**DIC GLOSSARY TEXT**

**PREMSUMPTIVES (GENERAL)**

There is no evidence that the condition(s) causing or contributing to death manifested to a compensable degree within one year from the date of military discharge for consideration under 38 CFR 3.309 (a).

ALWAYS ADD IF USED AT BOTTOM  (38 CFR 3.307, 38 CFR 3.309, 38 CFR 3.312)

**IF STR ARE AVAILABLE**

The Veteran's service treatment records are silent for any findings, complaints, or treatment of the Veteran's causes of death.

**IF STR ARE NOT AVAILABLE**

**FIRE**

The Veteran's service treatment records (STR) are unavailable for review. On [DATE] VA requested service treatment records from all potential sources. The National Personnel Records Center (NPRC) reported that the records may have been destroyed in a fire at the Records Center in 1973 in their response back to our request on [DATE].

The VA notified you service treatment records were fire-related in our VA development letter dated [DATE]. We asked you to send in a completed NA Form 13055 in detail to attempt to obtain any records. As the date of this rating we have not received this form. If these records are located at a later date, we will reconsider this decision.

\*We received this form back from you on [DATE], however our letter dated [DATE] explained that the information provided was still insufficient to obtain these records

\*The only record(s) the VA was able to obtain was the Veteran's Report of Medical Examination at separation from service which was negative for evidence of the causes of death.

**GENERAL UNAVAILBLE STR**

The Veteran’s service treatment records are unavailable for review, efforts to obtain service treatment records from all potential sources were unsuccessful. Our letter to you dated [DATE] informed you that VA was unable to obtain these records.

On [DATE] VA requested service treatment records from all potential sources. The National Personnel Records Center (NPRC) reported that the records were unavailable on [DATE]. Our letter dated [DATE] informed you to send in any service treatment records that you have may in your possession. As the date of this rating we have not received a response to this letter. If complete service treatment records are located at a later date, we will reconsider this decision.

**EVIDENCE ADD IN VBMS-R**

Personnel information exchange system (PIES) request for STR received [DATE].

Personnel information exchange system (PIES) final response indicating Veteran’s records were fire-related and thus unavailable received [DATE].

Personnel information exchange system (PIES) final response indicating Veteran’s records were unavailable received [DATE].

**VAMC RECORDS**

The VA obtained and reviewed the VAMC treatment records as outlined above in the “Evidence” section. However, the VAMC treatment records do not show that the Veteran’s death was due to military service.

**OR**

The VA obtained and reviewed the VAMC treatment records as outlined above in the “Evidence” section. These records show the treatment and diagnosis for multiple medical conditions, including the causes of the Veteran’s death. However, the VAMC treatment records do not show that the Veteran’s death was due to military service.

**OR**

Our electronic search for VAMC treatment records was negative for any records one year prior to the Veteran’s death to present.

**OR**

Your application for benefits identified VA medical center records from {} through {} were pertinent to your claim. Records which immediately preceded death were retrieved and reviewed and did not show any relation between the causes of death and military service. It was determined inherently incredible that records further back which preceded death by over {} years would be of any merit in sustaining this claim, therefore they were not retrieved.

**PRIVATE MED RECORDS (ONLY IF SUBMITTED AS EVIDENCE)**

The VA obtained and reviewed private treatment records as outlined above in the “Evidence” section. However, these records do not show that the Veteran’s death was due to military service.

**OR**

The VA obtained and reviewed private treatment records as outlined above in the “Evidence” section. These records show the treatment and diagnosis for multiple medical conditions, including the causes of the Veteran’s death. However, these private treatment records do not show that the Veteran’s death was due to military service.

**OR**

Private medical records requested from [name of provider], but not received.

You submitted a VA authorization Form 21-4142a so that the VA could attempt to obtain the Veteran’s private medical records on your behalf, however this form did not identify any providers.

On your application for benefits you listed treatment records from [PROVIDER], efforts to obtain these records were unsuccessful. Our letter to you dated [DATE] informed you that VA was unable to obtain these records.

The Veteran responded to our request on [DATE], however we received a negative response that records could not be identified on [DATE]. We attempted to retrieve records from [PROVIDER] however we received a negative response that records could not be identified on [DATE].

**SPECIAL PRESUMPTIVES**

**RVN Agent Orange**

Under the provisions of 38 USC 1116, VA has determined that presumption of service connection based on certain locations associated with herbicide exposure during military service is not warranted for any conditions other than those for which VA has found a positive association between the condition and such exposure. VA has determined that a positive association exists between exposure to herbicides and the subsequent development of the following conditions: AL amyloidosis; chloracne or other acneform disease consistent with chloracne; bladder cancer; type 2 diabetes (also known as type II diabetes mellitus or adult-onset diabetes); Hodgkin's disease; hypertension; hypothyroidism; ischemic heart disease (including, but not limited to, acute, subacute, and old myocardial infarction; atherosclerotic cardiovascular disease including coronary artery disease (including coronary spasm) and coronary bypass surgery; and stable, unstable, and Prinzmetal's angina); all chronic B-cell leukemias (including, but not limited to, hairy-cell leukemia and chronic lymphocytic leukemia); monoclonal gammopathy of undetermined significance; multiple myeloma; non-Hodgkin's lymphoma; Parkinson's disease; parkinsonism; early-onset peripheral neuropathy; porphyria cutanea tarda (PCT); prostate cancer; respiratory cancers (cancer of the lung, bronchus, larynx, or trachea); and soft-tissue sarcoma (other than osteosarcoma, chondrosarcoma, Kaposi's sarcoma, or mesothelioma). PCT, chloracne, and early-onset peripheral neuropathy are required to become manifest to a compensable degree within one year from last exposure. (38 USC 1116, 38 CFR 3.307, 38 CFR 3.309, 38 CFR 3.312)

**(DENIAL)**

A review of the Veteran's records was conducted, and the evidence of record does not show the Veteran had duty or visitation in the Republic of Vietnam, or on its inland waterways, or nautical service in the offshore eligible waters as defined in 38 CFR 3.307.

There is no evidence in the Veteran’s record to substantiate service in the Republic of Vietnam or exposure to herbicides in any location. Therefore, presumptive consideration cannot be given with regards to Agent Orange exposure as such exposure is not conceded. (38 CFR 3.309(e) and/or 38 USC 1116.)

VA has confirmed that the Veteran has the requisite qualifying service, however the cause(s) of death as listed on the death certificate are not listed presumptive condition(s) under 38 CFR 3.309(e) and/or 38 USC 1116.

VA cannot establish presumptive service connection for the cause of death on the basis of herbicide exposure for a cancer listed under 38 U.S.C. 1116 when medical evidence factually shows that the cancer developed as the result of metastasis of a cancer located at a primary site that is not recognized by the VA as associated with herbicide exposure. Per the death certificate received [PRIMARY CANCER CONDITION] the primary site of cancer and not an Agent Orange herbicide presumptive condition that then metastasized in the [SECONDARY CANCER SITE].

**(GRANT)**

A Veteran who, during active military, naval, or air service, served in the Republic of Vietnam during the period beginning on January 9, 1962, to May 7, 1975, shall be presumed to have been exposed to herbicide agents, unless there is affirmative evidence to establish that the Veteran was not exposed to any such agent during that service.

VA has confirmed that the Veteran has the requisite qualifying service.

Though not shown in service, nor diagnosed and manifested to a compensable degree within one year of discharge, service connection for the cause of the Veteran's death is granted because the Veteran’s listed cause of death is among the disabilities that are presumed to be a result of Agent Orange exposure.

VA has confirmed that the Veteran was exposed to herbicides based on nautical service in the offshore eligible waters as defined in the Blue Water Navy Vietnam Veterans Act of 2019, Public Law 116-23.

A Veteran who, during active military, naval, or air service, served in Thailand at any United States or Royal Thai base during the period beginning on January 9, 1962, to June 30, 1976, shall be presumed to have been exposed to herbicide agents, unless there is affirmative evidence to establish that the Veteran was not exposed to any such agent during that service.

A Veteran who, during active military, naval, or air service, served in Guam or American Samoa or in the territorial waters off of Guam or American Samoa from the period beginning on January 9, 1962, to July 30, 1980, shall be presumed to have been exposed to herbicide agents, unless there is affirmative evidence to establish that the Veteran was not exposed to any such agent during that service.

**GULF WAR-PACT ACT**

VA has determined that presumption of service connection is warranted for asthma, chronic bronchitis, chronic obstructive pulmonary disease, constrictive bronchiolitis or obliterative bronchiolitis, emphysema, granulomatous disease, interstitial lung disease, pleuritis, pulmonary fibrosis, sarcoidosis, chronic sinusitis, chronic rhinitis, glioblastoma, head cancer of any type, neck cancer of any type, respiratory cancer of any type, gastrointestinal cancer of any type, reproductive cancer of any type, lymphoma cancer of any type, lymphomatic cancer of any type, kidney cancer, brain cancer, melanoma, or pancreatic cancer for Veterans who served in or in the airspace above one or more of the following: on, or after August 2, 1990 in the Southwest Asia theater of operations (Iraq, Kuwait, Saudi Arabia, the neutral zone between Iraq and Saudi Arabia, Bahrain, Qatar, the United Arab Emirates, Oman, the Gulf of Aden, the Gulf of Oman, the Persian Gulf, the Arabian Sea, the Red Sea) or Somalia, or on, or after September 11, 2001 in Afghanistan, Djibouti, Egypt, Jordan, Lebanon, Syria, Yemen, or Uzbekistan. A positive association exists if these conditions manifest to any degree at any time from date of separation from military service that includes a qualifying period of service. (38 USC 1119, 38 USC 1120, 38 CFR 3.312, 38 CFR 3.320)

**(DENIAL)**

There is no evidence in the Veteran’s record to substantiate service in Southwest Asia theater or any other location listed above under the PACT Act provisions. Therefore, presumptive consideration cannot be given as such exposure is not conceded.

VA has confirmed that the Veteran has the requisite qualifying service, however the cause(s) of death as listed on the death certificate are not listed presumptive conditions under 38 USC 1119 and 38 USC 1120.

**(GRANT)**

VA has confirmed that the Veteran has the requisite qualifying service.

Service connection for the cause of the Veteran's death is granted because the Veteran’s listed cause of death is among the disabilities that are presumed to be a result of this service.

**TOXIC-TERA GENERAL**

Service connection may be granted on this basis for a disability related to toxic exposure risk activity (TERA) during military service if evidence demonstrates that the Veteran was actually exposed in service and that a disease associated with such exposure resulted. (38 CFR 3.303, 38 CFR 3.304)

We considered whether the cause of death was a condition that resulted from a toxic exposure risk activity (TERA) in service; however, the evidence does not show that the Veteran participated in a TERA. (38 U.S.C 1168, 38 U.S.C. 1710(e)(4))

**TOXIC-TERA DENIAL**

There is no evidence in the Veteran’s record to substantiate a Toxic Exposure Risk Activity (TERA). Due to the provisions of the PACT ACT, VA conducted a review of the Veteran’s records, fact and circumstances of service and the causes of death to determine a nexus that would warrant a medical opinion, however based on our review TERA exposure is not conceded. (USC 1168)

There is evidence in the Veteran’s record to substantiate a Toxic Exposure Risk Activity (TERA) due to the PACT ACT law. VA conducted a review of the Veteran’s records and toxic exposure due to service is conceded, however the cause of death as listed on the death certificate is not listed amongst the allowed presumptive conditions. A medical opinion based on toxic exposure risk activity (TERA) was not requested because the evidence does not show the cause of death, is associated with toxic exposure, there is no indication of association between these causes of death and participation in a TERA. There is also no medical or scientific evidence in the Veteran’s record of an association between the cause(s) of death and in-service TERA. We may consider that the Veteran’s cause of death is associated with service if you send us scientific or medical evidence showing that the cause of death is medically associated due to service. If a doctor has expressed an opinion regarding the relationship of the cause of death and service, send us that opinion, the reasons and bases for that opinion, and the clinical treatment records. In addition, the doctor should provide literature that supports the opinion. Literature may consist of scientific or medical journal articles, etc., that support the doctor's opinion. (38 U.S.C. 1168)

We requested an examination with medical opinion based on toxic exposure risk activity (TERA). Although the evidence of record shows participation in a TERA, the medical opinion provided by the examiner does not show an association between the cause of the Veteran’s death and in-service TERA. (38 U.S.C. 1168, 38 CFR 3.303)

There is no basis in the available evidence of record to establish service connection for the cause of death. This condition did not happen in military service, nor was it aggravated or caused by service. (38 CFR 3.303, 38 CFR 3.304, 38 CFR 3.306)

**TOXIC TERA POSITIVE**

Under the provisions of 38 USC 1168, VA has determined that service connection based on toxic exposure associated with military service is warranted when VA has found a positive association between the condition and such exposure. There is evidence in the Veteran’s record to substantiate a Toxic Exposure Risk Activity (TERA). Based on the evidence, VA requested a medical opinion on [DATE]. Our VA medical examiner opined it is at least as likely as not (50 percent or greater probability) that the Veteran's [TERA CAUSE OF DEATH] was incurred or caused by his military toxic exposure during service.

**KOREA AGENT ORANGE**

Exposure to herbicides is also conceded if the Veteran served in one of the specific units that served in areas along the demilitarized zone (DMZ) in Korea where herbicides were used between September 1, 1967 and August 31, 1971. These units include certain battalions of the Combat Brigade of the 2nd Infantry Division and the 3rd Brigade of the 7th Infantry Division. It also includes the 4th Squadron of the 7th Calvary Counter Agent Company of the Division Reaction Force, the 2nd Military Police Company of the 2nd Infantry Division, the 13th Engineer Combat Battalion, the United Nations Command Security Battalion-Joint Security Area and the crew of the USS Pueblo. Under Public Law 116-23, the period of service for a Veteran described in this paragraph is a Veteran who, during active military, naval, or air service, served in or near the Korean DMZ during the period beginning on September 1, 1967, and ending on August 31, 1971.

**(POSITIVE)**

Review of the Veteran’s military personnel records show he served in the Army in Korea from [DATES OF KOREAN DMZ SERVICE] assigned to the [KOREAN DMZ UNIT SAMPLE 2nd Infantry Division, 1st Battalion, 9th Infantry]. The required service along the Korean DMZ in one of the US Army units is confirmed.

**(NEGATIVE)**

Review of the Veteran’s military personnel records show that he did not serve in any of the listed units in areas along the DMZ.

Review of the Veteran’s military personnel records show that he did not serve in Korea during the presumptive period set forth in the law.

**ASBESTOS**

Service connection may be granted for a condition that was diagnosed after military service provided evidence establishes that the condition was caused by service. Service connection may be granted on the basis for a disability related to asbestos exposure during military service if evidence demonstrates that the Veteran was actually exposed in service and that a disease usually associated with such exposure resulted. Generally exposure would be indicated by the Veteran's occupational specialty or some incident verified in service. Inhalation of asbestos fibers can produce fibrosis, interstitial pulmonary fibrosis, asbestosis, tumors, pleural effusions and fibrosis, pleural plaques, mesothelioma of pleura and peritoneum, and cancers of the lung, bronchus, gastrointestinal tract, larynx, pharynx and urogenital system (except the prostate). Specific effects of exposure to asbestos include lung cancer that originates in the lung parenchyma. The clinical diagnosis of asbestosis requires a history of exposure and radiographic evidence of parenchymal lung disease. Development must also be accomplished to determine whether there is a pre-service and/or post-service evidence of occupational or other asbestos exposure.

**(DENIAL)**

Review of the Veteran's service treatment records and DD 214 shows his military occupational specialty (MOS) was a fireman and boiler technician aboard the U.S.S. Guadalcanal (LPH-7). The VA has conceded the probability of asbestos exposure was highly probable based on his MOS. However, the medical evidence of VA record does not show the Veteran had a diagnosis of asbestosis or a condition related to the in-service asbestos exposure.

Review of the Veteran's service treatment records and DD 214 shows his military occupational specialty (MOS) was a rifleman in the US Marine Corps. The VA has conceded the probability of asbestos exposure was minimal based on his MOS. We have received no medical evidence that provides a link or nexus between the Veteran’s service and asbestos exposure.

**CAMP LEJEUNE**

VA has acknowledged a relationship between exposure to contaminants in the water supply at Camp Lejeune during the period beginning on August 1, 1953, and ending on December 31, 1987, and the subsequent development of the following conditions: kidney cancer, liver cancer, non-Hodgkin’s lymphoma, adult leukemia, multiple myeloma, Parkinson’s disease, aplastic anemia and other myelodysplastic syndromes, and bladder cancer. Service at Camp Lejeune for Veterans, Reservists, and former National Guard members must have been for at least 30 days (cumulative) during the specified time frame. A presumption of service connection based on exposure to contaminants in the water supply at Camp Lejeune is not warranted for any other condition. (38 CFR 3.307, 38 CFR 3.309)

**(DENIAL)**

The Veteran had service in Camp Lejeune between [DATE OF CAMP LEJEUNE SERVICE], however a review of the Veteran’s VAMC records does not show a diagnosis of kidney cancer but rather renal kidney disease which is not considered part of the presumptive conditions as listed above. Exposure to contaminants in the water supply at Camp Lejeune as the cause of death is not conceded.

Though the Veteran has a cause of death listed among the presumptive service-connected Camp Lejeune conditions, a review of the Veteran’s service medical and personnel records do not show the requisite service at Camp Lejeune to establish entitlement. Exposure to contaminants in the water supply at Camp Lejeune as the cause of death is not conceded as the requirements for service have not been met.

**(GRANT)**

Service connection for the cause of death may be granted for specific diseases or conditions which are presumed to have been caused by exposure to contaminants in the water supply at Camp Lejeune. Although not shown in service, service connection for the cause of death has been granted on the basis of presumption due to exposure to contaminants in the water supply at Camp Lejeune as the Veteran had service between [DATE OF CAMP LEJEUNE SERVICE].

**MEDICAL OPINION PARAGRAPHS**

**GRANTS**

Based on the evidence, VA requested a medical opinion on [DATE] Our VA medical examiner opined it is at least as likely as not (50 percent or greater probability) that the Veteran's service-connected conditions contributed substantially or materially to the Veteran's cause of death.

**DENIALS**

Based on the evidence, VA requested a medical opinion on [DATE]. Our VA medical examiner opined that based on the evidence of record there is not sufficient evidence to establish a nexus. Therefore, they state it is less likely than not (less than 50 percent probability) that the Veteran’s service-connected disabilities caused debilitating effects and general impairment of health to an extent that would render him materially less capable of resisting the effects of other disease or injury primarily causing death or that the cause death was related to their service-connected disabilities.

**OR-Part I**

Based on the evidence, VA requested a medical opinion on [DATE]. Our VA medical examiner opined that it is less likely than not (less than 50 percent probability) that the Veteran's causes of death were caused or aggravated by the Veteran's service-connected conditions.

**PART II**

The rationale provided was that records were insufficient to determine if the Veteran’s service connection conditions were associated with his cause of death, and therefore a nexus is not established.

The rationale provided was that records were insufficient to determine if the Veteran’s service connection conditions contributed substantially or materially to the Veteran’s death, that it combined to cause death, or that it aided or lent assistance to the production of death, and therefore a nexus is not established.

The rationale provided was that no medical nexus could be established between the Veteran’s service and cause(s) of death. [SUMMARIZE THE MEDICAL PROVIDER RATIONALE IN THIS PARAGRAPH]. A nexus between the Veteran’s diagnosed condition(s) and whether they caused or substantially contributed to the Veteran’s death could not be established by the medical opinion.

**OUR DEVELOPMENT ACTION ON A CLAIM**

**EZ CLAIM NO DEV**

Your application was submitted as a fully developed claim; therefore, no development actions have been initiated. All decisions made were based solely on the evidence which was held in federal possession and which you submitted with your claim. No medical evidence was provided from the date of the Veteran's death to the date of this rating to substantiate your claim by showing the Veteran's service conditions caused, contributed to or hastened the Veteran’s death and/or medical evidence showing a reasonable probability that the condition which contributed to the Veteran’s death was caused by injury or disease that began during active-duty service.

**CLAIM WITH DEV LETTER WITH NO RESPONSE**

In our letter(s) to you dated [DATE], VA requested that you submit any medical evidence showing that the Veteran’s service-connected conditions caused or contributed to death, and/or medical evidence showing a reasonable probability that the condition(s) which contributed to the Veteran’s death was caused by injury or disease that began during active-duty service to substantiate your claim for benefits. As the date of this rating, you have not responded to this letter with any evidence indicating that the Veteran’s service-connected conditions, caused, contributed to or hastened the Veteran’s death.

**CLAIM WITH DEV AND PHONE RESPONSE REQUESTING MORE TIME**

In our letter(s) to you dated [DATE], VA requested that you submit any medical evidence showing that the Veteran’s service-connected conditions caused or contributed to death, and/or medical evidence showing a reasonable probability that the condition(s) which contributed to the Veteran’s death was caused by injury or disease that began during active-duty service. You responded to this letter with phone contact on [DATE] requesting more time to provide evidence to substantiate your claim for death benefits. As the date of this rating, you have not responded to this letter with any evidence indicating that the Veteran’s service-connected conditions, caused, contributed to or hastened the Veteran’s death.

**PHONE RESPONSE DECIDE CLAIM SENTENCE**

You responded to this letter with phone contact on [DATE] that you had no further information or evidence to provide and that you want the VA to decide your claim as soon as possible.

**CLAIM WITH DEV AND 5103 DECIDE CLAIM**

In our letter(s) to you dated [DATE] VA requested that you submit any medical evidence showing that the Veteran’s service-connected conditions caused or contributed to death, and/or medical evidence showing a reasonable probability that the condition(s) which contributed to the Veteran’s death was caused by injury or disease that began during active-duty service. We received your 38 USC 5103 Notice Response on [DATE] stating you had provided all evidence to support your claim and requesting that the VA make the decision based on the evidence of record. As the date of this rating, you have not responded to this letter with any evidence indicating that the Veteran’s service-connected conditions, caused, contributed to or hastened the Veteran’s death.

**5103 RESPONSE REQUSTING MORE TIME SENTENCE**

We received your 38 USC 5103 Notice Response on [DATE] requesting more time to provide evidence to substantiate your claim for death benefits.**1151 CLAIM DEV SENT NO RESPONSE**

Our letter to you dated [DATE] requested that you submit evidence showing that the Veteran’s death was caused by negligent VA hospital or medical care. In the letter we asked you to provide the specific VA hospital where the incident occurred, date range of the incident, the circumstances surrounding the incident and the reasons you feel the Veteran’s death was due to negligence. VA requires this information to forward for a Medical Opinion to establish a service-connected death under 38 USC 1151, as of this date we have not received the evidence we requested.

**DENIAL ENDING**

As of the date of this rating, we have not received any medical evidence indicating that the causes of death were incurred in-service or caused by injury or disease that began during his period of active-duty service.

**AND**

There is no evidence that the Veteran’s active-duty service caused, aggravated or hastened the death of the Veteran.

**OR**

There is no evidence that the above service-connected conditions and/or the Veteran’s active-duty service caused, aggravated or hastened the death of the Veteran.