(VSR VIP Pre-D)

Posttraumatic Stress Disorder (PTSD)

Student Handout

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Lesson Objectives

After this training, the trainee will be able to:

* Define PTSD and the three types of PTSD stressors
* Identify the evidentiary requirements for PTSD
* Recognize when a claimed stressor can and cannot be corroborated
* Recognize when development action is needed
* Understand the basics of the PTSD personal trauma claims process

References

All M21-1 references are found in the [Compensation Pension Knowledge Management Portal](https://vaww.compensation.pension.km.va.gov/):

* [CFR 3.304(f), Posttraumatic stress disorder](https://www.ecfr.gov/cgi-bin/text-idx?SID=ad275643432556b9dda942343fb89296&mc=true&node=pt38.1.3&rgn=div58#se38.1.3_1304)
* [M21-1, Part III, Subpart iv, 4.O, Mental Disorders](https://vaww.vrm.km.va.gov/system/templates/selfservice/va_kanew/help/agent/locale/en-US/portal/554400000001034/content/554400000076270/M21-1-Part-III-Subpart-iv-Chapter-4-Section-O-Mental-Disorders?articleViewContext=article_view&isFeatured=undefined&topic=undefined)
* [M21-1, Part IV, Subpart ii, Chapter 1.D, Claims for Service Connection (SC) for Post-Traumatic Stress Disorder (PTSD)](https://vaww.vrm.km.va.gov/system/templates/selfservice/va_kanew/help/agent/locale/en-US/portal/554400000001034/content/554400000014906/M21-1-Part-IV-Subpart-ii-Chapter-1-Section-D-Claims-for-Service-Connection-SC-for-Post-Traumatic-Stress-Disorder-PTSD?articleViewContext=article_view&isFeatured=undefined&topic=undefined)
* [Stressor Verification Site](https://vbaw.vba.va.gov/bl/21/rating/stressor/general.htm)

Topic 1: Definition and Stressors

**Definition**

Posttraumatic stress disorder (PTSD) is a type of **anxiety disorder** that is triggered by a **traumatic event**. An individual can develop PTSD when they **experience or witness** an event that causes **intense fear, helplessness, or horror or involves the threat of injury or death**. PTSD may occur **soon after the major trauma** or it can be **delayed for a few months or even years**.

**Types of PTSD Stressors**

**[Combat](https://vaww.compensation.pension.km.va.gov/system/templates/selfservice/va_ka/portal.html?encodedHash=%23!agent%2Fportal%2F554400000001034%2Farticle%2F554400000014906%2FM21-1-Part-IV-Subpart-ii-Chapter-1-Section-D-Claims-for-Service-Connection-SC-for-Post-Traumatic-Stress-Disorder-PTSD%3FfromQuery%3DPTSD%20combat):** Personal participation in events constituting an actual fight or encounter with a military foe or hostile unit of instrumentality. It includes presence during such events either as a combatant or servicemember performing duty, in support of combatants, such as providing medical care to combatants.

Example: The Veteran served as a combat medic during World War II with service at the Battle of the Bulge.

**Former Prisoner of War:** A former prisoner of war (FPOW) is a person who, while serving in the active military, naval or air service, was forcibly detained or interned in the line of duty by an enemy or foreign government, the agents of either, or a hostile force.

To be considered a former prisoner of war, a serviceperson must have been forcibly detained or interned under circumstances comparable to those under which persons generally have been forcibly detained or interned by enemy governments during periods of war. Such circumstances include, but are not limited to, physical hardships or abuse, psychological hardships or abuse, malnutrition, and unsanitary conditions. Each individual member of a particular group of detainees or internees shall, in the absence of evidence to the contrary, be considered to have experienced the same circumstances as those experienced by the group.

**Fear-based:** The veteran experienced, witnessed, or was confronted with an event or circumstance that involved actual or threatened death or serious injury, or a threat to the physical integrity of the veteran or others, such as from an actual or potential improvised explosive device; vehicle-imbedded explosive device; incoming artillery, rocket, or mortar fire; grenade; small arms fire, including suspected sniper fire; or attack upon friendly military aircraft, and the veteran's response to the event or circumstance involved a psychological or psycho-physiological state of fear, helplessness, or horror.

Example: The Veteran served in Bosnia from 1994 to 1995. He constantly heard about terrorist attacks and witnessed the results of these attacks. Because of these events, he was in constant fear for his life.

**Non-combat:** These circumstances may include natural disasters such as fires, floods, earthquake, vehicular or airplane crashes. The stressor may not be limited to a single dramatic incident but may also be cumulative, like duty in a burn care unit or grave registration unit, the liberation of POW camps, etc.

**[Personal trauma](https://vaww.compensation.pension.km.va.gov/system/templates/selfservice/va_ka/portal.html?encodedHash=%23!agent%2Fportal%2F554400000001034%2Farticle%2F554400000014201%2FM21-1%2C%20Part%20III%2C%20Subpart%20iv%2C%20Chapter%204%2C%20Section%20H%20-%20Mental%20Disorders):** An event of human design that threatens or inflicts harm, such as physical assault, battery, robbery, mugging, and stalking. It is often violent and may be directed against a male or female.

**Military Sexual Trauma (MST):** A subset of personal trauma that refers to sexual harassment, sexual assault, or rape that occurs in a military setting.

Topic 2: Evidentiary Requirements

Service-Connection Requirements

Requirement of all three elements present while requesting examinations apply to claims for PTSD. For PTSD to be service connected, there must be:

* Element 1: medical evidence diagnosing the condition,
* Element 2: evidence the in-service event (or stressor) occurred, **and**
* Element 3: a nexus between the in-service stressor and the diagnosed condition.

Elements one and three are handled no differently than a normal claim for service-connection. Servicemembers do not generally receive a diagnosis of a mental condition while in-service. Because of this, the VSR should look for evidence of an in-service stressor, in addition to medical evidence of a mental condition.

These in-service stressors must be supported by credible evidence.

Credible evidence:

* documents the Veteran’s participation in the event,
* indicates the Veteran served in the immediate area and at the particular time of the event, **and**
* supports the description of the event.

**Types of Evidence**

Primary evidence is generally considered the most reliable source for corroborating in-service stressors and should be carefully reviewed when corroboration is required. It is typically obtained from the National Archives and Records Administration (NARA) or Department of Defense (DoD) entities, such as service departments, the Joint Services Records Research Center (JSRRC), and the Marine Corps Archives and Special Collections (MCASC).

Primary individual evidence includes:

* service personnel records and pay records
* military occupation evidence
* hazard pay records
* military performance reports
* verification that the Veteran received Combat/Imminent Danger/Hostile Fire Pay

Primary unit individual evidence includes:

* unit and organizational histories
* daily staff journals
* operational reports-lessons learned (ORLLs)
* after action reports (AARs)
* radio logs, deck logs, and ship histories
* muster rolls
* command chronologies and war diaries, and
* monthly summaries and morning reports.

***Be careful when using unit evidence to corroborate stressors. Ensure that the Veteran was in the unit around the same time and in the same general location.***

Many of the unit documents listed above are available on the Compensation Service Intranet site, [Stressor Verification](http://vbaw.vba.va.gov/bl/21/rating/stressor/general.htm).

Review the following secondary sources of evidence critically and carefully for information confirming participation in combat or to otherwise corroborate a claimed in-service stressor when corroboration is required:

* buddy statements
* contemporaneous letters and diaries
* newspaper archives, and
* information from VBA-sanctioned websites, which may be accessed through the [PTSD Rating Job Aid website](http://vbaw.vba.va.gov/bl/21/rating/rat06.htm).

Combat Medals

If military records confirm a veteran received one of the awards/decorations listed in [M21-1 Part IV, Subpart ii, 1, D, Claims for Service Connection (SC) for Post-Traumatic Stress Disorder (PTSD)](https://vaww.vrm.km.va.gov/system/templates/selfservice/va_kanew/help/agent/locale/en-US/portal/554400000001034/content/554400000014906/M21-1-Part-IV-Subpart-ii-Chapter-1-Section-D-Claims-for-Service-Connection-SC-for-Post-Traumatic-Stress-Disorder-PTSD?articleViewContext=article_view&isFeatured=undefined&topic=undefined), then the occurrence of an in-service stressor may be conceded and VA will not need to initiate special development.

A DD Form 214 or other documents contained in the Official Military Personnel File (OMPF) (also referred to as the “201” file) may confirm receipt of one of these awards/decorations.

Certain medals, such as a Bronze Star Medal or Commendation Medal, do not indicate combat unless they were awarded with a “V” device.

**Veteran’s Lay Testimony**

A Veteran’s lay testimony alone may, under specified circumstances, establish an in-service stressor for purposes of establishing service-connection for PTSD if:

* PTSD is diagnosed in service, and the stressor is related to that service, **or**
* the stressor is related to the Veteran’s:
  + engagement in combat with the enemy,
  + experience as an FPOW as defined by [38 CFR 3.1(y)](http://www.ecfr.gov/cgi-bin/text-idx?SID=fa147f1fcb9203350440f9242f1b8e27&node=se38.1.3_11&rgn=div8),
  + fear of hostile military or terrorist activity, **or**
  + duties as a drone aircraft crew member.

**Hostile Locations**

[M21-1 IV.ii.1.D.3.i. Establishing a Stressor Related to Fear of Hostile Military or Terrorist Activity](https://vaww.vrm.km.va.gov/system/templates/selfservice/va_kanew/help/agent/locale/en-US/portal/554400000001034/content/554400000014906/M21-1-Part-IV-Subpart-ii-Chapter-1-Section-D-Claims-for-Service-Connection-SC-for-Post-Traumatic-Stress-Disorder-PTSD?query=0781)

Evaluation of evidence for service in a location associated with hostile military or terrorist activity must be done on a case-by-case basis. The fear-based regulation is intended to encompass military service not involving direct combat but where there was always a potential for hostile military or terrorist activity. The list below includes examples of service in areas of hostile military or terrorist activity. The list is not all-inclusive.

* Service along the Korean demilitarized zone (DMZ), which separates North from South Korea, has been a location of hostile military activity since the Korean War armistice of 1953, whereas service on U.S. bases in the rest of South Korea generally has not been.
* Service aboard a ship in the offshore “blue waters” of Vietnam or service in Thailand for which the Veteran received the Vietnam Service Medal or Vietnam Campaign Medal is sufficient to establish service in a potentially hostile military environment.
* The receipt of military awards such as, but not limited to, the Vietnam Service or Campaign Medal, Kuwait Liberation Medal, Iraq Campaign Medal, and Afghanistan Campaign Medal is generally considered evidence of service in an area of potential hostile military or terrorist activity.

Combat/Imminent Danger/Hostile Fire Pay may be requested through the Veterans Information Solution (VIS).

Drone Aircraft Crewmembers

The Global War on Terror has seen expansive use of armed drone aircraft. Drone aircraft, such as the Predator and Reaper, have seen extensive combat action on the battlefield, performing various missions to include destroying enemy vehicles, installations, and high-profile targets.

A Veteran’s military occupation may be specified on his/her *DD Form 214* or in service personnel records.

Drone aircraft crew members may develop PTSD as a result of their service. Accordingly, if a Veteran, who was a drone aircraft crew member, has a medical diagnosis of PTSD, and the PTSD is linked by medical evidence to service as a drone aircraft crew member, service connection for PTSD may be granted under [§ 3.304(f)](http://www.ecfr.gov/cgi-bin/text-idx?SID=329d57067d3fe56d8802d2a9835b0fb3&node=se38.1.3_1304&rgn=div8).

Non-Combat Stressors

Because of the varied nature of non-combat stressors, these events must be corroborated by credible evidence on a factual and case-by-case basis. The evidence must show that the Veteran served in the immediate area of the non-combat event.

Often these events will not be documented in a veteran’s personnel record. Be sure to investigate all appropriate avenues. Below are some examples of evidence sources. This list is not all inclusive.

* Veteran’s service treatment records
* civilian and military police reports
* news articles from reputable sources
* credible websites
* unit records or deck logs

Topic 3: Stressor Corroboration

**Stressor Corroboration Review**

Before developing, the VSR should review the evidence of record. If there is no stressor information of record, development will need to be undertaken. If stressor information is of record, the VSR will need to review the information for sufficiency. If the stressor information is not sufficient, development will need to be undertaken. If the stressor information is sufficient, the VSR must attempt to corroborate the stressor. If the stressor cannot be corroborated by the VSR, then they must either route the claim to the JSRRC Coordinator for further research or route the claim to the RVSR for a decision. If the stressor can be corroborated, an exam or decision will be needed.

To concede a **combat stressor**, you need:

* evidence of a combat medals **or**
* other evidence of combat

To concede a **fear-based stressor**, you need:

* evidence of service in a hostile area **and**
* a stressor consistent with the Veteran’s service that relates to fear of hostile military or terrorist actions

To concede a **stressor for drone aircraft crewmembers**, you need:

* evidence of service as an armed drone aircraft crewmember **and**
* a stressor consistent with the Veteran’s service that relates to the Veteran’s service as an armed drone aircraft crewmember

To concede a **non-combat stressor**, you need:

* evidence that factually corroborates the non-combat event

**Annotating Evidence**

When sufficient evidence is received to concede a claimed stressor,

* ensure the evidence is properly uploaded to the electronic claims folder (eFolder), **and**
* edit the subject line of the relevant document(s) used to concede the PTSD stressor using the following format:  
  [Nature of stressor], pg. [number].

For more information on uploading documents to the eFolder and editing document properties, see the

* [VBMS Core User Guide](http://vbaw.vba.va.gov/VBMS/Resources_Technical_Information.asp)*,* **and**
* [M21-1, Part III, Subpart ii, 4.H.1](https://vaww.vrm.km.va.gov/system/templates/selfservice/va_kanew/help/agent/locale/en-US/portal/554400000001034/content/554400000014133/M21-1-Part-III-Subpart-ii-Chapter-4-Section-H-Electronic-Claims-Folder-eFolder-Maintenance)

**JSRRC Coordinator**

The JSRRC Coordinator is the primary point of contact within each Regional Office (RO) for all procedures related to requests for corroboration of stressors unrelated to MST or personal trauma. Although this title refers to JSRRC, the JSRRC Coordinator also has jurisdiction over requests to MCASC and NARA.

The JSRRC Coordinator or individual acting in the capacity of a JSRRC Coordinator

* determines whether or not submission of a request to JSRRC, MCASC, or NARA for stressor verification is appropriate
* serves as the MCASC and NARA point of contact for issues related to records requests
* personally submits all of the RO’s requests for stressor corroboration
* notifies JSRRC, MCASC, or NARA when further action on a pending research request is no longer necessary, such as when evidence is received that verifies the claimed stressor or the claim is withdrawn altogether, and
* forwards inquiries from the RO regarding JSRRC-related issues to the Compensation Service JSRRC mailbox

The following general criteria must be met before the JSRRC Coordinator may submit a request for corroboration of a claimed stressor to JSRRC, MCASC, or NARA:

* the required development is completed, but the claimed stressor cannot be conceded **and**
* the claims folder contains minimum information needed to allow additional research

At a minimum, the following information must be of record:

* a stressor that can be corroborated
* the location where the incident took place
* the approximate date (within a two-month period) of the incident, **and**
* the unit of assignment at the time the stressful event occurred.

If the Veteran mentions a casualty, the Veteran should provide a complete name.

**Do *not* schedule a VA examination before receiving corroboration of the claimed in-service stressor.**

**A diagnosis of PTSD is not a prerequisite for initiating the stressor verification process.**

To route a claim to the JSRRC Coordinator:

* establish a VBMS Core tracked item using the JSRRC COORDINATOR REVIEW option from the COMPMGT drop-down menu, and
* add the JSRRC Request special issue for routing the request to the JSRRC Coordinator.

For more information on National Work Queue (NWQ) procedures for routing the request to the JSRRC Coordinator, see the [NWQ Playbook](https://vaww.vashare.vba.va.gov/sites/OFOPlaybooks/Shared%20Documents/Forms/AllItems.aspx).

Topic 4: Development

**PTSD Development**

Remember, a claim for PTSD is no different than a claim for any other condition in that there are four general categories of development:

* Veteran
* Federal Records
* Private Medical Records
* Exam

Even if VA can corroborate the stressor, development for STRs, personnel records, private medical records, and any other relevant records is still required.

**Development – Veteran**

[M21-1 IV.ii.1.D.2.i. VBMS Paragraphs for Stressor Development](https://vaww.vrm.km.va.gov/system/templates/selfservice/va_kanew/help/agent/locale/en-US/portal/554400000001034/content/554400000014906/M21-1-Part-IV-Subpart-ii-Chapter-1-Section-D-Claims-for-Service-Connection-SC-for-Post-Traumatic-Stress-Disorder-PTSD?query=PTSD)

If the Veteran did not provide a stressor statement, VA must develop to the Veteran. Generally, this development is accomplished by sending the Veteran a supplemental letter with a VA Form 21-0781. A VA Form 21-0781 is not required if the stressor statement was provided on another form.

|  |  |
| --- | --- |
| **If a Veteran…** | **Then use the VBMS development paragraph named …** |
| * provides a stressor involving combat or fear of hostile military or terrorist activities | ***PTSD – Need stressor details/med evid combat-related incdnt*** |
| * provides a stressor involving:  a non-combat incident, or * does not mention any stressor, and * no VA Form 21-0781 submitted | ***PTSD – Need stressor details/med evid of stressful incdnt*** |
| * provides a stressor involving a personal trauma incident to include MST, and * no VA Form 21-0781 or VA Form 21-0781a submitted. | ***PTSD – Need stressor details/med evid personal trauma incdnt*** |
| * submits a stressor that does not contain sufficient details to allow corroboration | ***PTSD – Follow up for Stressor Details*** |

For more information on VBMS development paragraphs, see M21-1 Part IV, Subpart ii, 1.D.2.i.

Development by telephone is strongly encouraged when appropriate. The VA may phone the Veteran and request a stressor statement. If a call is made, we want to ensure we are compassionate during the conversation. We need the minimum required information to proceed with development. Some Veterans may have a hard time disclosing the information and may feel more comfortable completing the form. Ensure you display compassion when speaking with Veterans regarding this sensitive topic.

CAPRI and other medical records can also provide valuable information regarding a Veteran’s personal stressor as they may have spoken with a Social Worker or even a Psychiatrist about their stressor details. Prior to speaking with the Veteran, it is a good idea to review CAPRI first.

**If a veteran does not state the nature of the event that caused PTSD and the Veteran is a combat veteran, development is not needed. VA assumes that the stressor is combat-related. If the VA exam states the stressor is not combat-related, then the VSR should develop at that time.**

Do not develop for a stressor statement:

* if the stressor can be corroborated based on the evidence of record,
* the Veteran has already provided a sufficient stressor statement, **or**
* VA has already requested this information.

**Do not develop for a VA Form 21-0781a unless the Veteran has identified a personal trauma stressor.**

The Veteran must be excluded from the FDC process, if the Veteran submits his claim on a VA Form 21-526EZ and:

* the Veteran did not provide a sufficient stressor statement **or**
* the stressor cannot be corroborated.

**Development - STRs**

In-service mental health treatment records are not stored with the STRs.

They are maintained with the records of a

* military treatment facility (MTF), or
* civilian treating facility.

**These records are typically destroyed five years after the end of the year in which the case is closed.**

In order to develop for service department records of in-service mental health treatment administered at an MTF, refer to guidance on clinical record requests as described in

* [M21-1, Part III, Subpart iii, 2.B.4](https://vaww.vrm.km.va.gov/system/templates/selfservice/va_kanew/help/agent/locale/en-US/portal/554400000001034/content/554400000014155/M21-1,-Part-III,-Subpart-iii,-Chapter-2,-Section-B---Migration-of-Service-Records-and-the-Procedures-for-Obtaining-Them), **and**
* [M21-1, Part III, Subpart iii, 1.C.3](https://vaww.vrm.km.va.gov/system/templates/selfservice/va_kanew/help/agent/locale/en-US/portal/554400000001034/content/554400000014156/M21-1,-Part-III,-Subpart-iii,-Chapter-1,-Section-C---Requesting-Evidence-From-Federal-Record-Custodians).

If a service member obtains treatment "off-base" at a civilian facility, any mental health records created during the course of treatment are not automatically associated with the service member's STRs. It is the responsibility of the patient and civilian provider to transfer records of care to the service department.

Records retained by a civilian provider are not records in the custody of a Federal department or agency. They are not forwarded for long-term storage to the National Personnel Records Center (NPRC) and cannot be obtained through PIES/Defense Personnel Records Image Retrieval System (DPRIS).

To obtain identified civilian treatment records, follow procedures for requesting non-Federal or private records.

**Development – Other Medical Records**

Request hospital reports and clinical records if the Veteran indicates pertinent treatment in a Department of Veterans Affairs (VA) facility, Vet Center, or elsewhere.

**Vet Center and Private Medical Records require a VA Form   
21-4142 and 4142a. This development would also exclude the Veteran from the FDC process.**

**Development – Personnel Record**

Service personnel records may be obtained using either PIES or DPRIS based on the date of the Veteran’s discharge, as described in [M21-1, Part III, Subpart iii, 2.D.1.a](https://vaww.vrm.km.va.gov/system/templates/selfservice/va_kanew/help/agent/locale/en-US/portal/554400000001034/content/554400000014158/M21-1,-Part-III,-Subpart-iii,-Chapter-2,-Section-D---Requesting-Information-and-Records-Through-the-Personnel-Information-Exchange-System-(PIES)).

**If the claim is being processed in VBMS Core, all PIES requests for the personnel record should be accomplished using the O50 request code.**

**Development – Exams to Establish Service Connection**

Follow the steps in M21-1 IV.ii.1.D.3.c.to determine if there is credible supporting evidence that a claimed in-service stressor occurred and ensuring all necessary service records have been requested.

If the claimed stressor can be conceded based on the Veteran’s lay testimony alone (with supporting evidence) or throughout the stressor verification process, annotate the claims folder and review the claims folder to determine if an PTSD initial exam has been completed.

If one has not been completed, request an examination and include a statement in the remarks section that summarizes the corroborated stressor. This evidence allows the examiner to accept the Veteran’s own description of the specific events without further corroboration.

**Do not request an examination until development for credible supporting evidence of the claimed stressor is complete.**

**This DBQ must be completed by a VA or contract examiner.**

Topic 5: Personal Trauma

**Personal Trauma**

***Personal trauma*** for the purpose of VA disability compensation claims based on PTSD refers broadly to stressor events involving harm perpetrated by a person who is not considered part of an enemy force.  Examples: assault, battery, robbery, mugging, stalking, harassment.

The legal elements of claims for service connection for PTSD based on personal trauma are the same as for any other PTSD claim.

There must be credible supporting evidence that the claimed in-service stressor occurred. This means a veteran’s lay testimony alone stating he or she was the victim of a personal trauma is **not** sufficient to establish that the claimed stressor occurred.

Veterans claiming service connection based on personal trauma face unique problems in documenting their claims. Because these events are extremely personal and sensitive, they may not be reported. There may be no clear evidence of the event in service records.

Unfortunately, it may be especially difficult for claimants to produce credible supporting evidence of a personal trauma and careful, sympathetic probing may be needed to resolve the claim.

It is often necessary to seek alternative evidence, such as:

* law enforcement authorities/police reports,
* counseling facility or health clinic,
* medical reports from civilian physicians,
* personal diaries or journals, and
* statements from family members/roommates/fellow service members, etc.

If primary evidence, such as STRs and service personnel records, contain no explicit documentation that personal trauma occurred, and alternative sources of evidence do not provide credible supporting evidence of the trauma, evidence of behavioral changes around the time of, and after, the incident(s), may constitute a marker of a personal trauma PTSD stressor.

The term ***marker*** means an indicator of the effect or consequences of the personal trauma on the Veteran. A marker could be one or more behavioral events, or a pattern of changed behavior. Even if there is no reference to the personal trauma, evidence of the behavior changes below may circumstantially support the *possibility* that the claimed stressor occurred.

Evidence that may be a marker of trauma includes but is not limited to

* increased use or abuse of leave without an apparent reason, such as family obligations or family illness
* episodes of depression, panic attacks, or anxiety without identifiable reasons
* visits to a medical or counseling clinic or dispensary without a specific diagnosis or specific ailment
* use of, or increased interest in, pregnancy tests or tests for sexually-transmitted diseases (including HIV) around the time of the incident
* sudden requests that the Veteran’s military occupational series or duty assignment be changed without other justification
* changes in performance and performance evaluations
* increased or decreased use of prescription medications
* increased use of over-the-counter medications
* alcohol or drug abuse
* increased disregard for military or civilian authority
* obsessive behavior such as overeating or undereating
* unexplained economic or social behavior changes
* treatment for physical injuries around the time of the claimed trauma, but not reported as a result of the trauma, **and/or**
* the breakup of a primary relationship.

**Personal Trauma Development**

All development actions on claims involving MST must *only* be taken by an individual who has

* completed the required MST Training Performance Support System module(s), and
* been designated by an RO as an MST claims processor.

If you need to contact an Military Sexual Trauma Coordinator you can find a listing for each regional office at: [*http://www.benefits.va.gov/benefits/mstcoordinators.asp*](http://www.benefits.va.gov/benefits/mstcoordinators.asp)*.*

**Personal Trauma Exam Requests**

Follow the steps involved in M21-1 IV.ii.1.D.5.d. to obtain evidence that constitutes a potential marker. After the finding of evidence of behavioral changes around the time of, and after, the incident(s) which may constitute a marker of a personal trauma PTSD stressor, annotate the claim folder, complete all other required development, and obtain an examination.

In cases where the only evidence of the personal trauma stressor are behavioral changes that may be markers of the claimed trauma, an MST opinion is needed because the marker itself does not establish the occurrence of the stressor, but the opinion of the qualified examiner can provide credible and probative evidence to make that determination.

To ensure the examination request language is adequate, use the [Exam Request Builder](https://vbaw.vba.va.gov/bl/21/rating/rat00.htm) or [Supplemental Language Matrix](https://vaww.vrm.km.va.gov/system/templates/selfservice/va_kanew/help/agent/locale/en-US/portal/554400000001034/content/554400000105052/Supplemental-Language-Matrix), as appropriate, and select the necessary PTSD personal trauma (non-MST) medical opinion template language.

Also, ensure that all relevant evidence is identified in the exam request and in VBMS Core for the examiner to review

**MST Processing**

Every Regional Offices has at least one specialist, the MST Outreach Coordinator, who reviews MST claims before development begins. This person will initiate contact with Veteran and will direct further development.

**Only VSRs and RVSRs who have completed the MST training curriculum may process MST claims.**

The special issue indicator utilized for claims involving any condition, mental or physical (including PTSD), resulting from MST, would be the “Military Sexual Trauma (MST)”.