

## Exercises for How to use Court Cases PTC 2023

Which court case or cases could help each of these veterans? Write down the name of the case, and why you thought it could help.

**Ruma Nandini** calls to ask you a question about whether she can make a claim for increased evaluation for her service connected hypertension, currently evaluated at 0%. She was diagnosed with hypertension by a corpsman while she was still in the Marine Corps. She has been on prescription medication ever since and she tells you it is not a problem for her unless she forgets her medication. In that case, she gets mild headaches that go away as soon as she begins taking her hypertension meds again. Is that enough for her to qualify for an increase?

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**Jeremy Li** made a claim for SC for “gastritis with weight loss, nausea and vomiting.” He says he avoided seeing a medic on deployment in the Army but on one occasion his squad leader made him go. That treatment record says that he reported “nausea and feels like he might have to throw up.” In his post-deployment health assessment Li reports “stomach issues” but said Pepto Bismol made it better. There are no other relevant STRs and Li does not have any current medical records, but submitted two statements from his buddy who was deployed with him, and from his girlfriend, that say Li started having these symptoms in service and has had them ever since. The Regional Office denied the claim, saying that neither record in his STRs resulted in a diagnosis, and the veteran is not competent to diagnose himself now. They said that this claim does not meet criteria for any of the three elements required for direct service connection.

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**Tammy Cole**, USAF Retired, underwent surgical resurfacing of her SC left hip in 2021. She currently has a disability evaluation of 30% under DC 5252 for flexion of the left thigh limited to 20 degrees, and also 20% under DC 5253 for limited abduction of the left thigh. Veteran Cole made a claim for increase, and in the statement she submitted, mentioned that her hip is so much worse that she has asked for reasonable accommodation so that her employer will purchase an ergonomic chair specially designed for office workers with limited hip mobility. She said she has used up all her paid time off due to hip pain. The Regional Office increased her disability evaluation to 40% under DC 5252 and C+C the 20% under DC 5253, stating that she

was at the highest evaluation level possible for both. Ms. Cole asks you to take a look at her file and see if there is a way for her to qualify for a greater increase.

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**Rodney White**, USMC veteran, who uses a cane for stability, recently made a claim for increased disability evaluation for his service connected right knee and right ankle, hoping that it would increase his disability evaluation based on Rating Schedule changes that went into effect in February of 2021. In the most recent decision, his two joint disabilities were separated and each awarded a 10% disability evaluation, which does increase his benefit. However, veteran White feels that his SC symptoms are bad enough to warrant a higher disability rating, but he finds it difficult to explain the additional impact of an old NSC hunting injury that resulted in a wound in his right leg near the knee. Even he gets confused sometimes about which injury causes which symptom.

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