### Section D. Service Connection for Qualifying Disabilities Associated With Service in Southwest Asia

#### Overview

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#### 13. General Information on Qualifying Disabilities Associated With Service in Southwest Asia

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| Introduction | This topic contains general information on qualifying disabilities associated with service in Southwest Asia, including the   * provisions of * [the Gulf War (GW) Veterans’ Benefits Act](#a13) * [the GW Veterans’ Act of 1998](#b13) * [the Veterans Education and Benefits Expansion Act of 2001](#c13), and * [38 CFR 3.317](#d13) * definitions of * [a ***qualifying Veteran*** under 38 CFR 3.317](#e13) * [the ***Southwest Asia theater of operations***](#f13)***,*** and * [a ***qualifying chronic disability*** under 38 CFR 3.317](#g13) * [presumptive period for manifestation of disability under 38 CFR 3.317](#h13) * [signs and symptoms of undiagnosed or medically unexplained chronic multisymptom illnesses](#i13) * [determining chronicity for qualifying disabilities](#j13) * [presumptive service connection for infectious diseases under 38 CFR 3.317(c)](#k13), and * [considering long-term health effects potentially associated with infectious diseases](#l13). |

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| a. Provisions of the GW Veterans’ Benefits Act | On November 2, 1994, Congress enacted the “*Persian Gulf War Veterans’ Benefits Act*,” Title I of the “*Veterans’ Benefits Improvements Act of 1994*,” *Public Law (PL) 103-446*.  The statute added a new section, [38 U.S.C. 1117](http://www.law.cornell.edu/uscode/html/uscode38/usc_sec_38_00001117----000-.html), authorizing the Department of Veterans Affairs (VA) to compensate any Gulf War (GW) Veteran suffering from a chronic disability resulting from an undiagnosed illness or combination of undiagnosed illnesses which manifested either   * during active duty in the Southwest Asia theater of operations during the GW, or * to a degree of 10 percent or more within a presumptive period following service in the Southwest Asia theater of operations during the GW. |

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| b. Provisions of the GW Veterans’ Act of 1998 | The “*Persian Gulf War Veterans’ Act of 1998*,” *PL 105-277*, authorized VA to compensate GW Veterans for diagnosed or undiagnosed disabilities that are determined by VA regulation to warrant a presumption of service connection based on a positive association with exposure to one of the following as a result of GW service   * a toxic agent * an environmental or wartime hazard, or * a preventive medication or vaccine.   ***Note***: This statute added [38 U.S.C. 1118](http://www.law.cornell.edu/uscode/html/uscode38/usc_sec_38_00001118----000-.html). |

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| c. Provisions of the Veterans Education and Benefits Expansion Act of 2001 | The “*Veterans Education and Benefits Expansion Act of 2001*,” *PL 107-103*, expanded the definition of “qualifying chronic disability” under [38 U.S.C. 1117](http://www.law.cornell.edu/uscode/html/uscode38/usc_sec_38_00001117----000-.html) to include, effective March 1, 2002, not only a disability resulting from an undiagnosed illness but also   * a medically unexplained chronic multi-symptom illness that is defined by a cluster of signs and symptoms, and * any diagnosed illness that is determined by VA regulation to warrant presumption of service connection. |

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| d. Provisions of 38 CFR 3.317 | [38 CFR 3.317](http://www.benefits.va.gov/warms/docs/regs/38CFR/BOOKB/PART3/S3_317.DOC), which implements [38 U.S.C. 1117](http://www.law.cornell.edu/uscode/html/uscode38/usc_sec_38_00001117----000-.html), defines GW service and “qualifying chronic disability,” and provides   * a broad, but non-exclusive, list of signs and symptoms which may be representative of undiagnosed or chronic, multi-symptom illnesses for which compensation may be paid, and * the presumptive period for service connection. |

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| e. Definition: Qualifying Veterans Under 38 CFR 3.317 | A ***qualifying Veteran,*** under [38 CFR 3.317](http://www.benefits.va.gov/warms/docs/regs/38CFR/BOOKB/PART3/S3_317), is a Veteran who served on active military, naval, or air service in the Southwest Asia theater of operations during the GW period.  Per [38 U.S.C. 101(33)](http://www.law.cornell.edu/uscode/html/uscode38/usc_sec_38_00000101----000-.html), the GW period extends from August 2, 1990, through a date yet to be determined by law or Presidential proclamation.   * ***Reference***: For a definition of the Southwest Asia theater of operations, see [M21-1MR, Part IV, Subpart ii, 2.D.13.f](imi-internal:M21-1MRIV.ii.2.D.13.f), and * [38 CFR 3.317(e)(2)](http://www.benefits.va.gov/warms/docs/regs/38CFR/BOOKB/PART3/S3_317). |

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| f. Definition: Southwest Asia Theater of Operations | The ***Southwest Asia theater of operations*** includes the following locations and the airspace above them   * Iraq * Kuwait * Saudi Arabia * the neutral zone between Iraq and Saudi Arabia * United Arab Emirates * Bahrain * Qatar * Oman * the Gulf of Aden * the Gulf of Oman * the Persian Gulf * the Arabian Sea, and * the Red Sea. |

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| g. Definitions: Qualifying Chronic Disability Under 38 CFR 3.317 | ***Qualifying chronic disability,*** under [38 CFR 3.317](http://www.benefits.va.gov/warms/docs/regs/38CFR/BOOKB/PART3/S3_317.DOC), means a chronic disability resulting from any of the following or any combination of the following   * an undiagnosed illness * a medically unexplained chronic multisymptom illness (MUCMI) that is defined by a cluster of signs or symptoms, such as * chronic fatigue syndrome * fibromyalgia, or * functional gastrointestinal disorders, excluding structural gastrointestinal diseases.   ***Notes***:   * The effective date of the amendment to [38 CFR 3.317(a)(2)(i)](http://www.benefits.va.gov/warms/docs/regs/38CFR/BOOKB/PART3/S3_317.DOC) to include functional gastrointestinal disorders was July 15, 2011. * Disability patterns referred to as MUCMIs are diagnosed conditions that can occur without a conclusive etiology (i.e. are medically unexplained). If symptoms fitting the description of an MUCMI are claimed by a Veteran with Gulf War service, a medical opinion should be obtained prior to deciding the claim, even if a diagnosis is shown in the medical records. * ***Example***: Sleep apnea involves the "respiratory system" and "sleep disturbances," both of which are specifically listed under [38 CFR §3.317(b)](http://vbaw.vba.va.gov/bl/21/publicat/Regs/Part3/3_317.htm#b) as signs or symptoms of undiagnosed illness and MUCMIs. If a Veteran served in Southwest Asia and is claiming a disability based on that service which involves the respiratory system or sleep disturbance, then the Veteran should be scheduled for an examination and a medical nexus opinion requested, even if a diagnosis of sleep apnea is of record. |

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| (continued) | ***Important***: If a condition has a partially understood or specific etiology, consider service connection under the provisions of [38 CFR 3.303](http://www.benefits.va.gov/warms/docs/regs/38CFR/BOOKB/PART3/S3_303.DOC) and [38 CFR 3.307](http://www.benefits.va.gov/warms/docs/regs/38CFR/BOOKB/PART3/S3_307.DOC).  ***References***: For   * a definition of a medically unexplained chronic multisymptom illness, see [38 CFR 3.317(a)(2)(ii)](http://www.benefits.va.gov/warms/docs/regs/38CFR/BOOKB/PART3/S3_317.DOC) * a description of functional gastrointestinal disorders and characterization of their symptoms and diagnosis, see the Note to [38 CFR 3.317(a)(2)(i)(B)(3)](http://www.benefits.va.gov/warms/docs/regs/38CFR/BOOKB/PART3/S3_317.DOC) * more information on the requirement that disabilities be chronic in nature, see [M21-1MR, Part IV, Subpart ii, 2.D.13.j](imi-internal:M21-1MRIV.ii.2.D.13.j), and   more information on rating action to be taken based on specific disability patterns, see [M21-1MR, Part IV, Subpart ii, 2.D.14.i](imi-internal:M21-1MRIV.ii.2.D.14.i). |

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| h. Presumptive Period for Manifestation of Disability Under 38 CFR 3.317 | The presumptive period for manifestation of qualifying chronic disability under [38 CFR 3.317](http://www.benefits.va.gov/warms/docs/regs/38CFR/BOOKB/PART3/S3_317.DOC)   * begins on the date following last performance of active military, naval, or air service in the Southwest Asia theater of operations during the GW, and * extends through December 31, 2016. |

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| i. Signs and Symptoms of Undiagnosed or Medically Unexplained Chronic Multisymptom Illnesses | [38 CFR 3.317](http://www.benefits.va.gov/warms/docs/regs/38CFR/BOOKB/PART3/S3_317.DOC) specifies the following 13 categories of signs or symptoms that may be manifestations of an undiagnosed illness or a medically unexplained chronic multisymptom illness   * abnormal weight loss * cardiovascular signs or symptoms * fatigue * gastrointestinal signs or symptoms * headache * joint pain * menstrual disorders * muscle pain * neurological signs or symptoms * neuropsychological signs or symptoms * signs or symptoms involving the skin * signs or symptoms involving the upper or lower respiratory system, and * sleep disturbances.   ***Notes***:   * The list of 13 illness categories is not exclusive. * Signs or symptoms not represented by one of the listed categories may also qualify for consideration under [38 CFR 3.317](http://www.benefits.va.gov/warms/docs/regs/38CFR/BOOKB/PART3/S3_317.DOC). * A disability that is affirmatively shown to have resulted from a cause other than Southwest Asia service may not be compensated under [38 CFR 3.317](http://www.benefits.va.gov/warms/docs/regs/38CFR/BOOKB/PART3/S3_317.DOC). |

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| j. Determining Chronicity for Qualifying Disabilities | To qualify, the claimed disability must be chronic, that is, it *must* have persisted for a period of six months.  Measure the six-month period of chronicity from the earliest date on which all pertinent evidence establishes that the signs or symptoms of the disability first became manifest.  ***Note***: If a disability is subject to intermittent episodes of improvement and worsening within a six-month period, consider the disability to be chronic. |

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| k. Presumptive Service Connection for Infectious Diseases Under 38 CFR 3.317(c) | Effective September 29, 2010, presumptive service connection is established under [38 CFR 3.317(c)](http://www.benefits.va.gov/warms/docs/regs/38CFR/BOOKB/PART3/S3_317.DOC) for the infectious diseases listed below if   * the Veteran served on active duty * in the Southwest Asia theater of operations during the Gulf War, as indicated in * [M21-1MR, Part IV, Subpart ii, 2.D.13.e](imi-internal:M21-1MRIV.ii.2.D.13.e), and * [M21-1MR, Part IV, Subpart ii, 2.D.13.f](imi-internal:M21-1MRIV.ii.2.D.13.f), or * in Afghanistan on or after September 19, 2001, and * the disease becomes manifest to a compensable degree within the time limit specified in the table. |

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| Infectious Disease | Time Limit for Manifestation |
| Brucellosis | one year |
| Campylobacter jejuni | one year |
| Coxiella burnetii (Q fever) | one year |
| Malaria | * one year, or * at a time when standard or accepted treatises indicate that the incubation period began during a qualifying period of service |
| Mycobacterium tuberculosis | no time limit |
| Nontyphoid Salmonella | one year |
| Shigella | one year |
| Visceral leishmaniasis | no time limit |
| West Nile virus | one year |

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| l. Considering Long-Term Health Effects Potentially Associated with Infectious Diseases | The Institute of Medicine of the National Academy of Sciences has identified the conditions listed in column B in the table below as potential long-term health effects associated with the infectious diseases (column A) shown in [M21-1MR, Part IV, Subpart ii, 2.D.13.k](imi-internal:M21-1MRIV.ii.2.D.13.k).  If a Veteran who is presumed service connected for a disease listed in column A is diagnosed with a disease in column B within the time period specified in the table (if no time period is specified, at any time), VA will request a medical opinion as to whether it is at least as likely as not that the condition was caused by the Veteran having had the associated disease in column A.  ***Note***: This does not preclude a finding that other manifestations of disability or secondary conditions were caused by an infectious disease.  ***Reference***: For more information on requesting a medical opinion, see [M21-1MR, Part III, Subpart iv, 3.A.9](imi-internal:M21-1MRIII.iv.3.A.9). |

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| Column A – Infectious Disease | Column B – Associated Condition(s) |
| Brucellosis | * arthritis * cardiovascular, nervous, and respiratory system infections * chronic meningitis and mengocephalitis * episcleritis * fatigue, inattention, amnesia, and depression * Guillain-Barre syndrome * hepatic abmormalities, including granulomatous hepatitis * multifocal choroiditis * myelitis-radiculoneuritis * nummular keratitis * papilledema * optic neuritis * orchioepididymitis and infections of the genitourinary system * sensorineural hearing loss * spondylitis * uveitis |

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| Column A – Infectious Disease | Column B – Associated Condition(s) |
| Campylobacter jejuni | * Guillain-Barre syndrome if manifest within two months of the infection * reactive arthritis if manifest within three months of the infection * uveitis if manifest within one month of the infection |
| Coxiella burnetti (Q fever) | * chronic hepatitis * endocarditis * osteomyelitis * post-Q-fever chronic fatigue syndrome * vascular infection |
| Malaria | * demyelinating polyneuropathy * Guillain-Barre syndrome * hematologic manifestations (particularly anemia after falciparum malaria and splenic rupture adter vivax malaria) * immune-complex glomerulonephritis * neurologic disease, neuropsychiatric disease, or both * ophthalmologic manifestations, particularly retinal hemorrhage and scarring * *Plasmodium falciparum* * *Plasmodium ovale* * *Plasmodium vivax* * renal disease, especially nephrotic syndrome |
| Mycobacterium tuberculosis | * active tuberculosis * long-term adverse health outcomes due to irreversible tissue damage from severe forms of pulmonary and extrapulmonary tuberculosis and active tuberculosis |

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| Column A – Infectious Disease | Column B – Associated Condition(s) |
| Nontyphoid Salmonella | reactive arthritis if manifest within three months of the infection |
| Shigella | * hemolytic-uremic syndrome if manifest within one month of the infection * reactive arthritis if manifest within three months of the infection |
| Visceral leishmaniasis | * delayed presentation of the acute clinical syndrome * post-kala-azar dermal leishmaniasis if manifest within two years of the infection * reactivation of visceral leishmaniasis in the context of future immunosuppression |
| West Nile virus | variable physical, functional, or cognitive disability |

#### 14. Processing Claims for Service Connection for Qualifying Disabilities

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| Introduction | This topic contains information about processing claims for service connection for qualifying disabilities under 38 CFR 3.317, including   * [rating a symptoms of a chronic qualifying illness as a single or multiple issue](#a14) * [information required to decide the issue of service connection for a chronic qualifying illness](#b14) * the relevancy, in identifying or describing symptoms or non-medical indicators, of * [medical evidence](#c14) * [the Veteran’s testimony](#d14), and * [lay evidence in](#e14) * [lay evidence consisting of non-medical indicators](#f14) * [determining inclusion in the Veterans Heath Administration (VHA) Persian Gulf Health Registry](#g14) * [determining the disability pattern for claims for qualifying disabilities](#h14) * [the rating action taken based on disability pattern determination](#i14), and * [considering the need for a future examination of a chronic qualifying illness](#j14). |

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| a. Rating Symptoms of a Qualifying Chronic Illness as a Single or Multiple Issue | The decision to rate multiple symptoms or signs of a qualifying chronic illness together as a single issue or separately as multiple issues depends on the outcome most favorable to the Veteran.  Although rating multiple manifestations under a single body system will in most cases provide the maximum benefit, be alert to symptoms affecting fundamentally different body systems that may clearly warrant separate consideration.  ***Notes***:   * If service connection for several symptoms or signs is denied for the same reason, consider such symptoms and signs as a single issue. * Assign one hyphenated diagnostic code (DC) in the coded conclusion to each issue that is separately considered, whether service connection is awarded or denied. |

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| b.  Information Required to Decide the Issue of Service Connection for a Chronic Qualifying Illness | The following information is required in order to determine whether service connection for a chronic qualifying illness is in order:   * when the illness arose * whether the illness was severe enough to warrant the assignment of a compensable evaluation at any time during the presumptive period, unless manifested while in the Southwest Asia theater, and * whether the illness chronically persisted for at least six months. |

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| c. Relevancy of Medical Evidence in Identifying Illnesses Under 38 CFR 3.317 | When the object of service connection is identification of a *diagnosed* illness, medical evidence is of paramount importance because a physician specializes in identifying disabilities through diagnoses.  The concept of “objective indications” expressed in [38 CFR 3.317](http://www.benefits.va.gov/warms/docs/regs/38CFR/BOOKB/PART3/S3_317.DOC) makes clear that the evidence required for *undiagnosed* illnesses, or illnesses which are outside the scope of medical understanding, is not so dependent on formal medical evidence. |

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| d.  Relevancy of the Veteran’s Testimony in Describing Symptoms | When combined with an examining physician’s inability to make a diagnosis, the Veteran’s testimony that he/she is experiencing the symptoms described may be sufficient to establish the existence of the illness. |

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| e.  Relevancy of Lay Evidence in Describing Non-Medical Indicators | Lay statements from knowledgeable individuals may be accepted as evidence of objective indications of chronic disability. Lay evidence is credible if   * its source was in a position to know the alleged facts, and * it is not contradicted by evidence of record that is more credible.   A lay person’s statement regarding the Veteran’s complaints, when they began, how long they lasted, and the severity of the observed symptoms/illness, may be sufficient to satisfy the requirements for objective indications of chronic disability. |

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| f.  Lay Evidence Consisting of Non-Medical Indicators | Lay evidence may consist of non-medical indicators, such as   * time lost from work * evidence that the Veteran sought medical treatment for his/her symptoms, and * relevant observations, such as changes in the Veteran’s * appearance * physical abilities, and/or * mental or emotional status. |

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| g.  Determining Inclusion in the VHA Persian Gulf Health Registry | In all cases, ask the Veteran if he/she was   * included in the Veterans Heath Administration (VHA) Persian Gulf Health Registry, and * examined as part of the Registry, and, if so, where he/she was examined.   If he/she has been examined, secure examination results from the appropriate VA medical center (VAMC). |

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| h. VA Examiner’s Determination of Disability Pattern for Claims Based on Southwest Asia Service | In each VA examination report, the examiner must characterize the Veteran’s claimed disability(ies) associated with Southwest Asia service as belonging to one of four disability patterns   * (1) an undiagnosed illness * (2) a diagnosable but medically unexplained chronic multi-symptom illness of unknown etiology * (3) a diagnosable chronic multi-symptom illness with a partially explained etiology, or * (4) a disease with a clear and specific etiology.   If the examination report does not contain the examiner’s determination of disability pattern     * send the examination report and claims folder back to the examiner with a copy of the “notice to examiner” shown in [M21-1MR, Part IV, Subpart ii, 1.E.19.g](imi-internal:M21-1MRIV.ii.1.E.19.g), and * ask the examiner to provide the medical statement requested in the notice. |

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| i. Rating Action Taken Based on Disability Pattern Determination | The table below shows the rating action taken based on the VA examiner’s determination of disability pattern. |

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| If the examiner determined the Veteran’s disability pattern to be … | Then … |
| * (1) an undiagnosed illness, or * (2) a diagnosable but medically unexplained chronic multi-symptom illness of unknown etiology | grant service connection under [38 CFR 3.317](http://www.benefits.va.gov/warms/docs/regs/38CFR/BOOKB/PART3/S3_317.DOC) if the Veteran is otherwise eligible. |
| * (3) a diagnosable chronic multi-symptom illness with a partially explained etiology, or * (4) a disease with a clear and specific etiology | service connection   * cannot be granted under [38 CFR 3.317](http://www.benefits.va.gov/warms/docs/regs/38CFR/BOOKB/PART3/S3_317.DOC), and * may be granted only if the medical evidence is sufficient to establish service connection on a direct or other presumptive basis. |

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| j. Considering the Need for a Future Examination of an Undiagnosed Illness | Because the course of an undiagnosed illness cannot be predicted, monitor it by establishing the necessary controls for a future examination within 24 months of the last examination of record.  At the expiration of the control period, review the evidence of record to determine whether reexamination is necessary. |

#### 15. General Information About Rating Decisions for Qualifying Disabilities

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| Introduction | This topic contains general information about rating decisions for qualifying disabilities, including   * [stating the issue in rating decisions for undiagnosed qualifying chronic disabilities](#a15) * [language for the *Decision* section of the rating decision](#b15) * [referencing relevant dates in the rating decision](#c15) * [termination or reduction of benefits previously awarded under 38 CFR 3.317](#d15), and * [Southwest Asia Veterans’ participation in VA-sponsored research projects](#e15). |

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| a. Stating the Issue in Rating Decisions for Undiagnosed Qualifying Chronic Disabilities | State the issue in the rating decision in claims for undiagnosed qualifying chronic disabilities as *Service connection for* **[specify signs or symptoms]** *as due to a qualifying chronic disability*. |

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| b. Language for the *Decision* Section of the Rating Decision | For every disability for which service connection was considered, state the following in the *Decision* section of the rating decision: *Service connection for* **[disability]** *is denied*, or *Service connection for* **[disability]** *is awarded with an evaluation of* **[percent]** *percent effective* **[date]**.  ***Note***: The earliest effective date for entitlement to service connection under the provisions of [38 CFR 3.317](http://www.benefits.va.gov/warms/docs/regs/38CFR/BOOKB/PART3/S3_317.DOC) is November 2, 1994. |

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| c. Referencing Relevant Dates in the Rating Decision | In the rating decision, explicitly refer to any date that is pertinent to the decision.  This particularly includes the   * dates during which the Veteran served in the Southwest Asia theater of operations, and * earliest date that a qualifying chronic disability may have become manifest.   ***Reference***: For more information on documenting a decision see [M21-1MR III.iv.6.C](imi-internal:M21-1MRIII.iv.6.C). |

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| d. Termination or Reduction of Benefits Previously Awarded Under 38 CFR 3.317 | Situations may arise that will require termination or reduction of payments previously awarded under [38 CFR 3.317](http://www.benefits.va.gov/warms/docs/regs/38CFR/BOOKB/PART3/S3_317.DOC).  Follow the normal procedures for reduction of benefits or severance of service connection outlined in [M21-1MR, Part I, 2](imi-internal:M21-1MRI.2).  ***Notes***:   * Termination or reduction of benefits paid under [38 CFR 3.317](http://www.benefits.va.gov/warms/docs/regs/38CFR/BOOKB/PART3/S3_317.DOC) does not preclude continuation of payments if entitlement is established under other regulations governing the establishment of service connection based on incurrence or aggravation during service, or on a presumptive basis. * 38 CFR 3.500 was amended by the addition of [38 CFR 3.500(y)](http://www.benefits.va.gov/warms/docs/regs/38CFR/BOOKB/PART3/S3_500.DOC), which specifically requires that severance of service connection or reduction of benefits under [38 CFR 3.105(d)](http://www.benefits.va.gov/warms/docs/regs/38CFR/BOOKB/PART3/S3_105.DOC) or [38 CFR 3.105 (e)](http://www.benefits.va.gov/warms/docs/regs/38CFR/BOOKB/PART3/S3_105.DOC) be effective the first of the month, 60 days after final notice of the adverse action has been issued to the Veteran.   ***Example***: A physician diagnoses a previously undiagnosed illness for which compensation was paid under [38 CFR 3.317](http://www.benefits.va.gov/warms/docs/regs/38CFR/BOOKB/PART3/S3_317.DOC). |

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| e.  Southwest Asia Veterans’ Participation in VA-Sponsored Research Projects | Effective December 27, 2001, if a Veteran with Southwest Asia service participates in a VA-sponsored medical research project, service connection established for a disability under [38 U.S.C. 1117](http://www.law.cornell.edu/uscode/html/uscode38/usc_sec_38_00001117----000-.html) or [38 U.S.C. 1118](http://www.law.cornell.edu/uscode/html/uscode38/usc_sec_38_00001118----000-.html) is protected, regardless of the project’s findings.  ***Exception***: Service connection is not protected if the original award was based on fraud, or military records clearly show that the Veteran did not have the requisite service or character of discharge.  ***Note***: A list of VA-sponsored medical research projects for which service connection is protected is published in the Federal Register. |

#### 16. Granting Service Connection for Qualifying Disabilities

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| Introduction | This topic contains information about granting service connection for qualifying disabilities, including   * [establishing service connection for a qualifying chronic disability that began during Southwest Asia service](#a16) * [establishing service connection for a compensable qualifying chronic disability that arose during the presumptive period](#b16) * [evaluating the level of impairment from an undiagnosed disability by analogy](#c16) * [using hyphenated diagnostic codes (DCs) for undiagnosed disabilities](#d16) * [assigning appropriate DCs for disabilities under 38 CFR 3.317](#e16) * [list of appropriate DCs for undiagnosed disabilities](#f16), and * [examples of analogous codes for undiagnosed disabilities](#g16). |

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| a. Establishing Service Connection for Qualifying Chronic Disability That Began During Southwest Asia Service | Establish service connection if the qualifying chronic disability, per [M21-1MR, Part IV, Subpart ii, 2.D.13.i](imi-internal:M21-1MRIV.ii.2.D.13.i), became manifest, whether to a compensable degree or not, while the claimant was on active service in the Southwest Asia theater of operations during the GW period.  Include the following sentence in the rating decision: *Service connection is established for* **[disability]** *as due to an undiagnosed illness which began in the Southwest Asia theater of operations during the Gulf War period*.  ***Reference***: For more information on documenting a decision see [M21-1MR III.iv.6.C](imi-internal:M21-1MRIII.iv.6.C). |

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| b. Establishing Service Connection for a Compensable Qualifying Chronic Disability That Arose During the Presumptive Period | Establish service connection if the qualifying chronic disability arose to a compensable degree after the Veteran last served in the Southwest Asia theater of operations during the GW period, regardless of the Veteran’s active duty status at the time.  If service connection is established during the presumptive period, include the following statement in the rating decision: *Service connection may be presumed for disabilities resulting from undiagnosed illnesses or diagnosed illnesses which arose to a compensable degree after service in the Southwest Asia theater of operations during the Gulf War period. Service connection for* **[disability]** *has been awarded on the basis of this presumption*.  ***Reference***: For more information on documenting a decision see [M21-1MR III.iv.6.C](imi-internal:M21-1MRIII.iv.6.C). |

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| c. Evaluating the Level of Impairment From an Undiagnosed Disability by Analogy | Evaluate the level of impairment of qualifying chronic undiagnosed disabilities by drawing an analogy to an existing DC in the rating schedule per [38 CFR 4.27](http://www.benefits.va.gov/warms/docs/regs/38CFR/BOOKC/PART4/S4_27.DOC).  Precede a discussion of the evaluation criteria in the rating decision with the following statement: *Since the disability at issue does not have its own evaluation criteria assigned in VA regulations, a closely related disease or injury was used for this purpose*.  ***Reference***: For more information on documenting a decision see [M21-1MR III.iv.6.C](imi-internal:M21-1MRIII.iv.6.C). |

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| d. Using Hyphenated DCs for Undiagnosed Disabilities | Use hyphenated DCs for all undiagnosed disabilities.  The table below describes each of the codes that comprise a complete hyphenated DC  ***Reference***: For more information on analogous DCs, see   * [M21-1MR, Part IV, Subpart ii, 2.D.16.f](imi-internal:M21-1MRIV.ii.2.D.16.f), and * [M21-1MR, Part IV, Subpart ii, 2.D.16.g](imi-internal:M21-1MRIV.ii.2.D.16.g). |

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| Code | Description | Example | Reference |
| First DC | Should always be one of the DCs established for the undiagnosed illness | 8863, for diseases analogous to systemic diseases | For more information on DCs, see   * [M21-1MR, Part IV, Subpart ii, 2.D.16.e](imi-internal:M21-1MRIV.ii.2.D.16.e), and * [M21-1MR, Part IV, Subpart ii, 2.D.16.f](imi-internal:M21-1MRIV.ii.2.D.16.f). |
| Second DC | Use the DC that most closely fits the evaluating criteria | 6354, for systemic disease | For more information on analogous codes, see [M21-1MR, Part IV, Subpart ii, 2.D.16.g](imi-internal:M21-1MRIV.ii.2.D.16.g). |

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| e.  Assigning Appropriate DCs for Disabilities Under 38 CFR 3.317 | In order to properly identify and track disabilities for which service connection is granted or denied based on the *Persian Gulf War Veterans’ Act*, a DC series beginning with “88” has been established.  The 88 code is the first element of an analogous code. The second two digits of the 88 code are assigned according to the body system of the analogous code that it precedes.  ***References***: For more information on   * DCs, see [M21-1MR, Part IV, Subpart ii, 2.D.16.f](imi-internal:M21-1MRIV.ii.2.D.16.f), and * analogous codes, see [M21-1MR, Part IV, Subpart ii, 2.D.16.g](imi-internal:M21-1MRIV.ii.2.D.16.g). |

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| f. List of Appropriate DCs for Undiagnosed Disabilities | The table below lists the first element in a hyphenated analogous code and the type of undiagnosed condition to which each code refers. |

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| If the condition is analogous to … | And the analogous code begins with … | Then the first DC is … |
| musculoskeletal diseases | 50 | 8850 |
| amputations | 51 | 8851 |
| joints, skull, and ribs | 52 | 8852 |
| muscle injuries | 53 | 8853 |
| diseases of the eye | 60 | 8860 |
| hearing loss | 61 | 8861 |
| ear and other sense organs | 62 | 8862 |
| systemic diseases | 63 | 8863 |
| nose and throat | 65 | 8865 |
| trachea and bronchi | 66 | 8866 |
| tuberculosis | 67 | 8867 |
| lungs and pleura | 68 | 8868 |
| heart diseases | 70 | 8870 |
| arteries and veins | 71 | 8871 |
| upper digestive system | 72 | 8872 |
| lower digestive system | 73 | 8873 |
| genitourinary system | 75 | 8875 |
| gynecological system | 76 | 8876 |
| hemic and lymphatic system | 77 | 8877 |
| skin | 78 | 8878 |
| endocrine system | 79 | 8879 |
| central nervous system | 80 | 8880 |
| miscellaneous neurological | 81 | 8881 |
| cranial nerve paralysis | 82 | 8882 |
| cranial nerve neuritis | 83 | 8883 |
| cranial nerve neuralgia | 84 | 8884 |
| peripheral nerve paralysis | 85 | 8885 |
| peripheral nerve neuritis | 86 | 8886 |
| peripheral nerve neuralgia | 87 | 8887 |

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| If the condition is analogous to … | And the analogous code begins with … | Then the first DC is … |
| epilepsies | 89 | 8889 |
| psychotic disorders | 92 | 8892 |
| organic mental | 93 | 8893 |
| psychoneurotic | 94 | 8894 |
| psychophysiologic | 95 | 8895 |
| dental and oral | 99 | 8899 |

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| g. Examples of Analogous Codes for Undiagnosed Disabilities | The table below contains examples of analogous codes that may be used when evaluating undiagnosed illnesses manifest by the 13 signs or symptoms found in [38 CFR 3.317](http://www.benefits.va.gov/warms/docs/regs/38CFR/BOOKB/PART3/S3_317.DOC). For the second code, use a DC with rating criteria that most accurately evaluates manifestations of the disability.  ***Note***: This list does not contain all possible analogous codes.  ***Reference***: For more information on the 13 signs or symptoms of an undiagnosed illness, see [38 CFR 3.317](http://www.benefits.va.gov/warms/docs/regs/38CFR/BOOKB/PART3/S3_317.DOC). |

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| If the symptom is … | Then the hyphenated DC is … |
| abnormal weight loss | 8873-7328, (resection of intestine). |
| cardiovascular signs or symptoms | 8870-7013, (tachycardia). |
| cardiovascular signs or symptoms | 8870-7005, (arteriosclerotic heart disease (ASHD)). |
| fatigue | 8863-6354, (chronic fatigue syndrome). |
| fatigue | 8877-7700, (anemia). |
| gastrointestinal signs or symptoms | * 8873-7305, (ulcer), or * 8873-7319, (irritable bowel syndrome). |
| headache | 8881-8100, (migraine headaches). |
| joint pain | 8850-5002, (rheumatoid arthritis). |
| menstrual disorders | 8876-7622, (uterus displacement). |
| muscle pain | 8850-5021, (myositis). |
| neurologic signs or symptoms | 8885-85\_\_, (peripheral neuropathy). |

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| If the symptom is … | Then the hyphenated DC is … |
| neuropsychological signs or symptoms | 8893-9300, (organic mental disorder). |
| signs or symptoms involving the respiratory system (upper or lower) | * 8865-65\_\_, (respiratory system) * 8866-66\_\_, (respiratory system), or * 8868-68\_\_, (respiratory system). |
| signs or symptoms involving the skin | 8878-7806, (eczema). |
| sleep disturbances | 8894-9400, (generalized anxiety). |

#### 17. Denying Service Connection for Qualifying Disabilities

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| Introduction | This topic contains information on denying service connection for qualifying disabilities, including   * [discussing the denial in the rating decision](#a17) * addressing * [diagnosed illnesses](#b17) * [an illness that is not chronic](#c17) * [an illness that is attributable to some other etiology](#d17) * [a condition that is not shown to exist by the evidence of record](#e17), and * [a qualifying chronic disability that is less than 10-percent disabling](#f17). |

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| a. Discussing the Denial in the Rating Decision | Begin a discussion of the denial of service connection in the rating decision with a description of the general requirements for service connection under [38 CFR 3.317](http://www.benefits.va.gov/warms/docs/regs/38CFR/BOOKB/PART3/S3_317.DOC), including the following statement:  *Service connection may be established for disability resulting from undiagnosed illness or a medically unexplained chronic multi-symptom illness that is defined by a cluster of symptoms, or a diagnosed illness that is determined by VA regulation to warrant a presumption of service connection which manifested itself either during active service in the Southwest Asia theater of operations during the Gulf War period, or to a degree of ten percent or more after the date on which the Veteran last performed service in the Southwest Asia theater of operations during the Gulf War period*.  ***Reference***: For more information on documenting a decision see [M21-1MR III.iv.6.C](imi-internal:M21-1MRIII.iv.6.C). |

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| b.  Addressing Diagnosed Illnesses | Service connection may not be granted under [38 CFR 3.317](http://www.benefits.va.gov/warms/docs/regs/38CFR/BOOKB/PART3/S3_317.DOC) for an illness having a known clinical diagnosis unless it meets the criteria for a qualifying chronic disability shown in [M21-1MR, Part IV, Subpart ii, 2.D.13.g](imi-internal:M21-1MRIV.ii.2.D.13.g). However, service connection under other provisions of the law must be considered.  If service connection for a claimed undiagnosed illness is denied on this basis, include the following language in the rating decision: *Service connection for* **[claimed disability]** *is denied because this disability is determined to result from a known clinical diagnosis of* **[diagnosed disability]***, which neither occurred in, nor was caused or aggravated by, service*.  ***Reference***: For more information on documenting a decision see [M21-1MR III.iv.6.C](imi-internal:M21-1MRIII.iv.6.C). |

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| c. Addressing an Illness That Is Not Chronic | The fact that a claimed disability is not found on the Veteran’s last VA examination does not necessarily preclude his/her entitlement to compensation under [38 CFR 3.317](http://www.benefits.va.gov/warms/docs/regs/38CFR/BOOKB/PART3/S3_317.DOC).  The requirement for chronicity is fulfilled if the disability has persisted for at least six months. Disabilities subject to episodic improvement and worsening within a six-month period are considered chronic.  If the disability does not meet the six-month requirement, include the following statement in the rating decision: *The disability must have persisted for a period of at least six months. Service connection for* **[disability]** *is denied since this disability was first manifested on* **[date]** *and lasted less than six months.*  ***Reference***: For more information on documenting a decision see [M21-1MR III.iv.6.C](imi-internal:M21-1MRIII.iv.6.C). |

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| d. Addressing an Illness That Is Attributable to Some Other Etiology | Service connection under [38 CFR 3.317](http://www.benefits.va.gov/warms/docs/regs/38CFR/BOOKB/PART3/S3_317.DOC) may not be established if there is affirmative evidence that an undiagnosed illness was not incurred during active service or was caused by some intercurrent circumstance.  ***Important***: Affirmative evidence that the illness is caused by willful misconduct or alcohol or drug abuse will also preclude entitlement.  Include the following statement in the rating decision if service connection is denied on this basis: *Service connection under this provision is precluded if there is affirmative evidence that the disability was unrelated to service in the Southwest Asia theater of operations. Service connection for* **[disability]** *is denied because evidence established that this disability resulted from* **[unrelated event, accident, injury, etc.]**.  ***Reference***: For more information on documenting a decision see [M21-1MR III.iv.6.C](imi-internal:M21-1MRIII.iv.6.C). |

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| e. Addressing a Condition That Is Not Shown to Exist by the Evidence of Record | If the evidence of record fails to show that a condition exists or has existed in the past, include the following statement in the rating decision: *There is no evidence that the condition ever existed*.  ***Reference***: For more information on documenting a decision see [M21-1MR III.iv.6.C](imi-internal:M21-1MRIII.iv.6.C). |

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| f. Addressing a Qualifying Chronic Disability That Is Less Than 10-Percent Disabling | If the Veteran fails to qualify for service connection because the severity of the qualifying chronic disability is noncompensable, include the following statement in the rating decision: *Service connection for* **[disability]** *is denied since this disability neither arose during service in the Southwest Asia theater of operations,* *nor was it manifested to a compensable degree after the last date of service in the Southwest Asia theater during the Gulf War period*.  ***References***: For more information on   * qualifications for service connection, see [M21-1MR, Part IV, Subpart ii, 2.D.13.a](imi-internal:M21-1MRIV.ii.2.D.13.a), and * documenting a decision see [M21-1MR III.iv.6.C](imi-internal:M21-1MRIII.iv.6.C). |