

DEPARTMENT OF VETERANS AFFAIRS

VA Regional Office

Street Address

City, ST 12345

Clint Barton

VA File Number

011 25 2006

Represented by:

Veterans of Foreign Wars

Rating Decision

September 16, 2022

INTRODUCTION

The records reflect that you are a veteran of the Gulf War Era. You served in the Army from June 1, 1995 to June 1, 2018. You filed an original disability claim that was received on June 3, 2022. We have assigned an effective date of June 3, 2022, which is the day the claim was received. It is the earliest date allowable by law and will be the same for all disorders found to be service connected by this rating decision. Based on a review of the evidence listed below, we have made the following decision(s) on your claim.

DECISION

1. Service connection for Unspecified Anxiety Disorder is granted with an elevation of 50 percent effective June 3, 2022.
2. Service connection for Lumbosacral Strain is granted with an evaluation of 20 percent effective June 3, 2022.
3. Service connection for Migraine headaches is granted with an evaluation of 0 percent effective June 3, 2022.
4. Service connection for Erectile dysfunction is granted with an evaluation of 0 percent effective June 3, 2022.
5. Service connection for Left Shoulder Strain is granted with an evaluation of 0 percent effective June 3, 2022.
6. Service connection for Deviated Septum is denied.
7. We are paying you as a single veteran with no dependents.

EVIDENCE

- Service treatment records from June 1, 1995 to June 1, 2018.
- Your claim for compensation on VA Form 21-526EZ received June 3, 2022
- VA compensation and pension examination dated June 13, 2013
- Possible private medical records
- DD-214
- Lay statements from Stark
- Lay statement from Rodgers

REASONS FOR DECISION

1. Service connection for Unspecified Anxiety Disorder.

Service connection for Unspecified Anxiety Disorder has been established as directly related to military service. (38 CFR 3.303, 38 CFR 3.304)

The effective date of this grant is June 3, 2022. Service connection has been established from the day after your discharge from active duty. When a claim of service connection is received within one year of discharge from active duty, the effective date is the day after discharge. (38 CFR 3.400)

An evaluation of 50 percent is assigned from June 3, 2022.

We have assigned a 50 percent evaluation for your Unspecified Anxiety Disorder based on:

- Anxiety
- Chronic sleep impairment
- Depressed mood
- Difficulty in adapting to a worklike setting
- Difficulty in adapting to stressful circumstances
- Difficulty in adapting to work
- Difficulty in establishing and maintaining effective work and social relationships
- Disturbances of motivation and mood
- Forgetting directions
- Forgetting names
- Forgetting recent events
- Mild memory loss
- Occupational and social impairment with reduced reliability and productivity
- Suicidal ideation

The overall evidentiary record shows that the severity of your disability most closely approximates the criteria for a 50 percent disability evaluation. (38 CFR 4.7, 38 CFR 4.126)

A higher evaluation of 70 percent is not warranted for a mental disorder unless the evidence shows total occupational and social impairment, due to such symptoms as:

- Gross impairment in thought processes or communication
- Persistent delusions or hallucinations
- Grossly inappropriate behavior
- Persistent danger of hurting self or others
- Intermittent inability to perform activities of daily living (including maintenance of minimal personal hygiene)
- Disorientation to time or place
- Memory loss for names of close relatives, own occupation, or own name. (38 CFR 4.125, 38 CFR 4.126, 38 CFR 4.130)

2. Service connection Lumbosacral Strain

Service connection for lumbar strain has been established as directly related to military service. (38 CFR 3.303, 38 CFR 3.304)

The effective date of this grant is June 3, 2022.

An evaluation of 20 percent is assigned from June 3, 2022.

We have assigned a 20 percent evaluation for your lumbar strain based on:

- Combined range of motion of the thoracolumbar spine not greater than 120 degrees
- Forward flexion of the thoracolumbar spine greater than 30 degrees but not greater than 60 degrees

Additional symptom(s) include:

- Objective evidence of lack of endurance
- Painful motion

The provisions of 38 CFR §4.40 and §4.45 concerning functional loss due to pain, fatigue, weakness, or lack of endurance, incoordination, and flare-ups, as cited in *DeLuca v. Brown* and *Mitchell v. Shinseki*, have been considered and were applied based on additional joint limitation.

A higher evaluation of 40 percent is not warranted for diseases and injuries of the thoracolumbar spine unless the evidence shows:

- Favorable ankylosis of the entire thoracolumbar spine; or,
- Forward flexion of the thoracolumbar spine 30 degrees or less. (38 CFR 4.71a)

3. Service connection for Migraine Headaches

Service connection for Migraine Headaches has been established as directly related to military service. (38 CFR 3.303, 38 CFR 3.304) A non-compensable evaluation is assigned from June 3, 2022.

We have assigned a non-compensable evaluation for your headache based on:

- A diagnosed disability with no compensable symptoms (38 CFR 4.31)

A higher evaluation of 10 percent is not warranted unless there are characteristic prostrating attacks averaging one in 2 months over last several months. (38 CFR 4.124a)

4. Service connection for Erectile Dysfunction

Service connection for Erectile Dysfunction has been established as directly related to military service. (38 CFR 3.303, 38 CFR 3.304) A non-compensable evaluation is assigned from June 3, 2022.

We have assigned a noncompensable evaluation for your erectile dysfunction based on:

- Loss of erectile power

Note: In every instance where the schedule does not provide a zero percent evaluation for a diagnostic code, a zero percent evaluation shall be assigned when the requirements for a compensable evaluation are not met. {38 CFR §4.31}

A higher evaluation of 20 percent is not warranted unless there is deformity with loss of erectile power.

5. Service connection for Left Shoulder strain.

Service connection for Left shoulder Strain, right has been established as directly related to military service. (38 CFR 3.303, 38 CFR 3.304)

An evaluation of 0 percent is assigned from June 3, 2022.

We have assigned a 0 percent evaluation for your shoulder strain, left based on:

- A diagnosed condition without any compensable symptoms.

A higher evaluation of 20 percent is not warranted for limitation of motion of the arm unless the evidence shows:

- Painful motion of the shoulder
- Limited motion of the arm midway between side and shoulder level (flexion and/or abduction limited to 45 degrees). (38 CFR 4.69, 38 CFR 4.71a)

6. Service connection for Deviated Septum

Service connection may be granted for a disability which began in military service or was caused by some event or experience in service. While your service treatment records reflect complaints, treatment, or a diagnosis similar to that claimed, the medical evidence supports the conclusion that there is no evidence of a chronic disability subject to service connection as shown by evidence following service.

There was no continuity of symptoms from service to the present. Service connection for deviated septum is denied since this condition neither occurred in nor was caused by service.