PENSION and Fiduciary Service

RVSR Rating Narrative Glossary

September 2024

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M21-1, II.iii.2.E, Incorrectly established claims, must be changed/cancelled in Caseflow

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M21-1, VIII.iii.8.A.1.c AND II.ii.3.1.b, Jurisdiction of Camp Lejeune claims (310 now has jurisdiction of these these SC death claims)

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PACT Act

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PACT Act Implementation SOP version 5, VACO is currently working on SOP version 6

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M21-1, II.i.2.B.4, Outdated forms Also see <https://dvagov.sharepoint.com/sites/VBAsaintpaul/pmc/>

General Openers

## **Reopen for sc death wording for new and relevant for supplemental claims** (first thing in Narrative)

A claimant may file a reopen claim by submitting or identifying new and relevant evidence. New evidence is evidence not previously part of the actual record before agency adjudicators. Relevant evidence means evidence that tends to prove or disprove a matter at issue in a claim. (38 CFR 3.2501) In support of your claim, new and relevant evidence has been received and your claim is now considered reopened.

## **930 intro text**

We received your original claim for {} on {}. In order to assist you with the application process, we sent you a section (§) 5103 notice dated {}, to inform you of what is needed to support your claim for benefits. We informed you on {}, that we had not received the evidence requested in that letter, however, we did in fact receive the requested evidence on {}. Unfortunately, the documentation received on that date was not physically matched with your claim on the date we made a decision. This decision is based on all evidence received by VA as of the date of this rating.

SC Death grants

## **SC Death primary**

The death of a Veteran will be considered as having been due to a service-connected disability when the evidence establishes that such disability was either the primary or contributory cause of death.

The evidence of record shows that the Veteran passed away on (\*\*\*\*\*). Prior to death, the Veteran was service-connected for (\*\*\*\*\*\*\*\*\*\*). The death certificate recorded the Veteran’s primary cause of death as (\*\*\*\*\*\*\*\*\*\*).

Based on these findings, service connection for the cause of the Veteran’s death is granted on a primary basis as the evidence shows (\*\*\*\*\*) which caused the Veteran’s death were related to military service. (38 CFR 3.312)

## **Sc death contributory**

The death of a Veteran will be considered as having been due to a service-connected disability when the evidence establishes that such disability was either the primary or contributory cause of death.

The evidence of record shows that the Veteran passed away on {}. Prior to death, the Veteran was service connected for {}. The death certificate recorded the Veteran’s primary cause of death as {}.

Based on these findings, service connection for the cause of the Veteran’s death is granted on a contributory basis as the evidence shows that the {} which caused the Veteran’s death was/were related to military service. (38 CFR 3.312)

SC Death Medical Opinion

The death of a Veteran will be considered as having been due to a service-connected disability when the evidence establishes that such disability was either the primary or contributory cause of death.

The evidence of record shows that the Veteran passed away on {}. Prior to death, the Veteran was service connected for {}. The death certificate recorded the Veteran’s primary cause of death as {}.

VA examiner opined (negative opinion). The examiner further opined, (rationale for opinion).

Based on these findings, service connection for the cause of the Veteran’s death is granted on a contributory basis as the evidence shows that the {} which caused the Veteran’s death was/were related to military service. (38 CFR 3.312)

## **Death vital organ**

The record shows that the Veteran was properly service connected for {} at {} percent disabling. The Veteran's death certificate shows the cause of death as {}. The death of a Veteran will be considered as having been due to a service connected disability when the evidence establishes that such disability was either the primary or contributory cause of death.

VA law states that service-connected diseases or injuries involving active processes affecting vital organs should receive careful consideration as a contributory cause of death, the primary cause being unrelated, from the viewpoint of whether there were resulting debilitating effects and general impairment of health to an extent that would render the person materially less capable of resisting the effects of other disease or injury primarily causing death. Where the service-connected condition affects vital organs as distinguished from muscular or skeletal functions and is evaluated as 100 percent disabling, debilitation may be assumed.

Since the Veteran was service connected for a condition affecting a vital organ, service connection for the cause of the Veteran's death is granted since evidence shows that the contributory cause of death was related to military service. (38 CFR 3.312)

Death due to debility from 100% SC condition like ALS, MS, Parkinson’s, etc  
The record shows that the Veteran was properly service connected for DX with SYMPTOMOLOGY at 100 percent disabling. The Veteran's death certificate shows the cause of death as DX. The death of a Veteran will be considered as having been due to a service connected disability when the evidence establishes that such disability was either the primary or contributory cause of death.

VA law states that service-connected diseases or injuries involving active processes affecting the debility of the entire body should receive careful consideration as a contributory cause of death, the primary cause being unrelated, from the viewpoint of whether there were resulting debilitating effects and general impairment of health to an extent that would render the person materially less capable of resisting the effects of other disease or injury primarily causing death. Where the service-connected condition affects the entire body and is evaluated as 100 percent disabling, debilitation may be assumed.

Since the Veteran was service connected for a condition affecting the entire body, service connection for the cause of the Veteran's death is granted since evidence shows that the contributory cause of death was related to military service. (38 CFR 3.312)

## **SC death reopen when there is no new evidence but change in policy allows a grant now**

Your claim for service connection for the cause of death is considered reopened. The law did not change, but interpretation of the law changed on (date), which allows us to grant the current claim with the same evidence. {FL 13-04}

The death of a Veteran will be considered as having been due to a service-connected disability when the evidence establishes that such disability was either the primary or contributory cause of death.

The evidence of record shows that the Veteran passed away on (date). Prior to death, the Veteran was service connected for (condition). The death certificate recorded the Veteran’s primary cause of death as (causes of death including contributing ones).

Based on these findings, service connection for the cause of the Veteran’s death is granted on a contributory basis as the evidence shows that the (cause of death) which caused the Veteran’s death was related to military service.

## **Hypertension secondary CVA**

During the Veteran's lifetime, entitlement to service connection was properly established for hypertension. VA has determined that if a Veteran is service connected for hypertension, and any arteriosclerotic manifestations, such as stroke, occur a grant of service connection based on a secondary basis would be warranted.

The death of a Veteran will be considered as having been due to a service-connected disability when the evidence establishes that such disability was either the primary or contributory cause of death.

The evidence of record shows that the Veteran passed away on July 15, 2010. The death certificate recorded the Veteran’s primary cause of death as cardiopulmonary arrest due to intracranial hemorrhage due to brain aneurysm.

Treatment records show the Veteran was diagnosed with hypertension after military service. If the Veteran had claimed service connection for hypertension it would have been granted. Therefore, the Veteran is considered to have been service connected for hypertension.

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 CHARLES GREGORY 422 62 1630 2 of 3 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.

VA has determined that if a Veteran is service connected for hypertension, and any arteriosclerotic manifestations, such as stroke, occur a grant of service connection based on a secondary basis would be warranted.

Based on these findings, service connection for the cause of the Veteran’s death is granted on a contributory basis as the evidence shows that the Veteran's hypertension contributed to the Veteran's intracranial hemorrhage due to brain aneurysm which caused the Veteran’s death. (38 USC 1116, 38 CFR 3.307, 38 CFR 3.309, 38 CFR 3.312)

## **DIC ALS (use for claims received within a year of 9/23/2008)**

The death of a Veteran will be considered as having been due to a service-connected disability when the evidence establishes that such disability was either the primary or contributory cause of death.

A presumption of service connection has been established by new regulation at 38 CFR 3.318 for amyotrophic lateral sclerosis (ALS) for any Veteran who develops the disease at any time after separation from service

The cause of the Veterans death is recorded as (\*\*).

Service connection for the cause of the Veteran's death is granted since evidence shows that it was related to military service.

The effective date for entitlement to benefits is September 23, 2008, the date of the law change adding ALS as a presumptive condition for service connection.

## **DIC ALS Lib Leg**

Service connection for the cause of death has been granted. The Veteran's death certificate shows the Veteran died (Date) and the cause of death is recorded as {}.

Although the Veteran was not service-connected for any of the conditions listed above, effective September 23, 2008, the development of amyotrophic lateral sclerosis (ALS) manifested at any time after discharge or release from active military, naval, or air service is sufficient to establish service connection for that disease. No benefits based upon this rule change may be paid prior to that date.

The death of a Veteran will be considered as having been due to a presumed service connected disability when the evidence establishes that such disability was either the primary or contributory cause of death. The evidence shows that the Veteran's presumed service connected ALS was a {primary or contributing} cause of death.

Therefore, service connection for the cause of the Veteran's death is granted since evidence shows that it was related to military service. The effective date for entitlement to benefits is {date}, because you filed your claim more than one year after September 23, 2008, the date of the law change adding ALS as a presumptive condition for service connection according to 38 CFR 3.318, and the Veteran passed away before the date of the law change.

## **4142/4142a records not needed**

You sent VA Form 21-4142a, General Release for Medical Provider Information to the Department of Veteran Affairs (VA). It has been determined that the medical evidence is not necessary to grant the claimed benefits. Therefore, the records were not requested.

## **4142/4142a records not related**

We received and forwarded VA Form 21-4142a, General Release for Medical Provider Information to the Department of Veteran Affairs (VA). We have not yet received any records. We do not need the records in order to grant (name the benefit here). In addition, the dates of treatment listed on the form indicate they would have absolutely no bearing on any decision for this issue. If the records are received in the future, they will be reviewed and if a different decision results from that review, the original date of receipt of this claim will be used as the effective date.

SC Death denials

## **DIC deny**

The death of a Veteran will be considered as having been due to a service-connected disability when the evidence establishes that such disability was either the primary or contributory cause of death.

The Veteran passed away on {}. Prior to death, service connection had not been established for any disability. The death certificate recorded the Veteran’s primary cause of death as {}.

The Veteran’s service treatment records have been reviewed. The evidence does not show the Veteran’s cause of death is related to service.

We received your application for dependency and indemnity compensation, Survivor’s Pension and/or accrued benefits on {}. This application contained the section (§) 5103 notification requirements informing you of the evidence needed to substantiate a claim for death benefits.

OR IF WE SENT A 5103 NOTICE

Our letter to you, dated {} requested that you submit medical evidence showing that the Veteran’s service connected condition(s) caused or contributed to 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.

THIS PARAGRAPH ONLY NEEDED IF WE SENT A 5103 NOTICE. On {} we received your submission of a VCAA notice response form indicating that you have no additional evidence to submit regarding your claim and that you wish to have a decision rendered as soon as possible.

As of the date of this rating, we have not received medical evidence indicating that the Veteran’s cause of death was incurred in-service or caused by injury or disease that began during a period of active duty service.

There is no evidence that cause of death was manifest to a compensable degree within one year of the Veteran’s discharge from service for presumptive consideration.

ELIMINATE THIS ONE IF THE VETERAN WAS NOT SC DURING HIS LIFETIME. There is no evidence that the above service connected conditions caused, aggravated or hastened the death of the Veteran.

Based on these findings, entitlement to service connection for the cause of the Veteran’s death is denied since evidence fails to show it was related to military service. {38 CFR 3.312}

## **Death denial with medical opinion**

The death of a Veteran will be considered as having been due to a service-connected disability when the evidence establishes that such disability was either the primary or contributory cause of death.

The Veteran passed away on {}. Prior to death, the Veteran was service connected for {}. The death certificate recorded the Veteran’s primary cause of death as {}.

The Veteran’s service treatment records have been reviewed. The evidence does not show the Veteran’s cause of death is related to service.

VA examiner opined (negative opinion). The examiner further opined, (rationale for opinion).

We received your application for dependency and indemnity compensation, survivor’s pension and/or accrued benefits on {}. This application contained the section (§) 5103 notification requirements informing you of the evidence needed to substantiate a claim for death benefits.

OR IF WE SENT A 5103 NOTICE

Our letter to you, dated {} requested that you submit medical evidence showing that the Veteran’s service connected condition(s) caused or contributed to 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.

THIS PARAGRAPH ONLY NEEDED IF WE SENT A 5103 NOTICE. On {} we received your submission of a VCAA notice response form indicating that you have no additional evidence to submit regarding your claim and that you wish to have a decision rendered as soon as possible.

As of the date of this rating, we have not received medical evidence indicating that the Veteran’s cause of death was incurred in-service or caused by injury or disease that began during a period of active duty service.

There is no evidence that cause of death was manifest to a compensable degree within one year of the Veteran’s discharge from service for presumptive consideration.

ELIMINATE THIS ONE IF THE VETERAN WAS NOT SC DURING HIS LIFETIME. There is no evidence that the above service connected conditions caused, aggravated or hastened the death of the Veteran.

Based on these findings, entitlement to service connection for the cause of the Veteran’s death is denied since evidence fails to show it was related to military service. {38 CFR 3.312}

## **1318 Denial**

Although the Veteran's death may not be due to service-related conditions, dependency and indemnity compensation benefits may be payable as if the cause of death were service connected if the cause of the Veteran's death was not due to willful misconduct and the Veteran was continuously rated totally disabled by reason of service connected disabilities for a period of 10 years or more immediately preceding death; or for five years if the total evaluation was continuously in effect from the date of discharge from military service; or for one year if the Veteran was a former POW who died after September 30, 1999.

Prior to his death, the Veteran was rated totally disabled since \*\*\*\*\*\*, and passed away on (\*\*\*).

Entitlement to dependency and indemnity compensation is not established on this basis because none of these requirements have been met. {38 CFR 3.22, 38 USC 1318}

## **Detailed denial after denial(s)**

The claim for service connection for the cause of death is considered reopened. However, the evidence continues to show the Veteran's death was not incurred in or caused by military service. (38 CFR 3.22, 38 CFR 3.312)

The death of a Veteran will be considered as having been due to a service-connected disability when the evidence establishes that such disability was either the primary or contributory cause of death.

The date of death was MMDDYYYY. Prior to death, the Veteran was receiving compensation benefits for service-connected CONDITIONS. The cause of death was COD.

The Veteran’s service treatment records have been reviewed. The evidence does not show the Veteran’s cause of death is related to service. You reported the Veteran had a CONDITION while in service. Navy service treatment records show an admission from MMDDYYYY to MMDDYY with an admission diagnosis of DX. The Veteran underwent a medical board dated Month, Year, which found him unfit for duty due to DX. There is no definitive diagnosis of CONDITION. If you submit treatment records showing the Veteran had a DX during service or DX any time after service, we will review it.

VA letters dated MMDDYYYY, MMDDYYYY, and USE AS MANY AS REQUIRED requested you submit medical evidence, treatment records or a medical opinion to support your claim. We have received # different articles to support your claim. However, to date, we have not received any treatment records or medical opinions to support your claim. If you submit treatment records or a medical opinion, we will review it.

You reported the Veteran was treated at the NAME VAMC without specifying when he was treated. We attempted to locate VA treatment records, but were unsuccessful in obtaining them. If you submit treatment records or dates of treatment at a VA facility, we will make further attempts to locate the treatment records. If you submit them or we find them, we will review them. Note: your supplemental application reported on going treatment at the NAME VAMC, but on going is not considered a date of treatment. This supplemental application was received MMDDYYYY.

We received your application for dependency and indemnity compensation, survivor’s pension and/or accrued benefits on MMDDYYYY. This application contained the section (§) 5103 notification requirements informing you of the evidence needed to substantiate a claim for death benefits.

As of the date of this rating, we have not received medical evidence indicating that the Veteran’s cause of death was incurred in-service or caused by injury or disease that began during a period of active duty service.

There is no evidence that cause of death was manifest to a compensable degree within one year of the Veteran’s discharge from service for presumptive consideration.

There is no evidence that the above service connected conditions caused, aggravated or hastened the death of the Veteran.

The Veteran's service records show he served in LOCATION in MMDDYYYY. From this evidence, the Veteran's exposure to herbicides is conceded.

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.

Under the provisions of 38 USC 1116, VA has determined no positive association between DX and exposure to herbicides. Therefore, entitlement to service-connected death benefits on the basis of presumption may not be considered as there is no relationship between this disability and herbicide exposure.

Based on cumulative scientific data reported by the National Academy of Science (NAS) since 1993, the Secretary has determined that a positive association does not exist between herbicide exposure and the following condition, cancer of neck, listed as the Veteran’s cause of death and that a presumption of SC is not warranted for any conditions causing or contributing to the Veteran's death.

You reported DX could refer to If you submit treatment records showing a more specific diagnosis than DX, we will review it. Any treatment records or medical opinions you submit will be reviewed, and if a grant of benefits is warranted, we will grant you benefits.

Exposures under PACT Act have been considered; however, no medical opinion is being requested. If you submit treatment records, to include a medical opinion, we will consider them.

Based on these findings, entitlement to service connection for the cause of the Veteran’s death is denied since evidence fails to show that it was related to military service. (38 USC 1116, 38 CFR 3.307, 38 CFR 3.309, 38 CFR 3.312)

**For fire related STRs**

No service treatment (or personnel records) were available for review. Efforts to obtain the records from all potential sources were unsuccessful. The National Personnel Records Center (NPRC), St. Louis, Missouri, in response to VA requests, reported the records may have been destroyed in a fire at the records center in 1973. NPRC could not confirm the existence of such records; only the fact that if they had been stored at the records center, they would have been stored in an area damaged by the fire. If these records are located at a later date, this decision will be reconsidered. If a different decision results, that decision will be effective as of the date of this pending claim. If you wish to complete a NA Form 13055, request for information needed to reconstruct medical data, the form can be found at <https://www.archives.gov>.

## **Alternative text if we sent fire related letter and now have the STRs**

On initial review of your claim, no service treatment records were available for review. The national personnel records center (NPRC), St. Louis, Missouri, in response to VA requests, reported on (date) the records may have been destroyed in a fire at the records center in 1973. NPRC could not confirm the existence of such records; only the fact that if they had been stored at the records center, they would have been stored in an area damaged by the fire. We sent you a letter informing you that the Veteran's service treatment records are unavailable and asking you to send personal copies on (date). However, we subsequently received the Veteran's claims file from long term storage, and his service treatment records were contained within, received by VA in (I try to give a year rather than the entire date

**Natural causes as the cause of death on a death certificate**

Place this autotext in place of the standard STR denial autotext

We reviewed the Veteran’s service treatment records, however, the Veteran's cause of death is shown as natural causes.  Therefore, there is no chronic medical condition that can be related to the Veteran's death.

## **Not using identified treatment records** (must alter for each case and be sure they are not required)

We received VA Form 21-4142, Authorization and consent to release information to the Department of Veterans Affairs (VA), for (), on ().  However, we did not attempt to get these medical records because they would not provide a plausible nexus between the Veteran's cause of death and his military service.

## **Fee required for PTR**

We received and forwarded VA Forms 21-4142 and 21-4142a to (provider name) and they informed us they require a fee to provide records. We are unable to pay a fee for record, and we have not yet received any records. If the records are received in the future, they will be reviewed and if a different decision results from that review, the original date of receipt of this claim will be used as the effective date.

## 

## **BVA cases cited as evidence but not for this Veteran**

You submitted copies of determinations for other Veterans. Those determinations were not precedent setting. Each Veteran’s claim is evaluated by the facts and evidence of the record for that specific Veteran. {}’s facts and evidence are not exactly the same as those other Veteran’s facts and evidence.

## **Congenital**

In the field of mental disorders, personality disorders and attention deficit/hyperactivity disorder are considered congenital or developmental defects. Congenital or developmental defects such as, refractive error of the eye, personality disorders and mental deficiency, by law, are not diseases or injuries subject to service-connection.

Herbicide exposure

## **SC death grant with no grant in lifetime**

[The death of a Veteran will be considered as having been due to a service-connected disability when the evidence establishes that such disability was either the primary or contributory cause of death.](#_Toc175116588)

[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.](#_Toc175116589)

[The Veteran's service records show he served in the Republic of Vietnam in (date). Therefore, exposure to herbicides during service is conceded.](#_Toc175116590)

[The date of death was (date). The cause of death was recorded as (cause of death). Under VA Law, (3.309e presumptive), are recognized as being related to exposure to herbicides.](#_Toc175116591)

[Service connection for the cause of the Veteran's death is granted because it is related to the Veteran's military service. (38 USC 1116, 38 CFR 3.307, 38 CFR 3.309, 38 CFR 3.312)](#_Toc175116592)

## **DIC grant for new herbicide conditions (Bladder cancer, hypothyroidism, Parkinsonism)**

The death of a Veteran will be considered as having been due to a service-connected disability when the evidence establishes that such disability was either the primary or contributory cause of death.

Under the provisions of 38 USC 1116, VA has determined that presumption of service connection based on exposure to herbicides used in certain locations 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 (MGUS); 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.

The evidence of record shows that the Veteran served in the Republic of Vietnam from (); therefore, exposure to herbicides used in Vietnam is conceded.

The evidence shows the date of death was (\*) and the cause of death was (). As exposure to herbicides used in Vietnam is conceded and () is a condition recognized under the provisions of 38 USC 1116, entitlement to service connection for the cause of the Veteran’s death is granted. (38 USC 1116, 38 CFR 3.307, 38 CFR 3.309, 38 CFR 3.312, **38 CFR 3.816**)

Service connection for the cause of death is granted January 1, 2021, which is the effective date of the law establishing service connection for (\*\*\*\*\*) as a presumptive condition. (38 CFR 3.312).

## **SC death grant for herbicides with one year for lib law**

The death of a Veteran will be considered as having been due to a service-connected disability when the evidence establishes that such disability was either the primary or contributory cause of death.

Under the provisions of 38 USC 1116, VA has determined that presumption of service connection based on exposure to herbicides used in certain locations 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 (MGUS); 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.

The evidence of record shows that the Veteran served in the Republic of Vietnam; therefore, exposure to herbicides used in Vietnam is conceded.

The Veteran passed away on \*\*\*\*\*. The death certificate recorded the Veteran’s cause of death as \*\*\*\*\*\*\*\*\*\*\*. The Veteran's autopsy shows he probably died of \*\*\*\*\*\*\*\*\*\*\*.

As exposure to herbicides used in Vietnam is conceded and coronary artery disease is a condition recognized under the authority granted by the Agent Orange Act of 1991, entitlement to service connection for the cause of the Veteran’s death can be granted on a presumptive basis.

Therefore, service connection for the cause of the Veteran's death is granted since evidence shows that it was related to military service. The effective date for entitlement to benefits is \*\*\*\*\*\*\*\*, because you filed your claim more than one year after August 31, 2010, the date of the law change adding ischemic heart disease as a presumptive condition for service connection according to 38 CFR 3.816, and the Veteran passed away before the date of the law change. (38 CFR 3.312; 38 CFR 3.114)

## **SC death grant for herbicide exposure in Korea**

The death of a Veteran will be considered as having been due to a service-connected disability when the evidence establishes that such disability was either the primary or contributory cause of death.

Exposure to herbicides can be presumed to have occurred if it can be shown that the Veteran served in a unit the Department of Defense has determined operated in an area in or near the Korean DMZ between September 1, 1967 and August 31, 1971. A review of the Veteran's personnel records shows the Veteran served in the \*\*\*\*\* from \*\*\* to \*\*\* having service in or near the Korean DMZ. From this evidence, the Veteran's exposure to herbicides is conceded.

The Veteran's death certificate shows the immediate cause of death as \*\*\*\*. During his lifetime, the Veteran was service-connected for \*\*\*\*\*; however, pursuant to the authority granted by the Agent Orange Act of 1991, VA may determine that a presumption of service connection based on exposure to herbicides used in or near the DMZ in Korea is warranted for conditions that VA has found to have a statistically significant association with such exposure.

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.

Therefore, the Veteran's \*\*\*\*\*\* is presumed to have been caused by his exposure to herbicides during his service in or near the DMZ in Korea, and \*\*\*\*\* substantially contributed to his death.

Service connection for the cause of the Veteran's death is granted since evidence shows that it was related to military service. (38 CFR 3.309e, 38 CFR 3.312)

## **Mechanic Exposure outside exposure area**

You have also claimed herbicide exposure based on your military occupational specialty job requirements as a jet engine technician. However the available scientific and medical

evidence does not support the conclusion that servicing planes that were in the Republic of Vietnam, exposes the servicing technician to Agent Orange.

## **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.

, however the cause(s) of death as listed on the death certificate are not listed presumptive condition(s) under 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].

Blue Water Navy

[**BWN grant without lib leg** 35](#_Toc175116631)

The death of a Veteran will be considered as having been due to a service-connected disability when the evidence establishes that such disability was either the primary or contributory cause of death.

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.

The evidence of record shows the Veteran served aboard the \*\*\*\*\* while it operated in the offshore eligible waters of the Republic of Vietnam. Exposure to herbicides is conceded based on the Veteran's nautical service in the offshore eligible waters as defined in the Blue Water Navy Vietnam Veterans Act of 2019, Public Law 116-23.

The Veteran passed away on #####. The death certificate recorded the Veteran’s cause of death as #####. As exposure to herbicides used in Vietnam is conceded and ##### is a condition recognized under the authority granted by the Agent Orange Act of 1991, entitlement to service connection for the cause of the Veteran’s death can be granted on a presumptive basis.

Service connection for the cause of death is granted since the evidence shows that the primary/contributory cause of death was related to military service. (38 USC 1116, 38 CFR 3.307, 38 CFR 3.309, 38 CFR 3.312)

## **BWN contributory grant for DIC with lib leg for 1/1/2021 new 3.309e conditions**

The death of a Veteran will be considered as having been due to a service-connected disability when the evidence establishes that such disability was either the primary or contributory cause of death.

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.

The evidence of record shows the Veteran served aboard the \*\*\*\*\* while it operated in the offshore eligible waters of the Republic of Vietnam. Exposure to herbicides is conceded based on the Veteran's nautical service in the offshore eligible waters as defined in the Blue Water Navy Vietnam Veterans Act of 2019, Public Law 166-23.

The evidence shows the date of death was (date) and the cause of death was (\*\*\*\*\*). As exposure to herbicides used in Vietnam is conceded and (\*\*\*\*\*\*) is a condition recognized under the provisions of 38 USC 1116, entitlement to service connection for the cause of the Veteran’s death is granted. (38 USC 1116, 38 CFR 3.307, 38 CFR 3.309, 38 CFR 3.312, 38 CFR 3.816)

Service connection for the cause of death is granted January 1, 2021, which is the effective date of the law establishing service connection for (\*\*\*) as a presumptive condition. (38 CFR 3.312).

## **BWN contributory grant for SC death with lib leg died before presumptive under 3.309e**

The death of a Veteran will be considered as having been due to a service-connected disability when the evidence establishes that such disability was either the primary or contributory cause of death.

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.

The evidence of record shows the Veteran served aboard the \*\*\*\*\* while it operated in the offshore eligible waters of the Republic of Vietnam. Exposure to herbicides is conceded based on the Veteran's nautical service in the offshore eligible waters as defined in the Blue Water Navy Vietnam Veterans Act of 2019, Public Law 166-23.

The evidence shows the date of death was (DATE) and the cause of death was (COD). As exposure to herbicides used in Vietnam is conceded and (3.309e condition) is a condition recognized under the authority granted by the Agent Orange Act of 1991, entitlement to service connection for the cause of the Veteran’s death can be granted on a presumptive basis.

Therefore, service connection for the cause of the Veteran's death is granted since evidence shows that it was related to military service. The effective date for entitlement to benefits is \*\*\*\*\*\*\*\*, because you filed your claim more than one year after (date), the date of the law change adding (3.309e condition) as a presumptive condition for service connection according to 38 CFR 3.816, and the Veteran passed away before the date of the law change. (38 CFR 3.312; 38 CFR 3.114)