

May 5, 2021



We made a decision on your VA benefits.

Dear [REDACTED]:

This letter will guide you through the information you should know and steps you may take now that VA has made a decision about your benefits.

Your Benefit Information:

- Service connection for cervical strain with intervertebral disc syndrome remains denied.
- Service connection for right shoulder condition remains denied.
- Service connection for right hip femoral acetabular impingement syndrome remains denied.
- Service connection for right knee strain remains denied.
- Service connection for left hip femoral acetabular impingement syndrome remains denied.
- Service connection for left knee meniscal tear remains denied.

Your compensation payment will continue unchanged. The payment information within this letter is provided for historical purposes only.

What You Should Do If You Disagree With Our Decision

If you do not agree with our decision, you have one year from the date of this letter to select a review option in order to protect your initial filing date for effective date purposes. You must file your request on the required application form for the review option desired. The table below represents the review options and their respective required application form.



We have included with this letter:

1. Additional Benefits
2. Where to Send Your Correspondence
3. VA Form 20-0998
4. Rating Decision
5. Fraud Prevention Attachment

Contact information:

Web: www.vets.gov
Phone: 1-800-827-1000
TDD: 711
To send questions online: visit <https://iris.custhelp.com/>

Social Media:

Twitter: @VAVetBenefits
Facebook: www.facebook.com/VeteransBenefits

Your representative:

You appointed JOHN ROBERT UNRUH as your accredited representative. They have also received a copy of this letter.

They can help you with any questions you have about your claim.

If you or someone you know is in crisis, call the *Veterans Crisis Line* at 1-800-273-8255 and press 1.



File Number: [REDACTED]

Review Option	Required Application Form
Supplemental Claim	VA Form 20-0995, <i>Decision Review Request: Supplemental Claim</i>
Higher-Level Review	VA Form 20-0996, <i>Decision Review Request: Higher-Level Review</i>
Appeal to the Board of Veterans' Appeals	VA Form 10182, <i>Decision Review Request: Board Appeal (Notice of Disagreement)</i>

Please note: You may not request a higher-level review of a higher-level review decision issued by VA.

The enclosed VA Form 20-0998, *Your Rights To Seek Further Review Of Our Decision*, explains your options in greater detail and provides instructions on how to request further review. You may download a copy of any of the required application forms noted above by visiting www.va.gov/vaforms/ or you may contact us by telephone at 1-800-827-1000 and we will mail you any form you need.

You can visit www.va.gov/decision-reviews to learn more about how the disagreement process works.

If you would like to obtain or access evidence used in making this decision, please contact us by telephone, email, or letter as noted below letting us know what you would like to obtain. Some evidence may be obtained online by visiting www.va.gov.

Thank you for your service,

Regional Office Director

cc: JOHN ROBERT UNRUH
Unruh Law, P.C.
100 Pine Street, Suite 1250
San Francisco CA 94111



Additional Benefits

Medical Care and Treatment:

- Mental Health Counseling: For more information, please visit www.myhealth.va.gov/mhv-portal-web/.
- Blind Rehabilitation: For more information, please visit www.va.gov/blindrehab/.

Home Adaptations/Loans, Automobile Benefits, and Life Insurance:

- Loans: For more information, please visit www.benefits.va.gov/homeloans/.
- Funding Fee Refund: If you paid a funding fee at the closing of a VA guaranteed home loan and your VA compensation award provides an effective rating date that was prior to your loan closing date, then you may be eligible for a funding fee refund. Please contact either your current mortgage servicer or a VA Regional Loan Center at (877) 827-3702 to begin the refund process.

Veterans Signals (VSignals), a VA Customer Experience Survey

VA is conducting short surveys to gather feedback regarding the new decision review process. VA will randomly select survey participants from individuals who filed a request for a decision review. The survey will be sent via email and should take less than three minutes to complete. If selected, you will receive a survey within 10 days of the date on your notification letter. To be considered for VA surveys, please review your va.gov profile and ensure we have your current email address. The survey may not route to your inbox, so please check your junk folder.



Where to Send Your Correspondence

Documents may be submitted by mail, in person at a VA regional office or electronically. However, VA recommends submitting correspondence electronically as this is the fastest method of receipt.

VA provides several tools to assist in electronic submission. To learn more about how to submit documents and claims electronically, visit www.va.gov/disability/upload-supporting-evidence. You can also go directly to access.va.gov to digitally upload any correspondence using Direct Upload.

By visiting www.va.gov you can also check your claim status and learn about other VA benefits.

If you need assistance, you can find a local, accredited representative at <https://www.benefits.va.gov/vso/>

If you prefer to mail your correspondence, please use the related mailing address below:

Compensation Benefits Department of Veterans Affairs Compensation Intake Center P.O. Box 4444 Janesville, WI 53547	Pension & Survivors Benefits Department of Veterans Affairs Pension Intake Center P.O. Box 5365 Janesville, WI 53547
Board of Veterans' Appeals Department of Veterans Affairs Board of Veterans' Appeals P.O. Box 27063 Washington, DC 20038 Toll Free Fax: (844) 678-8979	Fiduciary Department of Veterans Affairs Fiduciary Intake Center P.O. Box 95211 Lakeland, FL 33804




These addresses serve **all United States and foreign locations.**



You can also send a text message to 838255 to receive confidential support 24 hours a day, 7 days a week, 365 days a year. For more information, visit www.veteranscrisisline.net

YOUR RIGHT TO SEEK REVIEW OF OUR DECISION

This document outlines your right to seek review of our decision on any issue with which you disagree. You may generally select one of three different review options for each issue decided by VA. However, you may not request review of the same issue using more than one option at the same time. Below is information on the three different review options.

			
	Supplemental Claim	Higher-Level Review	Board Appeal
What Is This?	A reviewer will determine whether new and relevant evidence changes the prior decision.	An experienced claims adjudicator will review your decision using the same evidence VA considered in the prior decision.	A Veterans Law Judge at the Board of Veterans' Appeals (Board) will review your decision.
By Selecting This Option	<p>You are adding or identifying new and relevant evidence to support your claim that we did not previously consider.</p> <p>VA will assist you in gathering new and relevant evidence that you identify to support your claim.</p>	<p>You have no additional evidence to submit to support your claim, but you believe there was an error in the prior decision.</p> <p>You can request an optional, one-time, informal conference with a Higher-Level Reviewer to identify specific errors in the case, although requesting this conference may delay the review.</p>	<p>You must choose a docket:</p> <p>Direct Review - You do not want to submit evidence or have a hearing.</p> <p>Evidence Submission - You choose to submit additional evidence without a hearing.</p> <p>Hearing - You choose to have a hearing with a Veterans Law Judge.</p>
Goal To Complete	125 days on average	125 days on average	365 days on average for Direct Review (longer for the other options)
Form To File To Select This Option*	VA Form 20-0995, <i>Decision Review Request: Supplemental Claim</i>	VA Form 20-0996, <i>Decision Review Request: Higher-Level Review</i>	VA Form 10182, <i>Decision Review Request: Board Appeal (Notice of Disagreement)</i>
Further Options After This Decision Review	You may request another Supplemental Claim, a Higher-Level Review, or a Board Appeal.	You may request a Supplemental Claim or a Board Appeal.	You may request a Supplemental Claim or appeal to the U.S. Court of Appeals for Veterans Claims.

* All forms listed above are available at www.va.gov/vaforms/.



For most VA benefits, you have 1 year from the date on your decision notice to request a decision review to ensure the earliest possible effective date. Consult your decision notice for specific limitations.

If you do not submit a decision review request within the required time, you may only seek review through the following:

- A request to revise the decision based on a clear and unmistakable error, or
- A Supplemental Claim. If you file a Supplemental Claim after the 1-year time limit, the effective date for any resulting award of benefits generally will be tied to the date VA receives the Supplemental Claim.

While most decision review options are available to you, there are limitations based on the type of decision you received.

- If you are a party to a **contested claim** - such as claims for apportionment, attorney fee disagreement, or multiple parties filing for survivor's benefits - your *only* option for disagreeing with your decision is to file a Board Appeal within **60 days** of the date on your decision notice.
- If you are seeking review of an **insurance decision** you have an *additional* option to challenge VA's decision by filing a complaint with a United States district court in the jurisdiction in which you reside within 6 years from when the right of action first accrues. Consult your decision notice for details on what options are available and where to send the request.

Get Help with Your Review Request:

For more information on all the available review options, contact us at 1-800-827-1000 or visit www.va.gov/decision-reviews/. If you need help filing a decision review, you may want to work with an accredited attorney, claims agent, or a Veterans Service Organization (VSO) representative. Additional information about working with an accredited attorney, claims agent, or VSO representative is available at www.va.gov/decision-reviews/get-help-with-review-request/. You may also find a directory of accredited representatives at www.va.gov/vso.



**DEPARTMENT OF VETERANS AFFAIRS
Veterans Benefits Administration
Regional Office**

[REDACTED]

VA File Number
[REDACTED]

**Represented By:
JOHN ROBERT UNRUH
Rating Decision
05/04/2021**

INTRODUCTION

The records reflect that you are a Veteran of the Gulf War Era. You served in the Marine Corps from [REDACTED]. We received your request for a Higher Level Review on February 11, 2021. Based on a review of the evidence listed below, we have made the following decision(s) on your claim.

Please note: The evidentiary record closed as of the date of notice of our prior decision. VA received additional evidence after the record closed that was not considered as part of this decision. If you would like VA to consider this evidence, you may submit a supplemental claim at any time; however, VA must receive your application within one year of the date of notice of this decision to preserve your right to receive the maximum possible benefit.

DECISION

1. Service connection for cervical strain with intervertebral disc syndrome remains denied.
2. Service connection for left hip femoral acetabular impingement syndrome remains denied.



-



- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]

REASONS FOR DECISION

1. Service connection for cervical strain with intervertebral disc syndrome.

Service connection may be granted for a disability which began in military service or was caused by some event or experience in service. (38 CFR 3.303) To establish entitlement to service-connected compensation benefits, the evidence must show three things: (1) An injury in military service or a disease that began in or was made worse during military service, or an event in service causing injury or disease; (2) A current physical or mental disability; (3) A relationship between the current disability and an injury, disease, or event in service, which is usually shown by medical records or medical opinions.

Active military service includes active duty or any period of active duty for training during which the individual concerned was disabled or died from a disease or injury incurred or aggravated in line of duty. "Active duty" means full-time duty in the Armed Forces, other than active duty for training. "Active duty for training" means full-time duty in the Armed Forces performed by Reserves for training purposes. Disabilities caused by a disease process cannot be service connected if they are discovered during a period of inactive duty for training. Service connection may be warranted for an injury incurred or aggravated while performing inactive duty for training. Service connection may also be warranted for an acute myocardial infarction, a cardiac arrest, or a cerebrovascular accident which occurred during inactive duty for training. (38 CFR 3.6)

Service connection for cervical strain with intervertebral disc syndrome is denied since this condition neither occurred in nor was caused by service. We did not find a link between your medical condition and military service. (38 CFR 3.303, 38 CFR 3.304)

Service treatment records show complaints of neck pain. The separation assessment dated May 20, 2016 showed neck pain secondary to overuse resolved. A disability which began in service or was caused by some event in service must be considered "chronic" before service connection can be granted. While your service treatment records reflect complaints, treatment, or a diagnosis similar to that claimed, the medical evidence supports the conclusion that a persistent disability was not present in service. (38 CFR 3.303, 38 CFR 3.304) Although there is a record of treatment in service for neck condition during active duty for training, we did not find a link



between your medical condition and military service. Your private treatment records show treatment for neck condition. However, the VA medical opinion found no link between your diagnosed medical condition and military service. The VA examiner concluded your current cervical spine condition is less likely than not related to the complaints shown during service with the following rationale: Condition began during VSMC boot camp around November 2015 while patient was carrying heavy packs. She felt her back go numb and could not feel her neck. During MOS School around March 2016, she felt a neck spasm on her right side and was unable to move. Her symptoms at the time included heavy numbness after a deep, sharp pain that would shoot up her back. Physical exam today confirm neck strain. Although it shows she was seen in 2016 for a couple visits there it was not documented after service during reserve duty. There are insufficient records to show that the neck torticollis has been a constant condition since that time in the military to today.

Favorable Findings identified in this decision:

You have been diagnosed with a disability. The VA contract examination in January 2020 listed a diagnosis of cervical strain with intervertebral disc syndrome.

The evidence shows that a qualifying event, injury, or disease had its onset during your service. Service records show complaints of neck pain during your period of active duty for training in 2016.

Laws and Regulations applicable to this issue:

- 38 CFR §3.1 Definitions.
- 38 CFR §3.6 Duty periods.
- 38 CFR §3.102 Reasonable doubt.
- 38 CFR §3.103 Procedural due process and appellate rights.
- 38 CFR §3.104 Finality of decisions.
- 38 CFR §3.105 Revision of decisions.
- 38 CFR §3.151 Claims for disability benefits.
- 38 CFR §3.155 How to file a claim.
- 38 CFR §3.159 Department of Veterans Affairs assistance in developing claims.
- 38 CFR §3.303 Principles relating to service connection.
- 38 CFR §3.304 Direct service connection; wartime and peacetime.
- 38 CFR §3.307 Presumptive service connection for chronic, tropical, or prisoner-of-war related disease, disease associated with exposure to certain herbicide agents, or disease associated with exposure to contaminants in the water supply at Camp Lejeune; wartime and service on or after January 1, 1947.
- 38 CFR §3.309 Disease subject to presumptive service connection.
- 38 CFR §3.2400 Applicability of modernized review system
- 38 CFR §3.2500 Review of decisions
- 38 CFR §3.2501 Supplemental claims
- 38 CFR §3.2601 Higher-level review
- 38 USC 1110 & 1131 Basic entitlement
- 38 USC 5107 Claimant responsibility; benefit of the doubt



38 CFR §3.156 New evidence
38 CFR §3.306 Aggravation of preservice disability.
38 CFR §3.322 Rating of disabilities aggravated by service.
38 CFR §4.6 Evaluation of evidence.

2. Service connection for left hip femoral acetabular impingement syndrome.

Service connection may be granted for a disability which began in military service or was caused by some event or experience in service. (38 CFR 3.303) To establish entitlement to service-connected compensation benefits, the evidence must show three things: (1) An injury in military service or a disease that began in or was made worse during military service, or an event in service causing injury or disease; (2) A current physical or mental disability; (3) A relationship between the current disability and an injury, disease, or event in service, which is usually shown by medical records or medical opinions.

Active military service includes active duty or any period of active duty for training during which the individual concerned was disabled or died from a disease or injury incurred or aggravated in line of duty. "Active duty" means full-time duty in the Armed Forces, other than active duty for training. "Active duty for training" means full-time duty in the Armed Forces performed by Reserves for training purposes. Disabilities caused by a disease process cannot be service connected if they are discovered during a period of inactive duty for training. Service connection may be warranted for an injury incurred or aggravated while performing inactive duty for training. Service connection may also be warranted for an acute myocardial infarction, a cardiac arrest, or a cerebrovascular accident which occurred during inactive duty for training. (38 CFR 3.6)

Service connection for left hip femoral acetabular impingement syndrome is denied since this condition neither occurred in nor was caused by service. We did not find a link between your medical condition and military service. (38 CFR 3.303, 38 CFR 3.304)

Service treatment records show complaints of left hip pain and treatment for hip flexor tightness/piriformis syndrome in 2016. The March 2016 x-rays of left hip were normal. The separation assessment dated May 20, 2016 showed left hip pain secondary to overuse resolved. A disability which began in service or was caused by some event in service must be considered "chronic" before service connection can be granted. Although there is a record of treatment for left hip pain during active duty for training, no permanent residual or chronic disability subject to service connection is shown by the service medical records or demonstrated by evidence following service. While your service treatment records reflect complaints, treatment, or a diagnosis similar to that claimed, the medical evidence supports the conclusion that a persistent disability was not present in service. (38 CFR 3.303, 38 CFR 3.304) Your private treatment records and the VA examination show a current diagnosis; however, the VA medical opinion found no link between your diagnosed medical condition and military service. The VA examiner concluded your left hip condition is less likely than not related to the complaints shown during service with the following rationale: The veteran states that the condition began around November 2015. Patient was in boot camp carrying heavy packs during hikes. She felt extreme pain in her hips that spread to her knees and feet. She recalls feeling like she was unable to walk



and her feet went numb. Her hips also felt like they were going to collapse and break. In MCT (military combat training), patient fell off during a hike. The corpsman gave her pain killers. She received no other treatment but only performed light duty her entire time there. She did receive Cortisone injections after her MRI. The records show left hip pain in 2016 but no mention of it being caused by the knee pain during service it is a separate injury during service that she stated was resolved on her exit exam. Her reserve duty does not have records of a new hip injury or aggravation and the civilian records place the timing of the hip injury after service.

Favorable Findings identified in this decision:

You have been diagnosed with a disability. The VA contract examination in January 2020 listed an assessment of femoral acetabular impingement syndrome.

The evidence shows that a qualifying event, injury, or disease had its onset during your service. Service records show complaints of left hip pain during your period of active duty for training in 2016.

Laws and Regulations applicable to this issue:

38 CFR §3.1 Definitions.
38 CFR §3.6 Duty periods.
38 CFR §3.102 Reasonable doubt.
38 CFR §3.103 Procedural due process and appellate rights.
38 CFR §3.104 Finality of decisions.
38 CFR §3.105 Revision of decisions.
38 CFR §3.151 Claims for disability benefits.
38 CFR §3.155 How to file a claim.
38 CFR §3.159 Department of Veterans Affairs assistance in developing claims.
38 CFR §3.303 Principles relating to service connection.
38 CFR §3.304 Direct service connection; wartime and peacetime.
38 CFR §3.307 Presumptive service connection for chronic, tropical, or prisoner-of-war related disease, disease associated with exposure to certain herbicide agents, or disease associated with exposure to contaminants in the water supply at Camp Lejeune; wartime and service on or after January 1, 1947.
38 CFR §3.309 Disease subject to presumptive service connection.
38 CFR §3.2400 Applicability of modernized review system
38 CFR §3.2500 Review of decisions
38 CFR §3.2501 Supplemental claims
38 CFR §3.2601 Higher-level review
38 USC 1110 & 1131 Basic entitlement
38 USC 5107 Claimant responsibility; benefit of the doubt
38 CFR §3.156 New evidence
38 CFR §3.306 Aggravation of preservice disability.
38 CFR §3.322 Rating of disabilities aggravated by service.
38 CFR §4.6 Evaluation of evidence.



3. Service connection for left knee meniscal tear.

Service connection may be granted for a disability which began in military service or was caused by some event or experience in service. (38 CFR 3.303) To establish entitlement to service-connected compensation benefits, the evidence must show three things: (1) An injury in military service or a disease that began in or was made worse during military service, or an event in service causing injury or disease; (2) A current physical or mental disability; (3) A relationship between the current disability and an injury, disease, or event in service, which is usually shown by medical records or medical opinions.

Active military service includes active duty or any period of active duty for training during which the individual concerned was disabled or died from a disease or injury incurred or aggravated in line of duty. "Active duty" means full-time duty in the Armed Forces, other than active duty for training. "Active duty for training" means full-time duty in the Armed Forces performed by Reserves for training purposes. Disabilities caused by a disease process cannot be service connected if they are discovered during a period of inactive duty for training. Service connection may be warranted for an injury incurred or aggravated while performing inactive duty for training. Service connection may also be warranted for an acute myocardial infarction, a cardiac arrest, or a cerebrovascular accident which occurred during inactive duty for training. (38 CFR 3.6)

Service connection for left knee meniscal tear is denied since this condition neither occurred in nor was caused by service. We did not find a link between your medical condition and military service.
(38 CFR 3.303, 38 CFR 3.304)

Service treatment records show complaints of knee pain in 2016 during active duty for training. The March 2016 x-rays of left knee were normal. A disability which began in service or was caused by some event in service must be considered "chronic" before service connection can be granted. Although there is a record of treatment in service for left knee pain, we did not find a link between your medical condition and military service. While your service treatment records reflect complaints, treatment, or a diagnosis similar to that claimed, the medical evidence supports the conclusion that a persistent disability was not present in service. (38 CFR 3.303, 38 CFR 3.304) The examiner opined your condition was less likely than not incurred in or caused by the claimed in-service injury, event or illness based on the review of the medical evidence with the following rationale: Condition began in boot camp, around November 2015. Patient was always running or kneeling in boot camp which caused her a great deal of pain. She had to start wrapping both knees in order to continue training. At the time, she felt extreme pain and was unable to bend her knees. Her patella was shifting and her knees would be swollen. She was given Ibuprofen to alleviate her pain and both her knees were wrapped. In MOS school, she underwent physical therapy. When she got home, patient underwent two left knee surgeries and physical therapy. The veteran is s/p meniscal repair left knee. After reviewing the records there was some left knee injury during service. However her exit exam stated that she use to have knee problems but after therapy it is doing fine. Her denial for line of duty request for multiple injuries including the knees was also denied as there are no records during reserve duty showing a mechanism of injury that the veteran re-injured or aggravated her left knee condition.



Favorable Findings identified in this decision:

You have been diagnosed with a disability. The VA contract examination in January 2020 listed a diagnosis of a left knee meniscal tear.

The evidence shows that a qualifying event, injury, or disease had its onset during your service. Service records show complaints of pain in the knees during your period of active duty for training in 2016.

Laws and Regulations applicable to this issue:

- 38 CFR §3.1 Definitions.
- 38 CFR §3.6 Duty periods.
- 38 CFR §3.102 Reasonable doubt.
- 38 CFR §3.103 Procedural due process and appellate rights.
- 38 CFR §3.104 Finality of decisions.
- 38 CFR §3.105 Revision of decisions.
- 38 CFR §3.151 Claims for disability benefits.
- 38 CFR §3.155 How to file a claim.
- 38 CFR §3.159 Department of Veterans Affairs assistance in developing claims.
- 38 CFR §3.303 Principles relating to service connection.
- 38 CFR §3.304 Direct service connection; wartime and peacetime.
- 38 CFR §3.307 Presumptive service connection for chronic, tropical, or prisoner-of-war related disease, disease associated with exposure to certain herbicide agents, or disease associated with exposure to contaminants in the water supply at Camp Lejeune; wartime and service on or after January 1, 1947.
- 38 CFR §3.309 Disease subject to presumptive service connection.
- 38 CFR §3.2400 Applicability of modernized review system
- 38 CFR §3.2500 Review of decisions
- 38 CFR §3.2501 Supplemental claims
- 38 CFR §3.2601 Higher-level review
- 38 USC 1110 & 1131 Basic entitlement
- 38 USC 5107 Claimant responsibility; benefit of the doubt
- 38 CFR §3.156 New evidence
- 38 CFR §3.306 Aggravation of preservice disability.
- 38 CFR §3.322 Rating of disabilities aggravated by service.
- 38 CFR §4.6 Evaluation of evidence.

4. Service connection for right hip femoral acetabular impingement syndrome.

Service connection may be granted for a disability which began in military service or was caused by some event or experience in service. (38 CFR 3.303) To establish entitlement to service-connected compensation benefits, the evidence must show three things: (1) An injury in military service or a disease that began in or was made worse during military service, or an event in service causing injury or disease; (2) A current physical or mental disability; (3) A relationship between the current disability and an injury, disease, or event in service, which is usually shown



by medical records or medical opinions.

Active military service includes active duty or any period of active duty for training during which the individual concerned was disabled or died from a disease or injury incurred or aggravated in line of duty. "Active duty" means full-time duty in the Armed Forces, other than active duty for training. "Active duty for training" means full-time duty in the Armed Forces performed by Reserves for training purposes. Disabilities caused by a disease process cannot be service connected if they are discovered during a period of inactive duty for training. Service connection may be warranted for an injury incurred or aggravated while performing inactive duty for training. Service connection may also be warranted for an acute myocardial infarction, a cardiac arrest, or a cerebrovascular accident which occurred during inactive duty for training. (38 CFR 3.6)

Service connection for right hip femoral acetabular impingement syndrome is denied since this condition neither occurred in nor was caused by service. We did not find a link between your medical condition and military service. (38 CFR 3.303, 38 CFR 3.304)

Your service treatment records do not contain complaints, treatment, or diagnosis for this condition during active duty. The evidence does not show an event, disease or injury in service. The records do not show this condition was incurred in the line of duty during a period of training. Although your private treatment records and the VA examination show a current diagnosis, we did not find a link between your medical condition and military service.

Favorable Findings identified in this decision:

You have been diagnosed with a disability. You have been diagnosed with a disability. The VA contract examination in January 2020 showed an assessment of femoral acetabular impingement syndrome.

Laws and Regulations applicable to this issue:

38 CFR §3.1 Definitions.
38 CFR §3.6 Duty periods.
38 CFR §3.102 Reasonable doubt.
38 CFR §3.103 Procedural due process and appellate rights.
38 CFR §3.104 Finality of decisions.
38 CFR §3.105 Revision of decisions.
38 CFR §3.151 Claims for disability benefits.
38 CFR §3.155 How to file a claim.
38 CFR §3.159 Department of Veterans Affairs assistance in developing claims.
38 CFR §3.303 Principles relating to service connection.
38 CFR §3.304 Direct service connection; wartime and peacetime.
38 CFR §3.307 Presumptive service connection for chronic, tropical, or prisoner-of-war related disease, disease associated with exposure to certain herbicide agents, or disease associated with exposure to contaminants in the water supply at Camp Lejeune; wartime and service on or after January 1, 1947.



38 CFR §3.309 Disease subject to presumptive service connection.
38 CFR §3.2400 Applicability of modernized review system
38 CFR §3.2500 Review of decisions
38 CFR §3.2501 Supplemental claims
38 CFR §3.2601 Higher-level review
38 USC 1110 & 1131 Basic entitlement
38 USC 5107 Claimant responsibility; benefit of the doubt
38 CFR §3.156 New evidence
38 CFR §3.306 Aggravation of preservice disability.
38 CFR §3.322 Rating of disabilities aggravated by service.
38 CFR §4.6 Evaluation of evidence.

5. Service connection for right knee strain.

Service connection may be granted for a disability which began in military service or was caused by some event or experience in service. (38 CFR 3.303) To establish entitlement to service-connected compensation benefits, the evidence must show three things: (1) An injury in military service or a disease that began in or was made worse during military service, or an event in service causing injury or disease; (2) A current physical or mental disability; (3) A relationship between the current disability and an injury, disease, or event in service, which is usually shown by medical records or medical opinions.

Active military service includes active duty or any period of active duty for training during which the individual concerned was disabled or died from a disease or injury incurred or aggravated in line of duty. "Active duty" means full-time duty in the Armed Forces, other than active duty for training. "Active duty for training" means full-time duty in the Armed Forces performed by Reserves for training purposes. Disabilities caused by a disease process cannot be service connected if they are discovered during a period of inactive duty for training. Service connection may be warranted for an injury incurred or aggravated while performing inactive duty for training. Service connection may also be warranted for an acute myocardial infarction, a cardiac arrest, or a cerebrovascular accident which occurred during inactive duty for training. (38 CFR 3.6)

Service connection for right knee strain is denied since this condition neither occurred in nor was caused by service. We did not find a link between your medical condition and military service.

(38 CFR 3.303, 38 CFR 3.304)

Service treatment records show complaints of knee pain. The separation assessment dated May 20, 2016 showed right knee pain secondary to overuse resolved. A disability which began in service or was caused by some event in service must be considered "chronic" before service connection can be granted. Although there is a record of treatment for knee pain during active duty for training, we did not find a link between your medical condition and military service. While your service treatment records reflect complaints, treatment, or a diagnosis similar to that claimed, the medical evidence supports the conclusion that a persistent disability was not present in service. (38 CFR 3.303, 38 CFR 3.304) The VA examiner concluded your current right knee



condition is less likely than not related to the complaints shown during service with the following rationale: Condition began in boot camp, around November 2015. Patient was always running or kneeling in boot camp which caused her a great deal of pain. She had to start wrapping both knees in order to continue training. At the time, she felt extreme pain and was unable to bend her knees. Her patella was shifting and her knees would be swollen. She was given Ibuprofen to alleviate her pain and both her knees were wrapped. In MOS school, she underwent physical therapy. When she got home, patient underwent two left knee surgeries and physical therapy. The veteran did not report right knee pain on her separation exam or during her reservist period. The Peninsula Orthopedics states the injury happened during active duty boot camp but there is a note stating hip and knee pain x 2 months during reserve duty time.

Favorable Findings identified in this decision:

You have been diagnosed with a disability. The VA contract examination in January 2020 listed an assessment of a right knee strain.

The evidence shows that a qualifying event, injury, or disease had its onset during your service. Service records show complaints of pain in the knees during your period of active duty for training in 2016.

Laws and Regulations applicable to this issue:

38 CFR §3.1 Definitions.
38 CFR §3.6 Duty periods.
38 CFR §3.102 Reasonable doubt.
38 CFR §3.103 Procedural due process and appellate rights.
38 CFR §3.104 Finality of decisions.
38 CFR §3.105 Revision of decisions.
38 CFR §3.151 Claims for disability benefits.
38 CFR §3.155 How to file a claim.
38 CFR §3.159 Department of Veterans Affairs assistance in developing claims.
38 CFR §3.303 Principles relating to service connection.
38 CFR §3.304 Direct service connection; wartime and peacetime.
38 CFR §3.307 Presumptive service connection for chronic, tropical, or prisoner-of-war related disease, disease associated with exposure to certain herbicide agents, or disease associated with exposure to contaminants in the water supply at Camp Lejeune; wartime and service on or after January 1, 1947.
38 CFR §3.309 Disease subject to presumptive service connection.
38 CFR §3.2400 Applicability of modernized review system
38 CFR §3.2500 Review of decisions
38 CFR §3.2501 Supplemental claims
38 CFR §3.2601 Higher-level review
38 USC 1110 & 1131 Basic entitlement
38 USC 5107 Claimant responsibility; benefit of the doubt
38 CFR §3.156 New evidence
38 CFR §3.306 Aggravation of preservice disability.



38 CFR §3.322 Rating of disabilities aggravated by service.
38 CFR §4.6 Evaluation of evidence.

6. Service connection for right shoulder condition.

Service connection may be granted for a disability which began in military service or was caused by some event or experience in service. (38 CFR 3.303) To establish entitlement to service-connected compensation benefits, the evidence must show three things: (1) An injury in military service or a disease that began in or was made worse during military service, or an event in service causing injury or disease; (2) A current physical or mental disability; (3) A relationship between the current disability and an injury, disease, or event in service, which is usually shown by medical records or medical opinions.

Active military service includes active duty or any period of active duty for training during which the individual concerned was disabled or died from a disease or injury incurred or aggravated in line of duty. "Active duty" means full-time duty in the Armed Forces, other than active duty for training. "Active duty for training" means full-time duty in the Armed Forces performed by Reserves for training purposes. Disabilities caused by a disease process cannot be service connected if they are discovered during a period of inactive duty for training. Service connection may be warranted for an injury incurred or aggravated while performing inactive duty for training. Service connection may also be warranted for an acute myocardial infarction, a cardiac arrest, or a cerebrovascular accident which occurred during inactive duty for training. (38 CFR 3.6)

Service connection for right shoulder condition is denied since this condition neither occurred in nor was caused by service. We did not find a link between your medical condition and military service. (38 CFR 3.303, 38 CFR 3.304)

Your service treatment records do not contain complaints, treatment, or diagnosis for this condition during active military service. The evidence does not show an event, disease or injury in service. There is no evidence showing your right shoulder condition was incurred in the line of duty during a period of training. Although your private treatment records and the VA examination show a current diagnosis, we did not find a link between your medical condition and military service.

Favorable Findings identified in this decision:

You have been diagnosed with a disability. Records from Seton Medical Center and Peninsula Orthopedics show treatment/diagnosis for the right shoulder impingement on March 30, 2018.

Laws and Regulations applicable to this issue:

38 CFR §3.1 Definitions.
38 CFR §3.6 Duty periods.
38 CFR §3.102 Reasonable doubt.



38 CFR §3.103 Procedural due process and appellate rights.
38 CFR §3.104 Finality of decisions.
38 CFR §3.105 Revision of decisions.
38 CFR §3.151 Claims for disability benefits.
38 CFR §3.155 How to file a claim.
38 CFR §3.159 Department of Veterans Affairs assistance in developing claims.
38 CFR §3.303 Principles relating to service connection.
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38 CFR §3.156 New evidence
38 CFR §3.306 Aggravation of preservice disability.
38 CFR §3.322 Rating of disabilities aggravated by service.
38 CFR §4.6 Evaluation of evidence.

REFERENCES:

Title 38 of the Code of Federal Regulations, Pensions, Bonuses and Veterans' Relief contains the regulations of the Department of Veterans Affairs which govern entitlement to all veteran benefits. For additional information regarding applicable laws and regulations, please consult your local library, or visit us at our website, www.va.gov.



Fraud Prevention: Protect Your Benefits

Please contact the VA ***immediately*** at 1-800-827-1000 if you suspect your information is compromised.

- You receive correspondence from VA concerning a claim, and you don't remember filing a claim contact the VA at 1-800-827-1000.
- You receive correspondence requesting a processing fee prior to releasing benefit payments contact the VA at 1-800-827-1000.
- VA may check in with you by phone, email, or text message. The VA will **never ask for personal information via email**. This includes verification of your SSN, address, and/or bank information. If you are unsure about any call, email, or text, confirm details directly with the VA.
- VA **does not threaten** claimants with jail or lawsuits.
- Be cautious of telephone numbers on caller ID. Scammers may change the telephone number (spoofing) to make a call appear to come from a different person or place.
- When in doubt, hang up and call VA directly at 1-800-827-1000, or call your Power of Attorney representative (DAV, VFW, etc.).
- **Do not ignore emails or letters** from the VA notifying you of an update to direct deposit or eBenefits account information. If you don't remember making changes, it could be the first sign your information was compromised.
- Use secure, unique passwords, and two factor identification where available. To establish a more secure logon for Vets.gov and ebenefits.va.gov with two factor identification create an account via ID.me at <https://api.id.me/en/registration/new>
- Monitor your accounts regularly, respond to fraud alerts and report unauthorized transactions promptly.
- To learn more about protecting yourself from fraud, and how to report it visit <https://www.va.gov/oig/hotline/default.asp>, or go to VA.gov and search "Office of Inspector General".
- For more details on how to avoid scams go to <https://www.fcc.gov/veterans-targeted-benefits-scams>
- Download free financial scam awareness resources at <https://www.consumerfinance.gov/about-us/blog/helping-prevent-scams-targeted-veterans/>
- Get up-to-date information on fraud and scams from the Federal Trade Commission <https://public.tableau.com/profile/federal.trade.commission>