## Section J. Skin Conditions

#### Overview

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| In This Section | This section contains the following topics: |

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| Topic | Topic Name |
| 1 | Rating Scars or Other Disfigurement of the Head, Face, or Neck |
| 2 | Rating Painful Scars |
| 3 | Rating Specific Skin Conditions |

#### 1. Rating Scars or Other Disfigurement of the Head, Face, or Neck

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| Introduction | This topic contains information on rating scars or other disfigurement of the head, face, or neck, including   * considering color photographs in evaluating scars or other disfigurement * evaluating multiple scars, and * evaluating tissue loss of the auricle, anatomical loss of the eye, and other disabling effects. |

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| a. Considering Color Photographs in Evaluating Scars or Other Disfigurement | When color photographs accompany an examination of a scar or skin condition, consider the photographs when evaluating the condition. If color photographs do not accompany an examination, evaluate the scar or other skin condition based on the physical examination findings.  ***Important***: Do *not* return the examination as insufficient due to the absence of color photographs. |

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| b. Evaluating Multiple Scars | Scars of the head, face, or neck are evaluated based on characteristics of disfigurement. For all characteristics of disfigurement included in [38 CFR 4.118, diagnostic code (DC) 7800](http://www.ecfr.gov/cgi-bin/text-idx?SID=3448d4d006e9807a14305759baa1ccc8&node=se38.1.4_1118&rgn=div8) that are evaluated based on size of area affected, the area affected by multiple scars may be added together to meet the total area criteria for the characteristic of disfigurement. The characteristics of disfigurement criteria that can be met by adding the area affected by multiple scars include   * length * hypo- or-hyper-pigmentation * abnormal skin texture * absence of underlying soft tissue, and * induration or inflexibility.   ***Exception***: Multiple scars may ***not*** be added together to meet the width of scarring requirement.  ***References***: For additional information about   * evaluating multiple scars, see [38 CFR 4.118, DC 7804](http://www.ecfr.gov/cgi-bin/text-idx?SID=3448d4d006e9807a14305759baa1ccc8&node=se38.1.4_1118&rgn=div8), and * multiple burn scars, see * [38 CFR 4.118, DC 7801](http://www.ecfr.gov/cgi-bin/text-idx?SID=3448d4d006e9807a14305759baa1ccc8&node=se38.1.4_1118&rgn=div8), Note 2, and * [38 CFR 4.118, DC 7802](http://www.ecfr.gov/cgi-bin/text-idx?SID=3448d4d006e9807a14305759baa1ccc8&node=se38.1.4_1118&rgn=div8), Note 2.   ***Examples***:   * Two scars, one measuring two inches in length and the other measuring three inches in length, may be combined to meet the requirement of a scar five inches or more in length to qualify as a characteristic of disfigurement. * In contrast, two scars, one measuring .13 inches in width and the other measuring .12 inches in width, may not be combined to meet the requirement of a scar at least one-quarter inch wide at the widest part. |

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| c. Evaluating Tissue Loss of the Auricle, Anatomical Loss of the Eye, and Other Disabling Effects | Evaluate tissue loss of the auricle under [38 CFR 4.87, DC](http://www.ecfr.gov/cgi-bin/text-idx?SID=3448d4d006e9807a14305759baa1ccc8&node=se38.1.4_187&rgn=div8)  [6207](http://www.ecfr.gov/cgi-bin/text-idx?SID=3448d4d006e9807a14305759baa1ccc8&node=se38.1.4_187&rgn=div8), and anatomical loss of the eye under [38 CFR 4.79, DC 6061 or 6063](http://www.ecfr.gov/cgi-bin/text-idx?SID=3448d4d006e9807a14305759baa1ccc8&node=se38.1.4_179&rgn=div8),  as appropriate.  When the evidence of record shows disabling effects other than  disfigurement, such as pain, instability, or muscle/nerve injury, separately  evaluate under the appropriate DC based on the functional impairment shown  by the record.  ***Reference***: For more information on evaluating scars and what qualifies as a characteristic of disfigurement, see [38 CFR 4.118](http://www.ecfr.gov/cgi-bin/text-idx?SID=3448d4d006e9807a14305759baa1ccc8&node=se38.1.4_1118&rgn=div8). |

#### 2. Rating Painful Scars

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| Introduction | This topic contains information on rating painful scars, including   * assigning a separate disability evaluation for functional impairment due to a painful scar * considering scar tenderness as evidence of pain * definition of an unstable scar, and * evaluating unstable and painful scars. |

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| **a. Assigning a Separate Disability Evaluation for Functional Impairment Due to a Painful Scar** | A separate disability evaluation for a painful scar under [38 CFR 4.118, DC 7804](http://www.ecfr.gov/cgi-bin/text-idx?SID=957928142474523656b12619c9067a49&mc=true&node=se38.1.4_1118&rgn=div8), may be assigned when the evidence demonstrates functional impairment that is   * distinct and separate from the functional impairment addressed by another DC, and is not * duplicative of or overlapping with the symptomatology addressed under another DC.   ***Example***: A separate 10 percent evaluation for disfigurement under [38 CFR 4.118, DC 7800](http://www.ecfr.gov/cgi-bin/text-idx?SID=957928142474523656b12619c9067a49&mc=true&node=se38.1.4_1118&rgn=div8), may be assigned in addition to a 10 percent evaluation for painful scars under [38 CFR 4.118, DC 7804](http://www.ecfr.gov/cgi-bin/text-idx?SID=957928142474523656b12619c9067a49&mc=true&node=se38.1.4_1118&rgn=div8), and a 10 percent evaluation for facial injury interfering with mastication under [38 CFR 4.73, DC 5325](http://www.ecfr.gov/cgi-bin/text-idx?SID=1e74586da6b31d65c7de6f6d54aa0b09&mc=true&node=se38.1.4_173&rgn=div8) as each evaluation is based on distinct and separate functional impairment and, therefore, provisions related to pyramiding are not violated.  ***Note***: An evaluation under DC 7800 is entirely cosmetic in nature.  ***References***: For more information on   * assigning a separate disability evaluation for functional impairment due to a painful scar, see [*Esteban v. Brown*](http://vbaw.vba.va.gov/bl/21/advisory/CAVCDAD.htm#bme)**,** 6 Vet.App. 259 (1994) * evaluating scars in the presence of muscle conditions, see M21-1, Part III, Subpart iv, 4.A.11.l, and * pyramiding, see * [38 CFR 4.14](http://www.ecfr.gov/cgi-bin/text-idx?SID=23a806dc944e2adac34fc99baacf25ec&mc=true&node=se38.1.4_114&rgn=div8), and * M21-1, Part III, Subpart iv, 6.C.5.d. |

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| b. Considering Scar Tenderness as Evidence of Pain | Under [38 CFR 4.118, DC 7804](http://www.ecfr.gov/cgi-bin/text-idx?SID=3448d4d006e9807a14305759baa1ccc8&node=se38.1.4_1118&rgn=div8), an evaluation of 10 percent is assigned for one or two scars that are unstable ***or*** painful. When an examination notes findings of a scar(s) characterized by tenderness, consider the scar(s) to be painful under DC 7804. |

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| c. Definition: Unstable Scar | An ***unstable scar*** is a scar in which, for any reason, there is frequent loss of covering of skin over the scar.  ***Reference***: For more information on unstable scars, see [38 CFR 4.118, DC 7804](http://www.ecfr.gov/cgi-bin/text-idx?SID=957928142474523656b12619c9067a49&mc=true&node=se38.1.4_1118&rgn=div8). |

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| d. Evaluating Unstable and Painful Scars | When a scar is ***both*** unstable and painful, add 10 percent to the evaluation that would otherwise be assigned based on the total number of unstable or painful scars under [38 CFR 4.118, DC 7804](http://www.ecfr.gov/cgi-bin/text-idx?SID=3448d4d006e9807a14305759baa1ccc8&node=se38.1.4_1118&rgn=div8).  ***Example***: If a Department of Veterans Affairs (VA) examination notes one right knee arthroscopy scar that is described as unstable and painful, the proper evaluation based on the painful and unstable scar is 20 percent. Under DC 7804, one painful scar is entitled to an evaluation of 10 percent. Since the painful scar is also noted to be unstable, an additional 10 percent is added to that evaluation to arrive at an overall evaluation of 20 percent. |

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#### 3. Rating Specific Skin Conditions

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| Introduction | This topic contains information on rating specific skin conditions, including   * definition of mycosis fungoides * service connection (SC) for male pattern baldness or androgenetic alopecia * assigning multiple evaluations due to hair loss * applying alternative rating criteria in evaluating skin conditions * application of the bilateral factor to evaluations for skin conditions to include scarring * systemic therapy such as corticosteroids or other immunosuppressive drugs * separate evaluations for multiple skin disorders under DC 7806 * example: separate evaluations under DC 7806 based on percentage of exposed skin or entire body affected, and * separate evaluations under DC 7806 based on medication criteria. |

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| a. Definition: Mycosis Fungoides | ***Mycosis fungoides*** is a cutaneous T-cell lymphoma, which often manifests as skin symptoms that can appear as patches, plaques, or tumors.  ***Reference***: For more information on evaluating manifestations of mycosis  fungoides, see M21-1, Part III, Subpart iv, 4.I.4.k. |

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| b. SC for Male Pattern Baldness or Androgenetic Alopecia | Do not grant service connection (SC) for     * male pattern baldness, or * androgenetic alopecia.   ***Note***: VA classifies these conditions as congenital or developmental abnormalities.  ***Important***: While SC is not warranted for alopecia of androgenetic origin, VA recognizes hair loss due to scarring alopecia and alopecia areata under [38 CFR 4.118, DCs 7830 and 7831](http://www.ecfr.gov/cgi-bin/text-idx?SID=3448d4d006e9807a14305759baa1ccc8&node=se38.1.4_1118&rgn=div8), as disabilities for which SC is warranted if first manifest in service.  ***Reference***: For more information on congenital or developmental abnormalities, see   * [38 CFR 4.9](http://www.ecfr.gov/cgi-bin/text-idx?SID=29884efaf774e1afa8af847c677700d0&mc=true&node=se38.1.4_19&rgn=div8), and * M21-1, Part IV, Subpart ii, 2.B.6. |

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| c. Assigning Multiple Evaluations Due to Hair Loss | Assign separate evaluations for   * complete loss of the eyebrows and eyelashes due to injury, burns, or local disease under [38 CFR 4.79, DCs 6023](http://www.ecfr.gov/cgi-bin/text-idx?SID=3448d4d006e9807a14305759baa1ccc8&node=se38.1.4_179&rgn=div8) * complete loss of the eyelashes due to injury, burns, or local disease under [38 CFR 4.79, DC 6024](http://www.ecfr.gov/cgi-bin/text-idx?SID=3448d4d006e9807a14305759baa1ccc8&node=se38.1.4_179&rgn=div8), and * loss of all body hair due to alopecia areata or an analogous condition under [38 CFR 4.118, DC 7831](http://www.ecfr.gov/cgi-bin/text-idx?SID=3448d4d006e9807a14305759baa1ccc8&node=se38.1.4_1118&rgn=div8). |

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| d. Applying Alternative Rating Criteria in Evaluating Skin Conditions | When [38 CFR 4.118](http://www.ecfr.gov/cgi-bin/text-idx?SID=3448d4d006e9807a14305759baa1ccc8&node=se38.1.4_1118&rgn=div8) offers variable methods to evaluate a skin condition, assign a single evaluation using the criteria that results in the highest rating.  ***Example***: Under DC 7806, dermatitis is to be rated based on either skin involvement/type of treatment or as disfigurement of the head, face, or neck or scars, depending upon the predominant disability. For examination findings of dermatitis involving at least 5 percent, but less than 20 percent, of the entire body (a 10 percent evaluation under DC 7806) and scarring that is noncompensable under DCs 7800 through 7805, a single evaluation of 10 percent is warranted under DC 7806. Assigning an evaluation for dermatitis based on percentage of involvement of the entire body and a separate evaluation based on the residual scarring amounts to pyramiding.  ***Reference***: For more information on avoidance of pyramiding, see [38 CFR 4.14](http://www.ecfr.gov/cgi-bin/text-idx?SID=3448d4d006e9807a14305759baa1ccc8&node=se38.1.4_114&rgn=div8). |

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| **e. Application of the Bilateral Factor to Evaluations for Skin Conditions to Include Scarring** | The bilateral factor under [38 CFR 4.26](http://www.ecfr.gov/cgi-bin/text-idx?SID=3448d4d006e9807a14305759baa1ccc8&node=se38.1.4_126&rgn=div8) only applies to skin conditions rated based on the skin evaluation criteria under [38 CFR 4.118, DCs 7801 or 7802](http://www.ecfr.gov/cgi-bin/text-idx?SID=3448d4d006e9807a14305759baa1ccc8&node=se38.1.4_1118&rgn=div8), as the evaluation criteria and notes provided by these DCs specifically address entitlement to separate evaluations for multiple extremity involvement. The bilateral factor may also be for application for conditions rated under a DC with evaluation criteria not considering skin involvement (such as when the predominant disability is that pertaining to musculoskeletal impairment). Do not apply the bilateral factor to DCs for skin conditions to include scars that are   * based on whole-body involvement * based on number of debilitating episodes, or * specific to the head, face, and/or neck.   ***Examples***:   * The bilateral factor is not for application to [38 CFR 4.118, DC 7804](http://www.ecfr.gov/cgi-bin/text-idx?SID=3448d4d006e9807a14305759baa1ccc8&node=se38.1.4_1118&rgn=div8) as painful or unstable scars are not evaluated separately under this DC. * For ratings based on malignant skin neoplasms under [38 CFR 4.118, DC 7818](http://www.ecfr.gov/cgi-bin/text-idx?SID=3448d4d006e9807a14305759baa1ccc8&node=se38.1.4_1118&rgn=div8), the bilateral factor is not for application when assigning a 100 percent evaluation for active malignancy/treatment for six months following cessation. However, when evaluating based on residuals following the six month period, the bilateral factor may or may not apply depending on whether the residual is being evaluated based on a qualifying DC. |

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| **f. Systemic Therapy Such as**  **Corticosteroids or Other Immuno-suppressive Drugs** | The term “systemic therapy such as corticosteroids or other immunosuppressive drugs,” that is contained in certain DCs under [38 CFR 4.118](http://www.ecfr.gov/cgi-bin/text-idx?SID=620d5aa7f88e8f447f93865ae93f16ca&mc=true&node=se38.1.4_1118&rgn=div8), refers to any oral or parenteral medication(s) prescribed by a medical professional to treat the underlying skin disorder. Medications that are applied topically (directly to the skin), including topical corticosteroids or immunosuppressives, are not considered systemic for VA purposes.  ***Note***: When there is a question as to whether or not drug treatment is systemic therapy for rating purposes, the Veterans Benefits Administration (VBA) must request clarification from a VA or other licensed medical professional.  ***Example***: A Veteran is service-connected for dermatitis herpetiformis. Medical evidence shows she was treated with oral Dapsone for 7 weeks during the past 12-month period. An evaluation of 30 percent is warranted for treatment with systemic therapy for a total duration of six weeks or more, but not constantly, during the past 12-month period.  ***Reference***: For more information on the meaning of “such as” in the rating schedule, see [*Mauerhan v. Principi*](http://vbaw.vba.va.gov/bl/21/Advisory/CAVCDAD.htm#bmm), 16 Vet. App. 436 (2002). |

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| **g. Separate Evaluations for Multiple Skin Disorders Under DC 7806** | When evaluating separately diagnosed skin conditions and the predominant disability requires evaluation under [38 CFR 4.118, DC 7806](http://www.ecfr.gov/cgi-bin/text-idx?SID=3448d4d006e9807a14305759baa1ccc8&node=se38.1.4_1118&rgn=div8), separate evaluations for each diagnosis are permissible when the evaluation is based on disability due solely to the individual diagnosis. |

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| **h. Example: Separate Evaluations Under DC 7806 Based on Percentage of Exposed Skin or Entire Body Affected** | A Veteran diagnosed with multiple skin conditions may receive separate evaluations based on the percentage of exposed areas affected by each skin condition, so long as the medical evidence clearly indicates that the percentages affected are due solely to each individual diagnosis.  ***Example***: The medical evidence clearly indicates that skin condition X alone affects 6 percent of the exposed skin, while skin condition Y alone affects 12 percent of the exposed skin. In this scenario, separate evaluations may be assigned.  ***Important***:   * The evidence *must*identify which residual disability is due to which individual skin condition. * It may be necessary to request clarification from an examiner to identify the percentage of exposed skin affected only by one skin condition versus the other skin condition. * If an examiner cannot provide separate percentages due solely to each skin condition, separate evaluations cannot be granted using those criteria alone. * This guidance applies equally to evaluations based on the percentage of the entire body affected as well. |

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| **i. Separate Evaluations Under DC 7806 Based on Medication Criteria** | If the same medication(s) is/are used to treat each skin condition, separate evaluations may not be assigned unless the separately evaluated condition(s) uses alternative criteria to establish a disability evaluation.  ***Example***: Only one skin condition may be evaluated on the basis of treatment with Corticosteroid A. The remaining condition(s) must be evaluated on the basis of percentage of exposed areas affected, percentage of entire body affected, or on the basis of duration of treatment over the past 12 month period with anything other than Corticosteroid A.  ***Important***: The decision maker should assign separate evaluations in a manner that provides the most advantageous rating for the Veteran. |