#### Department of Veterans Affairs M21-1, Part III, Subpart iv

**Veterans Benefits Administration July 22, 2015**

**Washington, DC 20420**

#### Transmittal Sheet

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| Changes Included in This Revision | The table below describes the changes included in this revision of Veterans Benefits Manual M21-1, Part III, “General Claims Process,” Subpart iv, “General Rating Process.”  ***Note***: Minor editorial changes have also been made to   * update incorrect or obsolete references * update obsolete terminology, where appropriate * clarify block labels and/or text, and * bring the document into conformance with M21-1 standards. |

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| Reason(s) for the Change | Citation |
| To add procedural guidance for evaluating genu recurvatum including notes that   * when rating genu recurvatum under diagnostic code 5263, a separate rating under diagnostic code (DC) 5261(limitation of extension of knee) is not permitted * a separate rating is permitted under other evaluations, if manifestations are not overlapping, such as under DC 5260 (limitation of flexion of knee), and * if genu recurvatum manifests instability at the moderate or severe level, then evaluate under DC 5263-5257. | M21-1, Part III, Subpart iv, Chapter 4, Section A, Topic 3, Block f  (III.iv.4.A.3.f) |

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| Rescissions | None |

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| Authority | By Direction of the Under Secretary for Benefits |

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| Signature | Thomas J. Murphy, Director  Compensation Service |

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