  - Personnel Records - Official Military Personnel File (OMPF)
  - Service Treatment Records (STRs) / Service Medical Records (SMRs)
- **Post-Service Medical**
  - C&P Exam Reports / DBQs
  - VA Medical Opinions
  - CAPRI Records (VA treatment records)
  - Records used in making SSA disability benefit decisions
  - Records from government facilities (“Medical Treatment - Government Facility”)
  - Records of Private Treatment sent by Vet or obtained by VA (“Medical Treatment Non-Government Facility”)

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## CATEGORIES OF RECORDS

- **VA Communications - External (sent to claimant)**
  - Rating Decisions, Notification Letter, Code Sheet (only sent to reps)
  - Requests for Information or Application
  - General Information (examples: Service Disability Insurance Letter, Tax Abatement Letter)
- **VA Communications – Internal (not sent to claimant)**
  - Draft Decision Letters, Award Prints, VA Form 8 (legacy)
  - Record requests to other VA offices/orgs, DOD, or government agencies
  - TERA memos, ILER findings, RAR (formerly MRRC, JSRRC) memos/reports

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## CATEGORIES OF RECORDS

- **Claimant Communications (To VA)**
  - Benefits applications, review requests (AMA), legacy appeal documents (NOD, Form 9)
  - Lay statements, pictures,
  - Medical or historical articles, medical treatises
  - Anything Vet sends to VA will be in the file
- **Records NOT usually in Claims File (but should be requested/added where appropriate)**
  - Court martial transcripts
  - National Guard and Reserve records (unless claim involves ADT or IADT)
  - Vet Center records (important for COD determinations, b/c can have OTH and still get treatment there)
  - Military unit records
  - Archived VAMC records

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## DEVELOPING THE RECORD CLAIMANT/VSO RESPONSIBILITIES

- **Adequately identify records VA needs to request**
- **Respond to VA requests for records in a timely fashion**
- **Complete necessary forms authorizing release of records**
- **Submit evidence needed to support the claim**



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## DEVELOPING THE RECORD VA DUTIES - 38 C.F.R. § 3.159



NATIONAL ARCHIVES

- **Requesting Federal Records**
  - VA will make as many requests as necessary to obtain relevant records from a Federal dep't or agency until VA concludes that the records sought don't exist or that further efforts to obtain those records would be futile
- **Requesting Private (non-Federal) Records**
  - VA must make "reasonable efforts" to obtain private records (generally 2 attempts – initial request and follow-up)

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
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## DEVELOPING THE RECORD- IMPORTANCE

- **During the AMA review process, there are limitations on the submission of evidence:**
  - Whether evidence can be submitted (no evidence in HLR or BVA direct review)
  - When evidence can be submitted (90-day windows for BVA evidence and hearing lanes)
- **Submitting evidence to VA before decision on initial or supplemental claim, or during BVA evidence submission window is vital to the claim**



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## ADDING TO THE RECORD

- **Info from VA systems that might not be readily accessible in claims file. Ex: JLV or MHS Genesis**
- **Medical Treatises/Articles (because VA examiners must consider them)**
- **Lay Statements! Good for continuity of symptoms**
- **Docs VA will not automatically request on its own (NG records, Court Martial, etc.)**
- **BVA Case Reminder: Sometimes you need to resubmit docs already in the record because of AMA evidence submission rules**
  - Ex: Evidence submitted after rating decision but before BVA hearing should be resubmitted w/in 90 days after hearing

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### ADDING TO THE RECORD - TIPS

- **OCR any docs a Vet may send you to look for key info (good when you have a lot of electronic or scanned records to sort through)**
- **Don't add unnecessary info, this just makes it harder for VA to sort through**
- **Use QuickSubmit for submission**



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### LOST RECORDS - REASONS

1. **NPRC Fire 7/12/1973** – destroyed 16-18 million OMPFs
  - Army: Personnel discharged 11/1/1912 to 1/1/1960 ~80% destroyed
  - Air Force: Personnel discharged 9/25/1947 to 1/1964 (with names alphabetically after Hubbard, James E.) ~ 75% destroyed
2. **RO Shredding** – VA OIG investigations found that ROs improperly processed or shredded documents submitted by claimants from 4/2007 – 10/2008 and in 2015. Improper handling / shredding likely occurred beyond those dates.
3. **Physical Private Medical Records** – Usually destroyed after 5-10 yrs
4. **Archived VAMC Records** – VHA completed the transition to electronic recordkeeping at all VAMCs in late 2004. Records before that time were archived. Good luck getting these.

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### TRUE OR FALSE

**When VA determines that a veteran's personnel records are lost, the claimant's evidentiary burden for establishing entitlement to benefits is relaxed.**



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## TRUE OR FALSE

### FALSE

VA's duty to assist in obtaining records is heightened when federal records are lost or destroyed, but the claimant's evidentiary burden for establishing entitlement is not relaxed.

- *Jandreau v. Nicholson*, 492 F.3d 1372 (Fed. Cir. 2007)



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## LOST RECORDS - REMEDIES

- **Make sure VA met its Duty to Assist**
  - How many times did VA request the records? Were the requests submitted to the correct place? Is there an official finding that records don't exist and proper notification per 38 C.F.R. § 3.159(e)?
- **Submit Own Records or make own request if possible (Esp. for National Guard and Reserve Records)**
- **Look at CAPRI Tabs if archived VAMC records are lost, to see old appointment data (more on that later)**
- **Tell VA if claimant knows a record doesn't exist, so VA doesn't keep asking**
- **Competent, credible lay statements are even more important in these types of cases**

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## LOST (AND FOUND) RECORDS

- **Ensure VA applies 38 C.F.R. § 3.156(c) when assigning the effective date**
  - If relevant official service dep't records are added to c-file after denial of a claim, and they existed at time of the denial, VA must reconsider the denied claim (even if benefits have already been awarded based on a later claim)
    - Effective date based on date of claim that was denied
- **Doesn't apply** to records that VA could not have obtained when it decided the claim because the records did not exist at that time, or because the claimant failed to provide sufficient info for VA to identify and obtain the records from the respective service dep't or other official source.

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### CASE STUDY

**WHY IT'S IMPORTANT TO REVIEW THE RECORD**

- Vet served in Army from 1968-70 with service in Vietnam
- STRs included a handwritten diagnoses of schizophrenia
- Vet filed VA claim within one year of separation – “my head isn’t right”
- VA denied SC benefits for a mental health condition in 1971, finding no diagnosed disability and failing to note in-service dx of schizophrenia
- Vet wrote in multiple statements that his symptoms started in-service

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### CASE STUDY

- Between 1978 and 2019, Vet applied for VA comp for various mental health conditions including PTSD, schizophrenia, anxiety. VA denied claims, despite confirmed diagnoses, each time failing to note the in-service schizophrenia dx.
- Finally, Vet granted SC for PTSD at 50% in 2020, retroactive to date of 2019 claim
- New representative’s review of STRs identified the handwritten diagnosis of schizophrenia
- Rep filed successful CUE claim, resulting in SC for schizophrenia being awarded retro to 1970

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### REVIEWING THE RECORD

- **What (likely) happened?**
  - After the first VA adjudicator missed the schizophrenia dx in the STRs, later VA adjudicators relied on and repeated the factual findings in the prior rating decisions, without looking at the STRs
- **Lesson:**
  - Never assume VA did their homework. Talk to the Vet in order to determine what may be in the record that VA missed and conduct your own review of the record. Don’t rely of recitation of facts in VA decisional documents.

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### STARTING A RECORD REVIEW THE BASICS

- How you approach a record review is going to depend on where the claimant is in the claims process
- Reviewing a record for a claimant who has never filed a VA claim is different from a record review when VA has just denied the Vet's claim
- Keeping the above in mind, the following slides provide some approaches and considerations for reviewing a record...



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### STARTING A RECORD REVIEW OVERVIEW

- Determine where claimant is in the VA process and determine any upcoming **DEADLINES**
- Determine whether claim has been **filed before**
- Identify **missing records** that should be in the record (VA treatment records, STRs, military personnel records)
- Identify records that can be added to support the claim
- Review VA's findings.....



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### STARTING A RECORD REVIEW THE BASICS

- **Name** – Note changes. Ask Vet about maiden name, married names, etc. This is important if you are reviewing VA record requests or making your own records request
- **DOB** – For expedition/AOD, eligibility for pension w/o P&T disability, etc.
- **Ask about NG/Reserve Records** – Look for Points Document to determine dates of ADI/IADT (“Veteran” status if current disability linked to injury or disease incurred in ADT, or injury during IADT)
- **Personnel Record/Military Service Tab in VBMS (for locations and dates of service)** – Relevant for some SC presumptions, combat “presumption,” PTSD stressors, etc. (DD Form 214 will have most of this info, but not always correct/complete)
- **Contact Information** – To confirm VA has the correct address for notification letters

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## STARTING A RECORD REVIEW WHERE AM I?

**Review**

- All RDs and code sheets, decision review requests, and benefits applications issued/filed within past year**
  - Will help you determine current ratings, pending claims, urgent deadlines, reasons for denial
  - Ex: Vet may not understand that 0% means SC or the reason for a denial, so can't depend what they tell you
- Extend search of RDs and claims to determine whether Vet previously claimed or was denied benefits for a disability for which Vet now seeks benefits**

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## STARTING A RECORD REVIEW WHERE AM I?

- \*Create timeline while reviewing\***
  - Start at newest doc, otherwise you could be reviewing years of claims hx just to find out 3 years ago, claimant never sought review
  - Will help establish correct effective dates (ex: up to 1 year prior to claim for increase if there is evidence of increase in severity in that year)
  - Look at **date stamp** (physical or electronic) on the document to determine when received by VA
  - If VA scanned the envelope, and the submission is associated with a **BVA appeal, look at the postmark date**
    - BVA will accept the postmark date as the date of submission of a document, if there is a time limit for filing the document
    - If no postmark is of record, BVA will presume the postmark date is 5 days before the date VA received the document, excluding weekends and legal holidays
    - 38 C.F.R. § 20.110(a)

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## STARTING THE RECORD REVIEW WHAT DO I NEED?

- After initial review, dive deeper into the evidence to determine:**
  - Theories of service connection
  - What elements need to be established
  - Favorable findings (AMA)
- Then ask**
  - What evidence do I have?
  - What evidence do I need?




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## STARTING THE RECORD REVIEW EVIDENCE OF THE ELEMENTS

- **In-Service Injury/Disease/Event**
  - STRs (may not include hospital records), especially exit exam reports, reports of medical hx, and post-deployment surveys
  - Personnel records, such as those showing service in in a location where toxic exposure is presumed makers of personal assault
  - Lay statements
- **Current Diagnosis**
  - C&P exam reports, private treatment records, CAPRI/VATRs
  - Is it a chronic condition, with symptoms “noted” or dx in service?
  - If no current dx, has Vet reported symptoms?
- **Nexus**
  - Private and VA medical opinions
  - Is a nexus needed? (presumptive disease, chronic condition)

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## HYPO

Vet has a current dx of carpal tunnel syndrome, which is a chronic condition under 38 C.F.R. § 3.309 (“other organic diseases of the nervous system”) but there is no clear in-service diagnosis. In fact, the Vet was not formally diagnosed until 2 years after separation.

You know the Vet can establish SC by showing that the condition was “noted” in service or the first post-service year and there was continuity of symptoms since. Which of the following records should you review to see if the condition was “noted” in service?

- A. Symptoms in STRs
- B. Post-service private treatment records
- C. Post-service lay statements about in-service symptoms
- D. All of the above
- E. Only A & B

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## HYPO - ANSWER



- **There is no definition of “noted” in VA regs, but it could include:**
  - Symptoms or complaints listed in STRs
  - Condition not diagnosed beyond legitimate question as a chronic condition listed in § 3.309
  - Retrospective post-service statement about symptoms experienced in service or the first year post-service (if found credible by VA)

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## STARTING THE RECORD REVIEW EVIDENCE OF THE ELEMENTS

- **Can't find official records/documents? Look for lay statements that satisfy the element or point you to official records/documents**
- **Claimant's testimony can be found in:**
  - Claim forms ex: "Back pain from parachuting over 50 times"
  - History section of exam reports/DBQs or descriptions in treatment records Ex: "Vet says she's walked with a limp since broken ankle in service. On appearance, Vet limps and uses cane."
  - Hearing transcript
  - Review request forms



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## REVIEWING THE RECORD - TIPS

- **CAPRI Records:** Check VBMS to identify the facilities and years for which VA requested and received VA treatment records; sometimes VA hasn't request all records or recent records haven't been added
- **Non-C&P cases:** If assisting with a case not involving disability comp or pension (ex: Education, VHA), relevant docs may not be in VBMS. Files from that VA organization/office are typically only uploaded to VBMS after the claimant appeals the initial denial

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## REVIEWING THE RECORD MEDICAL ABBREVIATIONS

<ul style="list-style-type: none"> <li>• ABD – abdominal</li> <li>• Ass or A – assessment (a lesser degree of certainty than "diagnosis")</li> <li>• c – with</li> <li>• c/o – complaints of</li> <li>• dx – diagnosis</li> <li>• f/u – follow up</li> <li>• fx – fracture</li> <li>• GSW – gunshot wound</li> <li>• HEENTC – head, eyes, ears, nose, throat, chest</li> <li>• hx – history</li> <li>• Imp or I – impression (examiner's identification of the condition after exam and review of medical hx, sometimes considered a "working" dx)</li> <li>• LBP – lower back pain</li> </ul>	<ul style="list-style-type: none"> <li>• NKA – no known allergies</li> <li>• PRN – as needed</li> <li>• r/o – rule out (the diagnosis is being considered by the examiner, but further clinical assessment is needed to confirm that diagnosis)</li> <li>• ROM – range of motion</li> <li>• RTC – return to clinic</li> <li>• RUQ – right upper quadrant</li> <li>• rx – prescription</li> <li>• s/o – suggestive of</li> <li>• SOAP – subjective, objective, assessment, plan</li> <li>• s/p – status post</li> <li>• URI – upper respiratory infection</li> <li>• WNL – within normal limits</li> <li>• (-) – negative for</li> </ul>
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## SEARCH TERMS EXAMPLES

- “Certificate” – DD Form 214
- “Narrative” “Code” “Notification” – Rating Decision, Code Sheet, Notification Letter
- “Government” – Medical records are often labeled as “Medical Treatment Record-Government Facility” (or “Non-Government Facility”)
- “Correspondence” – Very general and sometimes a catch-all term
- “Examination” – Older C&P exams may be labeled as ‘VA Examination’

**\*Be Creative: you might consider a text search for “ringing” as opposed to tinnitus**

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## PRACTICAL TIPS - TEXT SEARCH FUNCTION

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## PRACTICAL TIPS - TEXT SEARCH FUNCTION

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## REVIEWING THE RECORD USING VBMS APPS

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### VBMS APPLICATIONS - OVERVIEW

- **Caseflow** – Meant to replace VACOLS, provides functionality to the BVA and other VA orgs/stakeholders to enable the processing and tracking of appeals and related processes
- **eFolder Express** – part of Caseflow that allows a user to bulk-download documents from a Vet's eFolder (electronic folder)
- **CAPRI (Compensation and Pension Record Interchange)** – Holds records from VAMCs and allows for efficient communication between the VHA and VBA. Electronic records started in 2005.

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### VBMS APPLICATIONS - OVERVIEW

- **SHARE** – Utilized by ROs to access info such as: the Beneficiary Inquiry Records Locator System (BIRLS), Pending Issue File (PIF), and Payment History File (PHF)
- **VACOLS (Veterans Appeals Control and Locator)** – Database for tracking legacy appeals and monitoring pending workloads maintained by BVA

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## VBMS APPS - CASEFLOW

All cases: Unassigned (3) Assigned (0) Completed

All AMA cases represented by American Red Cross that have been active at the Board of Veterans' Appeals in the past 2 weeks.

Viewing 1 - 15 of 38 total

Case Details	Issues	Types	Docket
Names (File Number)	1	ADD, Original	<input type="checkbox"/> Direct Review (13)
	3	Original	<input type="checkbox"/> Evidence (7)
	0	Original	<input type="checkbox"/> Hearing (16)
	3	Original	<input type="checkbox"/> Legacy (4)
	5	Original	
	2	Original	
	4	Original	

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## VBMS APPS - CASEFLOW

Issues

1. **Benefit type** Veterans Health Administration  
Name: Campaign: Eligibility - PSCAC  
Special Issues: None

**Appellant's Power of Attorney**

To retrieve the latest POA information, please click the "Refresh POA" button. POA last refreshed on 9/19/2025

**Service Organization:** AMERICAN RED CROSS

Power of Attorney (POA) also comes from VBMS. To update the POA information stored in VBMS, please send a task to the IJ support management group.

**About the Veteran**

Name: [REDACTED]  
Gender: [REDACTED]  
Date of Birth: [REDACTED]  
Mailing Address: [REDACTED]  
Email Address: [REDACTED]

VBMS information comes from VBMS. In order for without information, please email or request for the IJ support desk.

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## VBMS APPS - CASEFLOW / EFOLDER EXPRESS

Welcome to eFolder Express

eFolder Express allows VA employees to bulk download VBMS e-folders. Search for a Veteran ID number below to get started.

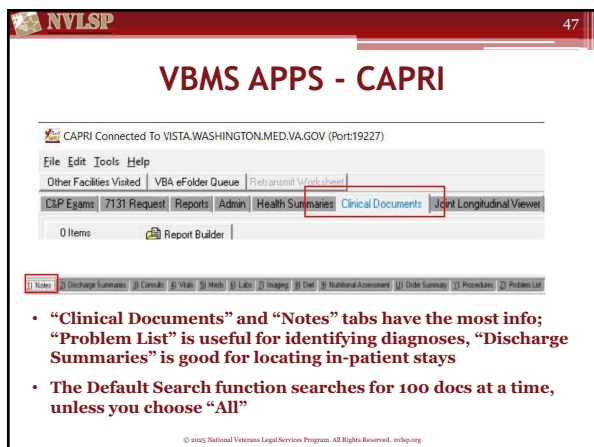
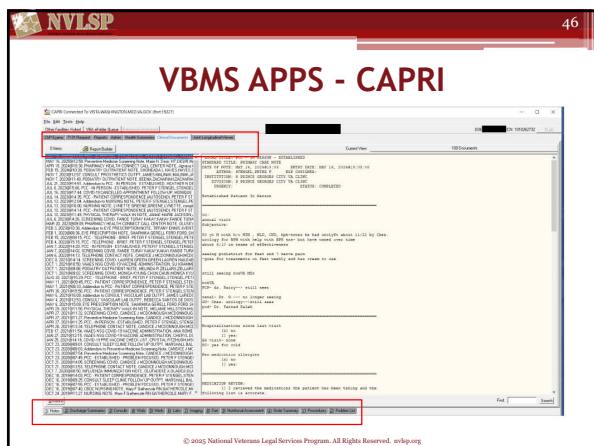
Note: eFolder Express now includes Virtual IR documents from the Legacy Content Manager Documents tab in VBMS.

[Recent downloads...](#)

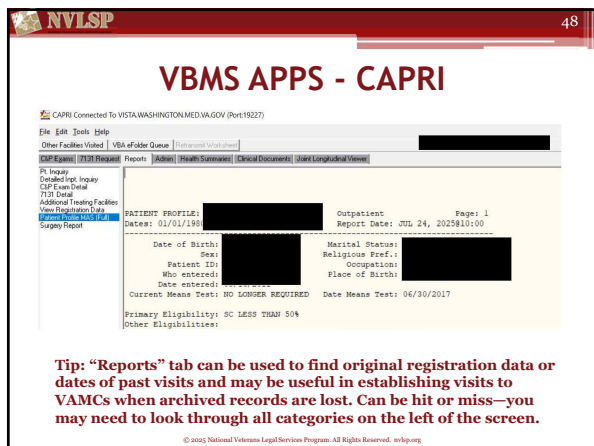
**Provides ability to download of all of Vet's documents in the c-file into a Zip file (document names are hard to read)**

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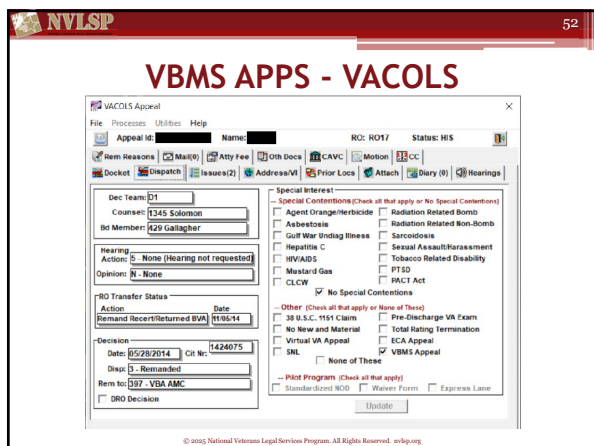
- “Clinical Documents” and “Notes” tabs have the most info; “Problem List” is useful for identifying diagnoses, “Discharge Summaries” is good for locating in-patient stays
- The Default Search function searches for 100 docs at a time, unless you choose “All”



Tip: “Reports” tab can be used to find original registration data or dates of past visits and may be useful in establishing visits to VAMCs when archived records are lost. Can be hit or miss—you may need to look through all categories on the left of the screen.








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**RECAP ON USING VA APPS TO REVIEW THE RECORD**

- **SHARE** – useful for viewing payment info which can be helpful for determining retro awards, monthly amounts, and overpayments
- **CAPRI** – to confirm all pertinent medical records are in the VBMS eFolder
- **Caseflow and VACOLS** – provide more info on status of appeals
- **E-Folder Express** – useful if you have trouble accessing VBMS or you need a copy of all docs in a single file

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# PART II. READING A RATING DECISION

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**NVLSP** 55

## PARTS OF A RATING DECISION

- Introduction
- Decision
- Evidence
- Reasons for decision
- References

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## RATING DECISION



DEPARTMENT OF VETERANS AFFAIRS  
Veterans Benefits Administration  
Regional Office

VA File Number  
[REDACTED]

Regulation for  
AMERICAN RED CROSS  
Rating Decision

INTRODUCTION


The records reflect that you are a Veteran of the Peace-time. You served in the Army from June 2, 1981 to June 1, 1984. We received your supplemental claim on April 17, 2025. Based on a review of the evidence listed below, we have made the following decision(s) on your claim.

DECISION

Evaluation of bilateral hearing loss, which is currently 10 percent disabling, is increased to 30 percent effective April 17, 2025.

EVIDENCE

- VA Form 20-0995, Decision Review Request - Supplemental Claims, received April 17, 2025
- Service Treatment Records, for the period June 2, 1981 to June 1, 1984
- VAMC (Veterans Affairs Medical Center) treatment records, for the period September 19, 2024 to May 5, 2025
- VA Form 27-0820, Report of General Information, received May 15, 2025
- C&P Exam, LHH, DBQ AUDIO Hearing loss and tinnitus, conducted June 04, 2025



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## PARTS OF A RATING DECISION

**INTRODUCTION**

The records reflect that you are a Veteran of the Peace-time. You served in the Army from June 2, 1981 to June 1, 1984. We received your supplemental claim on April 17, 2025. Based on a review of the evidence listed below, we have made the following decision(s) on your claim.

**DECISION**

Evaluation of bilateral hearing loss, which is currently 10 percent disabling, is increased to 30 percent effective April 17, 2025.

**EVIDENCE**

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## AMA REQUIREMENTS FOR RO DECISIONS

- 5. For denied claims, identification of the claim elements that were not met**
- 6. If applicable, identification of the criteria required to grant service connection or the next higher level of compensation**
- 7. An explanation of how to obtain or access evidence used in making the decision**
- 8. A summary of the options available for the claimant to seek further review of the decision**

- 38 U.S.C. § 5105(b); 38 C.F.R. § 3.103(f); *Cowan v. McDonough*, 35 Vet. App. 232, 244 (2022)

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## AMA REQUIREMENTS FOR RO DECISIONS

### #1 IDENTIFICATION OF THE ISSUES ADJUDICATED

DECISION

1. Entitlement to individual unemployability is denied.
2. Service connection for posttraumatic stress disorder (PTSD) is denied.
3. The previous denial of service connection for bilateral hearing loss is confirmed and continued.
4. The previous denial of service connection for tinnitus (previously rated as ringing in ears) is confirmed and continued.

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## AMA REQUIREMENTS FOR RO DECISIONS

### #2 SUMMARY OF THE EVIDENCE CONSIDERED BY VA

EVIDENCE

- VA Form 21-526 EZ: Application for Disability Compensation and Related Compensation Benefits, received December 15, 2014.
- Service Treatment and Personnel Records received April 9, 2015, for the period December 1968 to December 1970.
- Rating Decision, dated June 24, 2015.
- Electronic Intim to File, received August 25, 2023.
- VA Form 21-526 EZ: Application for Disability Compensation and Related Compensation Benefits, received September 1, 2023.
- VA Form 21-8940, Veteran's Application For Increased Compensation Based On Unemployability, received September 1, 2023.
- VA Form 21-0703a, Statement in Support of Claim For Service Connection For Post-Traumatic Stress Disorder (PTSD) Secondary To Personal Trauma, received September 1, 2023.
- VA Form 21-4138, Statement in Support of Claim, received September 1, 2023.
- VA Form 20-0995, Decision Review Request: Supplemental Claim, received September 14, 2023.
- VA Form 21-4138, Statement in Support of Claim, received September 14, 2023.
- VA Letter Concerning Your Claim, dated September 21, 2023.
- Initial PTSD Disability Benefits Questionnaire, VES contractor, conducted October 9, 2023.
- VA Form 21-4138, Statement in Support of Claim, received October 17, 2023.
- Hearing loss and tinnitus Disability Benefits Questionnaire, QTC contractor, conducted November 6, 2023.
- Toxic Exposure Risk Activity (TERA) memorandum, dated November 22, 2023.
- Rating Decision, dated November 22, 2023.
- Social Security Administration Records, received December 6, 2023.
- Medical Opinion Disability Benefits Questionnaire, QTC contractor, conducted December 12, 2023.
- Valley Coastal Bend VAMC (Veterans Affairs Medical Center) treatment records, for the period December 19, 2018 to December 27, 2023.

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## AMA REQUIREMENTS FOR RO DECISIONS

### #3 SUMMARY OF THE APPLICABLE LAWS AND REGULATIONS

**8. Service connection for left shoulder strain (claimed as bilateral arms).**

Service connection may be granted for a disability which began in military service or was caused by some event or experience in service. (38 CFR 3.303)

A direct grant of service connection requires: 1) medical evidence of a current disability, 2) evidence of the incurrence or aggravation of a disease or injury in active military service, and 3) medical evidence of a nexus (link) between the current disability and the in-service disease or injury. (38 CFR 3.303, 38 CFR 3.304)

The evidence does not show an event, disease or injury in service. Your service treatment records do not contain complaints, treatment, or diagnosis for this condition. There was no continuity of symptoms from service to the present. We did not find a link between your medical condition and military service. (38 CFR 3.303, 38 CFR 3.304)

Service connection for left shoulder strain is denied since this condition neither occurred in nor was caused by service. (38 CFR 3.303, 38 CFR 3.304)

Favorable Findings identified in this decision:  
You have been diagnosed with a disability. VA contract examination conducted on June 21, 2024 confirms a current diagnosis of left shoulder strain.

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## AMA REQUIREMENTS FOR RO DECISIONS

### #3 SUMMARY OF THE APPLICABLE LAWS AND REGULATIONS

Laws and regulations applicable to this issue:

- 38 CFR 83.1 Definitions.
- 38 CFR 83.102 Reasonable doubt.
- 38 CFR 83.103 Procedural due process and appellate rights.
- 38 CFR 83.105 Revision of decisions.
- 38 CFR 83.151 Claims for disability benefits.
- 38 CFR 83.155 How to file a claim.
- 38 CFR 83.159 Department of Veterans Affairs assistance in developing claims.
- 38 CFR 83.321 General rating considerations.
- 38 CFR 83.340 Total and permanent total ratings and unemployability.
- 38 CFR 83.341 Total disability ratings for compensation purposes.
- 38 CFR 83.344 Continuance of total disability rating.
- 38 CFR 83.355 Determinations of incompetency and competency.
- 38 CFR 83.400 Effective Date - General.
- 38 CFR 83.2500 Review of decisions.
- 38 CFR 84.1 Essentials of evaluative rating.
- 38 CFR 84.2 Interpretation of examination reports.
- 38 CFR 84.3 Resolution of reasonable doubt.
- 38 CFR 84.6 Evaluation of evidence.
- 38 CFR 84.7 Higher of two evaluations.
- 38 CFR 84.15 Total disability ratings.
- 38 CFR 84.16 Total disability ratings for compensation based on unemployability of the individual.
- 38 CFR 84.18 Unemployability.
- 38 CFR 84.19 Age in service-connected claims.
- 38 CFR 84.125 Diagnosis of mental disorders.
- 38 CFR 84.126 Evaluation of disability from mental disorders.
- 38 CFR 84.130 Schedule of ratings—Mental disorders.

From a July 2025 Rating Decision, not previously included as a list

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## AMA REQUIREMENTS FOR RO DECISIONS

### #4 LISTING OF FAVORABLE FINDINGS

**8. Service connection for left shoulder strain (claimed as bilateral arms).**

Service connection may be granted for a disability which began in military service or was caused by some event or experience in service. (38 CFR 3.303)

A direct grant of service connection requires: 1) medical evidence of a current disability, 2) evidence of the incurrence or aggravation of a disease or injury in active military service, and 3) medical evidence of a nexus (link) between the current disability and the in-service disease or injury. (38 CFR 3.303, 38 CFR 3.304)

The evidence does not show an event, disease or injury in service. Your service treatment records do not contain complaints, treatment, or diagnosis for this condition. There was no continuity of symptoms from service to the present. We did not find a link between your medical condition and military service. (38 CFR 3.303, 38 CFR 3.304)

Service connection for left shoulder strain is denied since this condition neither occurred in nor was caused by service. (38 CFR 3.303, 38 CFR 3.304)

Favorable Findings identified in this decision:  
You have been diagnosed with a disability. VA contract examination conducted on June 21, 2024 confirms a current diagnosis of left shoulder strain.

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## QUESTIONS?



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