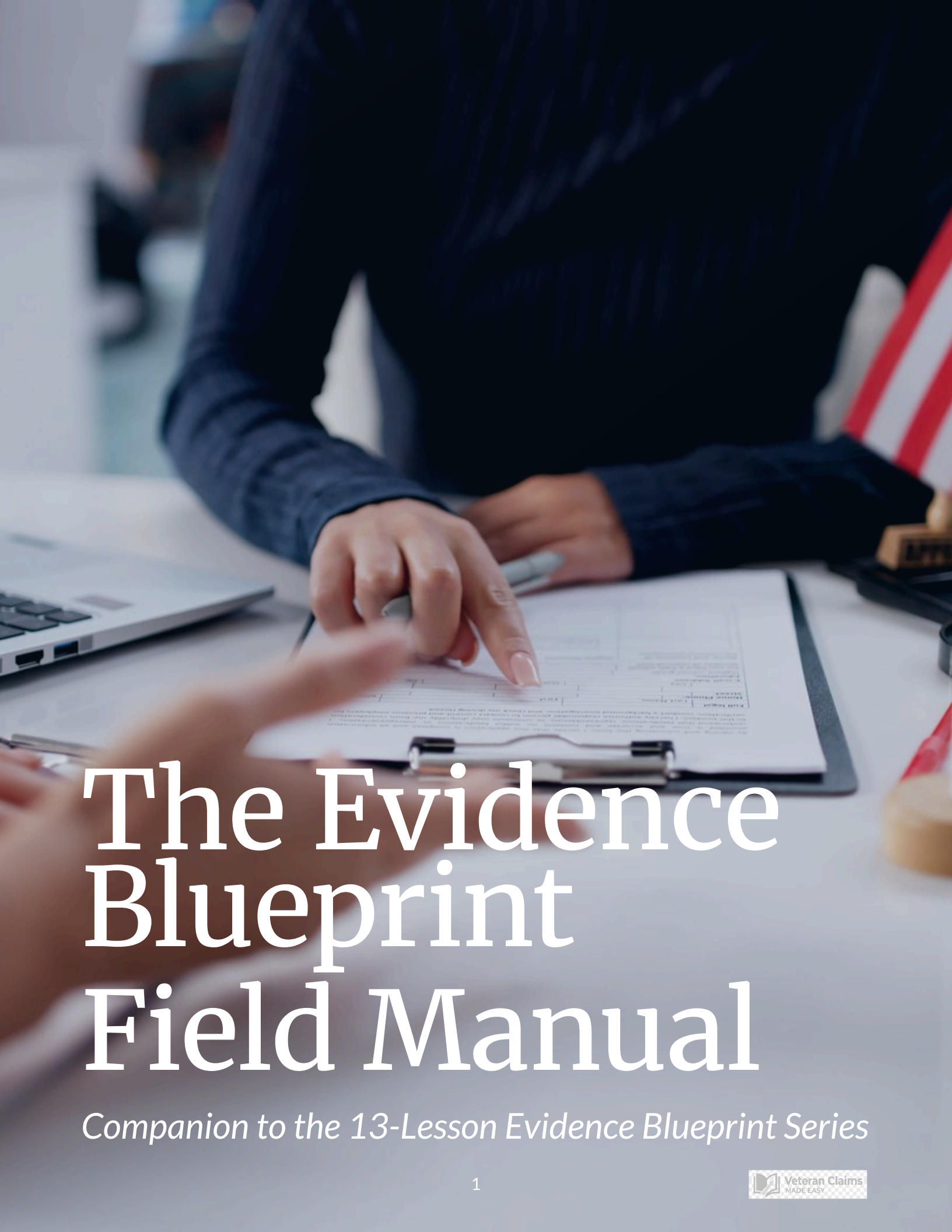


# The Evidence Blueprint Field Manual

*Companion to the 13-Lesson Evidence Blueprint Series*



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# Getting Started

## Welcome

Welcome to The Evidence Blueprint Field Manual. This companion guide is designed to help you move from uncertainty toward clarity by identifying, organizing, and evaluating the evidence in your VA disability claim. Whether you are preparing your first claim or reviewing the evidence you already have, the worksheets, planners, inventories, and checklists in this manual are designed to help you focus on a more important question than simply, "Do I have enough evidence?" The better question is: "What does my evidence actually prove?"

You can use this Field Manual from beginning to end alongside the 13-lesson Evidence Blueprint series, or return to individual lessons and worksheets when you need them. Each lesson builds on the one before it. You'll start by identifying what you are actually trying to prove, then learn how to evaluate evidence for competency, credibility, and weight. From there, you'll work through medical evidence, service records, nexus evidence, lay evidence, DBQs, continuity, secondary service connection, presumptive claims, aggravation, and finally the organization and review of your evidence. The goal is not to build the thickest claim file. The goal is to understand what each piece of evidence establishes, identify what may still be missing, and organize the evidence you have so you can make informed decisions about your next steps.

## How to Use This Field Manual

**This Field Manual is designed to be used actively—not simply read.** As you work through each Evidence Blueprint lesson, use the corresponding worksheet, planner, inventory, or checklist to examine your own evidence.

W**ork one lesson at a time.** Watch the corresponding Evidence Blueprint lesson first, then complete the related section of this manual. Some sections may not apply to your particular claim or situation. If they don't, skip them rather than trying to make your circumstances fit the worksheet.

**Keep a Master Evidence Inventory.** As you identify records, statements, medical evidence, service documents, and other evidence, record them in your inventory. Update it as you work through the series so you can see what you have in one place.

**Use the Four Diagnostic Questions repeatedly.** They are not just a Lesson 1 exercise. Return to them whenever you evaluate part of your evidence:

1. What am I trying to prove?
2. What question or element needs to be established?
3. What evidence is competent to address that question?
4. What, if anything, is still missing from the record?

**Treat the worksheets as thinking tools, not claim forms.** They are designed to help you identify, evaluate, and organize information. Completing a worksheet does not establish that a fact has been proven, that evidence is sufficient, or that VA will reach a particular decision.

By the end of the series, you should have something more useful than a larger stack of documents: a clearer understanding of what your evidence addresses, where questions may remain, and how the pieces of your evidence fit together.

# Important Information Before You Begin

## Educational Purpose

The Evidence Blueprint Field Manual is an educational resource designed to help veterans better understand, evaluate, and organize evidence related to VA disability claims. It provides general educational information and practical worksheets. It is not legal, medical, or individualized claims advice.

## What This Manual Does Not Do

This manual does not determine whether you qualify for VA benefits, tell you what conditions to claim, establish that evidence is sufficient, predict how VA will decide a claim, or guarantee any rating, effective date, payment, or other outcome.

## Your Individual Circumstances Matter

Every veteran's circumstances and evidence are different. VA laws, regulations, policies, forms, and procedures can also change. Verify current requirements using official VA sources and, when appropriate, seek assistance from a VA-accredited representative or other qualified professional.

## Use the Manual as a Thinking Tool

The worksheets, inventories, planners, and checklists in this manual are designed to help you ask better questions about your evidence and organize what you find. Completing them does not establish that a fact has been proven or that a claim is complete.

## You Remain in Control

You decide what evidence to obtain, what information to submit, whether and when to file a claim, and whether to seek professional assistance. By using this manual, you accept responsibility for your own decisions and submissions.






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# Lesson 1 — What Are You Trying to Prove?

Before you start gathering more evidence, get clear about the question your evidence needs to answer. Different types of VA disability claims can require different facts to be established, so there is no single evidence formula that fits every claim. In this lesson, you will identify the type of claim you are examining, determine what you are actually trying to prove, and begin checking whether the evidence you already have addresses the questions that matter.

## Identify What You Are Trying to Prove

Start by identifying the type of claim or issue you are examining. A direct service-connection claim, secondary service-connection claim, presumptive claim, increased-rating claim, or aggravation issue may require different questions to be answered. Do not force your situation into a formula that does not apply. Write down the specific issue you are examining and the facts that would need to be established for that issue.

## How the Evidence Question Changes

Different claim pathways focus on different questions. Before examining your evidence, consider which pathway applies to the issue you are reviewing.

**Direct Service Connection:** What evidence addresses your current disability, an in-service event, injury, or disease, and the relationship between them?

**Secondary Service Connection:** What evidence addresses the claimed condition and whether an established service-connected disability caused or aggravated it?

**Presumptive Service Connection:** What evidence addresses the qualifying service or exposure circumstances, the claimed condition, and the requirements of the applicable presumption?

**Increased-Rating Claim:** What evidence describes the current severity of an already service-connected disability under the applicable rating criteria?

These are general educational examples, not an exhaustive list of claim pathways or requirements. The questions relevant to your situation depend on the particular claim or issue being examined.

## Four Diagnostic Questions

1. What am I trying to prove?
2. What question or element needs to be established?
3. What evidence is competent to address that question?
4. What, if anything, is still missing from the record?

# Evidence Inventory

Before looking for more evidence, inventory what you already have. List the records, documents, statements, and other evidence related to the issue you are examining. For each item, identify what question or fact it may address. Do not label evidence “strong” or “weak” yet—you’ll learn how to evaluate evidence in Lesson 2. For now, identify what is in your record and what each piece may help establish.

# Gap Analysis

Compare the questions you identified with the evidence in your inventory. Consider whether your current records address each question or whether something remains unanswered. At this stage, you are simply identifying what the available evidence shows. You are not determining whether the evidence is sufficient, assigning it a value, or predicting how VA will evaluate it. An unanswered question does not automatically mean another document is required. You will learn a more structured method for examining unanswered questions in Lesson 13, using the Gap Check. For now, record what your evidence appears to address and what remains unclear.

# Next-Step Plan

Review the unanswered questions from your Gap Analysis. For each one, note what you still need to understand and which Evidence Blueprint lesson may help. You do not need to solve every gap today. For now, know what evidence you have, what it addresses, and what questions remain.





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# Lesson 2 — Competency, Credibility & Weight

Not all evidence answers a question in the same way. This lesson gives you three lenses for examining evidence you already have: competency, credibility, and weight. These concepts are related, but they are not interchangeable. The goal is to understand what each piece of evidence can establish and where questions may remain.

## The Three-Lens Evidence System

### Competency

Ask whether the person providing the evidence has the knowledge or experience needed to speak to the particular fact. A veteran, spouse, friend, or coworker may be able to describe things they personally observed. Some medical questions may require appropriate medical knowledge or expertise.

### Credibility

Ask whether the information is believable when considered with the rest of the record. Look at details such as consistency, specificity, timing, and whether other evidence supports or conflicts with the account.

### Weight

Ask how persuasive and useful the evidence is for the question you are examining. Evidence may be competent and credible but still carry limited weight if it does not directly address the question.

## Evidence Evaluation Worksheet

For each important piece of evidence, record:

- What is the evidence?
- Who provided it?
- What question does it address?
- Is the source competent to address that question?
- Are there credibility concerns or conflicting information?
- How directly does it address the question?
- What, if anything, remains unanswered?

Do not turn this into a simple numerical score. Evidence is evaluated in context, and different evidence may serve different purposes.

As you work through later lessons, return to these three lenses whenever you add or reconsider evidence. The goal is not to collect the largest number of documents. It is to understand what each piece of evidence can establish, how it fits with the rest of the record, and what questions may still remain.





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# Lesson 3 — Medical Evidence: What It Actually Needs to Show

Medical evidence can help establish important facts about a disability claim, including a diagnosis, symptoms, treatment history, and functional limitations. Depending on the claim, medical evidence may also address the relationship between a condition and military service or another service-connected disability. This lesson helps you understand what your medical records document and identify questions that may remain unanswered.

## The Three Jobs of Medical Evidence

Medical evidence can serve different purposes depending on the question being examined. In this lesson, we use three categories to help understand what medical records may establish.

**1. Diagnosis — What condition is documented?**

Medical records may identify a condition diagnosed by an appropriate healthcare professional. Look for documented diagnoses, examination findings, and test results that help identify the condition being examined.

**2. Severity — How significant is the condition?**

Medical evidence may describe the extent of a condition through examination findings, test results, functional limitations, and other information relevant to the applicable evaluation criteria.

**3. Current Symptoms — What is happening now?**

Medical records may document symptoms the veteran currently experiences, including their frequency, duration, and effects on everyday activities.

These categories can overlap. One medical record may address more than one question.

The Three Jobs framework is an educational tool, not a separate set of legal requirements for every VA disability claim.

Medical evidence may also address other important questions, including the relationship between a condition and military service or another service-connected disability. We will examine that relationship more closely in Lesson 5.

# Understanding Your Medical Evidence

Begin by reviewing the medical records you already have. Look for diagnoses, examination findings, test results, treatment notes, and descriptions of symptoms or functional limitations.

As you review your medical records, consider:

- Diagnosis: What medical conditions or diagnoses are documented?
- Severity: What examination findings, test results, or functional limitations are recorded?
- Current Symptoms: What symptoms are documented, and what do the records say about their frequency, duration, or effects?
- Other Questions: What does the evidence establish about the history of the condition, and what questions remain unanswered?

Remember that different types of claims require different evidence. A record that is useful for one question may not answer another.

# Medical Evidence Planner

**Create a simple inventory of relevant medical records.**
**For each record, identify:**

- The date and healthcare provider.
- The condition or symptoms discussed.
- Any relevant findings, diagnoses, or treatment.
- The question the record may help answer.
- Any information that remains unclear or missing.

**The purpose is to understand your existing evidence, not to determine whether a medical conclusion is correct.**

# Preparing for Medical Appointments

Before an appointment, consider writing down your symptoms, when they occur, how often they occur, and how they affect your daily activities.

Describe your experiences accurately and completely. Bring relevant records or questions when appropriate.

Your healthcare provider is responsible for making independent medical findings and determining what examinations, testing, or treatment are appropriate.

After the appointment, review the available visit notes for accuracy. If you notice a factual error, ask the provider's office about its correction process.

# Medical Evidence Checklist

As you review your records, consider whether you have documentation of:

- Current diagnoses, when applicable.
- Relevant examination findings or test results.
- Symptoms and their history.
- Treatment received and responses to treatment.
- Functional limitations affecting daily activities or work.
- Medical opinions addressing relevant relationships, when applicable.

Not every item is necessary for every claim. The purpose of this checklist is to help you recognize what your records contain and what questions may require further attention.

# Next-Step Review

Select one medical condition and review the records associated with it.

Identify what those records establish, which questions they address, and what remains unclear.

You do not need to resolve every unanswered question immediately. Your goal is to better understand the medical evidence you already have before deciding what additional information, if any, may be needed.



# Lesson 4 — In-Service Event Evidence: Proving What Happened

For many VA disability claims, an important question is what happened during military service. Depending on the claim, this may involve an injury, illness, exposure, or another relevant circumstance. This lesson helps you examine your service history, identify records that may address the in-service element, and recognize questions that remain unanswered.

## Fact First. Documents Second.

When examining an in-service event, begin with the fact you are trying to establish—not the documents you happen to possess.
Ask yourself:

- What happened during military service?
- When and where did it happen, as best as I can determine?
- What specific fact am I trying to establish?
- What evidence, if any, addresses that fact?

For example, a service personnel record may establish that you served at a particular location. That does not necessarily establish that a specific injury or exposure occurred there.

Likewise, a service treatment record may document medical care without answering every question about the circumstances surrounding an injury or illness.

The distinction matters because different records establish different facts.

Fact first. Documents second.

Identify the question before examining which evidence may help answer it.

## Understanding the In-Service Element

Begin by identifying the event, illness, injury, exposure, or circumstances relevant to the condition you are examining.

Ask yourself:

- What happened during military service?
- Approximately when and where did it occur?
- What records or other evidence may help establish the relevant facts?
- What information remains unclear or undocumented?

Not every claim requires proof of a single identifiable incident. Some conditions develop over time, and different claim pathways have different evidentiary requirements.

# Military Timeline

Create a chronological outline of the relevant portions of your military service.
Consider including:

- Duty stations and assignments.
- Training exercises or deployments.
- Relevant injuries, illnesses, or exposures.
- Medical visits or treatment.
- Other circumstances connected to the issue being examined.

Your timeline is an organizational tool. It helps you understand the sequence of events and identify records that may be relevant.

# Service Records Inventory

Review the service records you already have.
Depending on your circumstances, relevant documents may include service treatment records, personnel records, deployment records, orders, incident reports, or other available documentation.
For each record, identify:

- What the document is.
- When it was created.
- What relevant facts it contains.
- Which question it may help answer.

Remember that different records serve different purposes. A document may establish where you served without establishing that a particular injury or exposure occurred.

# Missing Records Review

Compare your timeline with your available records.

Identify any relevant events or circumstances that are not clearly addressed by the documents you have.

Missing records do not automatically mean an event cannot be established. Depending on the circumstances, other evidence may be relevant.

Consider whether additional records, personal statements, or observations from people with firsthand knowledge could help clarify the facts.

# Next-Step Review

Select one relevant event, injury, illness, exposure, or circumstance from your military service.

Before reviewing your records, write down the specific fact you are trying to establish.

# Then:

1. Identify the records or other evidence you currently possess.
2. Determine which facts each piece of evidence addresses.
3. Identify any information that remains unclear or undocumented.
4. Consider whether other available evidence may help clarify those questions.

Remember that a missing record does not automatically mean an event cannot be established.

You do not need to collect every possible military record. The goal is to understand which evidence addresses the specific question your claim requires.

Fact first. Documents second.





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# Lesson 5 — The Nexus Opinion: What Actually Connects the Evidence

A current medical condition and an event during military service do not automatically establish a connection between them. Depending on the type of claim, evidence may be needed to address how a current disability relates to military service or an already service-connected condition.

This lesson helps you understand what nexus evidence is, what questions it may need to address, and how to recognize whether your existing evidence speaks to the relationship at issue.

## Understanding Nexus Evidence

A nexus is the connection between a current disability and the event, condition, or circumstances relevant to the claim.

A nexus is the relationship that must be established—not the name of a particular document.

Depending on the claim pathway and circumstances, different forms of evidence may address that relationship. A medical opinion may be relevant, but a separate nexus letter is not universally required.

The important question is not simply whether your file contains a nexus letter. It is whether the available evidence addresses the relationship relevant to your claim.

The evidence needed to address that connection depends on the claim pathway.

For example:

- Direct service connection: Evidence may need to address the relationship between a current disability and an in-service event, injury, illness, or exposure.
- Secondary service connection: Evidence may need to address whether a service-connected disability caused or aggravated another condition.
- Presumptive service connection: Applicable presumptions may establish certain relationships when the legal requirements are satisfied.

## Review Your Existing Evidence

Before seeking additional documentation, examine the evidence you already have.

Consider the following questions:

1. What current condition is documented?
2. What event, condition, or circumstance is relevant to the claimed relationship?
3. What evidence addresses the connection between them?
4. Does that evidence explain the relationship, or does it simply mention both conditions?
5. What questions, if any, remain unanswered?

Remember that a document may establish one fact without establishing another. For example, a medical record documenting a diagnosis does not necessarily explain what caused the condition.

# Understanding Medical Opinions

When a medical opinion is relevant, its usefulness depends on more than whether it supports a particular conclusion.

Consider whether the opinion:

- Identifies the medical condition being discussed.
- Addresses the relevant medical history.
- Considers important facts and available evidence.
- Explains the medical reasoning behind its conclusion.
- Addresses the specific relationship at issue.

A medical opinion should be evaluated in context. A favorable conclusion without supporting reasoning may leave important questions unanswered.

Your role is not to determine what a medical professional should conclude. It is to understand what the available opinion addresses and whether questions remain.

# Preparing for a Provider Conversation

If you discuss the history of a condition with a healthcare provider, prepare accurate information about your medical history and relevant circumstances.

Consider organizing:

- Relevant medical records.
- The history of your symptoms.
- Important dates and events.
- Previous diagnoses and treatment.
- Questions about your condition or medical history.

Describe your experiences accurately and completely.

Your healthcare provider is responsible for making independent medical findings and determining whether a medical opinion is appropriate.

# Nexus Evidence Review

Select one condition and examine the evidence that may address its relationship to military service or another service-connected disability.
Ask yourself:

1. What relationship needs to be established?
2. Which documents address that relationship?
3. What does each document actually explain?
4. Are there relevant medical opinions in the record?
5. What questions remain unanswered?

Do not assume that every unanswered question requires a new medical opinion. The purpose of this review is to understand your existing evidence before deciding what additional information, if any, may be useful.

# Next-Step Review

Identify the evidence in your file that addresses the relationship relevant to your claim.
Write down what that evidence establishes and what remains unclear.
As you continue through the Evidence Blueprint, remember that evidence serves different purposes. Understanding those purposes helps you organize your record and recognize where additional clarification may be needed.





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# Lesson 6 — Buddy Statements & Lay Evidence: How They're Actually Used

Not all evidence comes from medical records or official documents. Veterans and people who know them may have firsthand knowledge of events, symptoms, or changes in daily functioning.

Lay and buddy evidence can help establish observable facts, provide context, and explain experiences that may not appear in other records.

This lesson helps you understand what lay evidence can establish, recognize useful firsthand observations, and identify questions that may remain unanswered.

## Understanding Lay Evidence

Lay evidence is information provided by someone with personal knowledge of relevant facts.

Depending on the circumstances, that person might be:

- The veteran.
- A fellow service member.
- A spouse or family member.
- A friend or coworker.
- Someone who personally witnessed a relevant event.

The value of a statement depends on what the person actually knows and can describe.

A witness may describe an event they observed, symptoms they noticed, or changes in someone's activities or behavior.

However, observing symptoms does not automatically qualify someone to diagnose a medical condition or explain a complex medical relationship.

## What Can This Person Actually Know?

When reviewing lay or buddy evidence, consider three questions:

**1. Personal Knowledge — What did this person actually observe?**

Identify what the individual personally saw, heard, experienced, or otherwise knows firsthand. Distinguish direct observations from information learned through someone else.

**2. Competency — Is this person qualified to provide the information?**

A person may be competent to describe observable events, symptoms, or changes in behavior. However, certain medical diagnoses and complex medical relationships require appropriate medical expertise.

**3. Specificity — Does the statement explain what happened?**

Look for concrete details about the event or observation, including when it occurred, what the person noticed, and how the circumstances affected the veteran.

## Firsthand Observations Matter

Useful lay evidence focuses on what someone personally experienced or observed.

General statement: “He has experienced problems since leaving the military.”

Specific observation: “After returning from deployment, I noticed that he frequently complained about knee pain and avoided activities we previously enjoyed together.”

The second statement provides more information about what the witness observed.

Specific details can help establish context, but statements should reflect actual memories and observations rather than assumptions or reconstructed facts.

## Buddy Statement Planner

When reviewing an existing buddy statement, consider:

1. Who provided the statement?
2. How does that person know the veteran?
3. What event, symptom, or circumstance did the person personally observe?
4. When did the observation occur?
5. Does the statement explain the circumstances clearly?
6. What question does the statement help address?

As you review the statement, return to the three questions:

- Personal Knowledge: What does the witness know firsthand?
- Competency: Is the witness qualified to describe the information provided?
- Specificity: Are the observations clear, relevant, and sufficiently detailed to understand?

Flag questions that remain unclear. Do not attempt to assign credibility or evidentiary weight yourself.

A buddy statement should reflect the witness’s own knowledge and recollection.

Do not assume that a statement establishes facts beyond what the witness personally knows.

## Personal Statement Planner

A veteran’s personal statement can describe firsthand experiences that may not be fully documented elsewhere. When reviewing your own statement, consider whether it explains:

- What you personally experienced.
- When relevant events or symptoms occurred.
- How symptoms or limitations affected daily activities.
- What changes you observed over time.
- Which facts are based on personal knowledge.

Distinguish what you remember from what you learned through other sources.

The goal is an accurate account of your experiences, not a statement designed to produce a particular outcome.

# Observation Worksheet

Select one symptom, event, or functional limitation relevant to the issue you are examining.

Identify:

1. What was personally observed?
2. Who made the observation?
3. When did it occur?
4. How frequently did it occur, if applicable?
5. What effect did it have on ordinary activities?
6. What other evidence, if any, addresses the same facts?

Consider whether the observations help answer a question relevant to the claim.

Remember that different evidence may establish different facts. A statement describing observable symptoms may be useful without independently establishing a medical diagnosis or the cause of those symptoms.

# Evaluating Your Existing Statements

Review the personal and buddy statements already in your evidence file.

Ask yourself:

- Does each statement describe firsthand knowledge?
- Are the observations specific and understandable?
- Does the statement address a relevant question?
- Are there inconsistencies or details that need clarification?
- What facts remain unsupported or unclear?

An inconsistency does not automatically make a statement unreliable. Consider the circumstances, the passage of time, and the other evidence in the record.

The purpose is to understand what each statement contributes to the overall evidence.

# Next-Step Review

Choose one personal or buddy statement from your evidence inventory.

Identify what the statement establishes, what question it addresses, and what remains uncertain.

If you do not have a statement, consider whether someone has firsthand knowledge of a relevant fact that is not otherwise documented.

You do not need to collect statements from everyone who knows you. Focus on understanding which observations are relevant and what information they may contribute.

As you continue through the Evidence Blueprint, remember that lay evidence is one part of the larger record. Its usefulness depends on the facts it addresses and how it fits with the other available evidence.





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# Lesson 7 — DBQs: What the Form Actually Documents

Disability Benefits Questionnaires, commonly called DBQs, are standardized forms used to document medical information relevant to evaluating disabilities. Depending on the condition, a DBQ may address diagnoses, symptoms, examination findings, functional limitations, and other relevant medical information.

This lesson helps you understand what DBQs document, how they relate to other medical evidence, and what questions may remain unanswered.

## A DBQ Is a Container for Medical Information

A Disability Benefits Questionnaire is a standardized form used to organize medical information relevant to a particular condition.

Think of a DBQ as a container for medical information—not a magic piece of evidence.

The form itself does not establish that a disability is service connected, determine a disability rating, or guarantee a particular outcome.

What matters is the information documented within the questionnaire and the questions that information may help answer.

A DBQ may contain useful medical findings while leaving other questions relevant to the claim unanswered.

Understanding that distinction helps you examine a DBQ for what it actually documents rather than assuming that having the completed form resolves every issue.

## Understanding DBQs

## Three Questions to Ask About a DBQ

When examining a completed Disability Benefits Questionnaire, use three questions to understand its purpose and contents.

1. Which DBQ?

Identify the medical condition and the specific questionnaire being used.

Different DBQs document different medical conditions and findings. Understanding which questionnaire you are examining helps establish its intended purpose.

2. What's Documented?

Review the information actually recorded in the questionnaire.

Depending on the DBQ, this may include diagnoses, symptoms, examination findings, test results, functional limitations, or medical opinions.

Identify what the form documents without assuming that every section answers a separate claim requirement.

3. What Doesn’t It Answer?

Consider which questions relevant to the claim remain unanswered by the questionnaire.

For example, a DBQ may describe current symptoms and functional limitations without addressing the relationship between the condition and military service.

An unanswered question does not automatically mean the DBQ is incomplete or inadequate. Other evidence may address that question.

The purpose of these three questions is to understand what the DBQ contributes to the evidence record—not to determine whether the evidence is sufficient or predict a VA decision.

## What a DBQ Can Establish

A completed DBQ may provide information relevant to the existence or severity of a medical condition.

However, a DBQ does not automatically establish service connection or determine a disability rating.

Consider what the questionnaire actually documents and which question that information may help answer.

A DBQ may be useful for one part of a claim while leaving other questions unresolved.

# DBQs and C&P Examinations

A Compensation and Pension (C&P) examination is an examination or evaluation requested by VA to obtain information relevant to a claim.

A DBQ is a standardized form that may be used to record findings from that examination.

DBQs may also be completed by private healthcare providers when appropriate.

The questionnaire and the examination are related, but they are not the same thing.

VA evaluates DBQ findings alongside other relevant evidence when deciding a claim.

# Reviewing DBQ Evidence

Select one completed DBQ from your available evidence, if applicable.

Use the three-question framework to examine its contents.

1. Which DBQ?

- Which medical condition does the questionnaire address?
- What is the intended purpose of this questionnaire?

2. What's Documented?

- What diagnoses or medical findings are recorded?
- What symptoms and functional limitations are described?
- Are relevant examination findings or test results included?
- Which claim questions might this information help answer?

3. What Doesn't It Answer?

- What information, if any, remains unclear?
- Which questions relevant to the claim are not addressed by this questionnaire?
- Does other available evidence address those questions?

Record your observations without attempting to determine whether the medical findings are correct or whether the evidence is sufficient.

The goal is to understand what the questionnaire contributes to the overall evidence record.

# Identifying Unanswered Questions

A completed DBQ may contain useful medical information without addressing every question relevant to a claim.

For example, a questionnaire may document current symptoms and limitations without establishing their relationship to military service.

An unanswered question does not automatically mean the DBQ is inadequate.

Consider the purpose of the questionnaire, the type of claim, and the other evidence available.

# Next-Step Review

Select one completed DBQ or other medical examination report from your evidence, if available.

Identify what information it documents, which question that information may help answer, and what remains unclear.

If you do not have a completed DBQ, review the medical evidence you already possess and consider what information it establishes.

Remember that a DBQ is one part of the overall evidence record. Its usefulness depends on the information it contains and the questions relevant to your claim.



# Lesson 8 — Continuity of Symptoms

Symptoms and medical treatment may be documented at different points throughout a veteran's life. Understanding that history can help clarify what the available evidence establishes and where questions remain.

Continuity of symptoms may be relevant to certain VA disability claims, but it is not a universal requirement for service connection. This lesson helps you examine symptom histories, treatment timelines, and gaps in documentation without assuming what those gaps mean.

## Understanding Continuity

Continuity generally refers to symptoms that persist or recur over time.

Depending on the claim, evidence of symptoms over time may help establish relevant facts about a medical condition.

However, ongoing symptoms do not automatically establish a relationship to military service.

Consider what the available evidence documents and which question that information may help answer.

## Three Histories, Three Different Questions

When examining continuity of symptoms, distinguish between three related but different histories.

**1. Symptom History — What did you experience?**

This describes when symptoms began, whether they persisted or returned, how they changed over time, and how they affected ordinary activities.

**2. Treatment History — When did you receive medical care?**

This identifies when you sought evaluation or treatment, what was reported during those visits, and what medical findings were documented.

**3. Documentation History — What does the available evidence actually show?**

This identifies which periods are supported by medical records, personal statements, firsthand observations, or other available evidence.
These histories may overlap, but they are not interchangeable.

For example, a veteran may experience recurring knee pain for several years while seeking medical treatment only occasionally. A gap in treatment records does not automatically establish that symptoms stopped.

Likewise, evidence describing continuing symptoms does not necessarily establish their medical cause or relationship to military service.

The purpose of examining these three histories is to understand what the available evidence establishes, where information remains unclear, and which questions may require additional clarification.

# Symptom Timeline

Begin by reviewing the history of symptoms associated with the condition you are examining.
Consider:

- When symptoms were first noticed.
- Whether symptoms persisted, recurred, or changed.
- How symptoms affected daily activities or work.
- What records or firsthand observations document those experiences.
- Which periods remain unclear.

A timeline is an organizational tool. Its purpose is to help you understand the available information, not to establish a medical conclusion.

# Treatment Timeline

Review available medical records to identify when treatment or evaluation occurred.
Consider:

- Dates of medical appointments or examinations.
- Symptoms reported during those visits.
- Diagnoses or findings documented.
- Treatment received and any recorded responses.
- Periods without available treatment records.

A lack of continuous medical treatment does not necessarily mean symptoms were absent.

# Understanding Documentation Gaps

Some periods of a veteran's medical history may have limited or no documentation.

A gap in treatment records is not automatically proof that symptoms stopped.

When examining a gap, consider whether other available evidence provides relevant information, including personal statements or observations from people with firsthand knowledge.

Do not assume that every gap requires additional evidence or that every gap can be resolved.

# Next-Step Review

Select one medical condition from your evidence inventory.

Using the three-history framework, review the available evidence and answer these questions:

1. Symptom History: What does the available evidence establish about when symptoms began, continued, returned, or changed?
2. Treatment History: What medical evaluations, treatments, and findings are documented?
3. Documentation History: Which periods are supported by available evidence, and where are there gaps or unanswered questions?
4. Additional Evidence: What other available evidence, including personal statements or firsthand observations, may help explain periods with limited documentation?

Remember that a gap in medical treatment does not automatically mean symptoms were absent. Likewise, evidence of continuing symptoms does not necessarily establish their medical cause.

Your goal is to understand the available history accurately, identify what each source establishes, and recognize questions that remain unanswered.

Do not assume that every documentation gap must be filled or that continuity is required for every type of VA disability claim.





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# Lesson 9 — Secondary Service Connection

A disability may qualify for secondary service connection when it is caused or aggravated by an already service-connected disability.

Understanding secondary service connection requires examining the existing service-connected disability, the additional disability, and the evidence addressing the relationship between them.

This lesson helps you identify what your available evidence establishes and which questions may remain unanswered.

## Understanding Secondary Service Connection

Secondary service connection generally involves three considerations:

1. An existing service-connected disability.
2. An additional current disability.
3. Evidence establishing that the additional disability was caused or aggravated by the service-connected disability.

The existence of two disabilities does not automatically establish a relationship between them.

## Identifying the Primary Disability

Begin by identifying the disability that is already service-connected.

Review available VA decisions and relevant medical records.

Consider:

- Which disability has VA recognized as service-connected?
- What does the decision establish?
- What medical information describes the condition?
- Which records may be relevant to the claimed relationship?

The purpose is to understand the established disability and the available evidence concerning it.



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# Understanding the Secondary Disability

Next, examine the additional disability you believe may be related to the service-connected condition.

Consider:

- What medical condition is documented?
- What symptoms or limitations are described?
- When did those symptoms or limitations begin?
- What medical evaluations or findings are available?

These questions help clarify what the existing evidence establishes about the additional disability.

# Causation Versus Aggravation

Secondary service connection can involve two different relationships: causation and aggravation.

Understanding the distinction helps you recognize what your available evidence addresses and which questions may remain unanswered.

**1. Causation — Did the service-connected disability cause the additional disability?**

Causation concerns whether an already service-connected disability caused another disability to develop.

For example, a veteran may have a service-connected knee disability and subsequently develop another medical condition. The existence of both conditions does not establish that one caused the other.

The relevant question is whether competent evidence addresses the claimed causal relationship.

**2. Aggravation — Did the service-connected disability make another disability worse?**

Aggravation concerns whether an already service-connected disability caused an increase in the severity of another disability beyond its natural progression.

The additional disability does not necessarily have to originate from the service-connected condition.

For example, a veteran may have an independently developed medical condition that becomes more severe because of an existing service-connected disability.

The relevant question is whether the evidence addresses that worsening and its relationship to the service-connected disability.

**3. Evidence — Which relationship does the available evidence actually address?**

When reviewing medical records or opinions, consider:

- Does the evidence discuss whether one disability caused another?
- Does it separately address whether one disability aggravated another?
- Does the medical reasoning explain the relationship being discussed?
- What information describes the additional disability's severity and changes over time?
- Which questions remain unanswered?

Evidence addressing causation does not necessarily resolve aggravation, and evidence addressing aggravation does not necessarily establish causation.

For aggravation, VA regulations also address establishing a baseline level of severity. That determination involves medical evidence and applicable rating requirements.

Your role is to identify what the available evidence documents, not to independently determine medical causation, aggravation, or the appropriate baseline.

Understanding these distinctions helps you recognize which evidence may be relevant to the specific secondary-service-connection question being examined.

## Reviewing Relationship Evidence

Medical records or opinions may address whether one disability caused or aggravated another.

When reviewing available evidence, consider:

- Does the evidence discuss a relationship between the conditions?
- Does it address causation, aggravation, or both?
- What medical findings or reasoning support the conclusion?
- Are relevant medical histories considered?
- Does the evidence leave important questions unanswered?

Do not assume that symptoms occurring together establish medical causation.

## Identifying Unanswered Questions

Some records may document both disabilities without explaining whether they are medically related.

Other records may address causation without discussing aggravation.

An unanswered question does not automatically mean the evidence is inadequate.

Consider what the available records establish, which relationship is relevant, and whether other evidence addresses the remaining questions.

# Next-Step Review

Select one possible secondary disability and identify the existing service-connected disability you believe may be related to it.

Review the available evidence concerning both conditions.

Using the three-question framework, consider:

1. Causation: What evidence, if any, addresses whether the service-connected disability caused the additional disability?
2. Aggravation: What evidence, if any, addresses whether the service-connected disability increased the severity of the additional disability?
3. Evidence: What medical findings, explanations, or other relevant information address these relationships, and what questions remain unanswered?

Identify which relationship the available evidence discusses.

Remember that evidence addressing causation does not necessarily resolve aggravation, and evidence addressing aggravation does not necessarily establish causation.

Your goal is to understand what the available evidence establishes and where additional clarification may be useful.

Do not independently determine medical causation, aggravation, or whether the evidence is sufficient to establish service connection.



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# Lesson 10 — Presumptive & Increased-Rating Claims

Presumptive service connection and increased-rating claims involve different questions. A presumptive claim may depend on qualifying service, a covered condition, and specific eligibility requirements. An increased-rating claim focuses on the current severity of an already service-connected disability.

This lesson helps you identify which question applies to your situation, examine the evidence you already have, and recognize what information may still be needed.

## Two Claim Pathways, Two Different Questions

Presumptive service connection and increased-rating claims require different approaches to reviewing evidence.

**Pathway 1 — Presumptive Service Connection**

A qualifying presumption may establish the relationship between a disability and military service without requiring the veteran to independently prove that relationship through an individual medical nexus opinion.

However, applicable eligibility requirements still matter.

Depending on the presumption, those requirements may include qualifying service, location, exposure, diagnosis, manifestation, or timing.

**Pathway 2 — Increased-Rating Claims**

The disability is already service-connected.

The central question is whether the current evidence supports a higher evaluation under the applicable rating criteria.

Evidence of the original service connection is generally not the central issue.

## Understanding Presumptive Service Connection

Certain laws and regulations allow VA to presume a relationship between qualifying military service and specific medical conditions when applicable requirements are met.

Begin by identifying the particular presumption you believe may apply.

Ask yourself:

- What military service, location, or exposure is relevant?
- What medical condition is documented?
- What eligibility requirements apply to this presumption?
- What evidence establishes the relevant facts?
- What information, if any, remains unclear?

A presumption may address the relationship between a disability and military service, but other applicable requirements must still be satisfied.

# Reviewing Presumptive Evidence

Reviewing presumptive evidence involves identifying the applicable presumption, understanding its requirements, and examining which requirements your available evidence addresses.

Use three questions to organize your review.

**1. Which presumption may apply?**

Identify the specific presumptive provision relevant to the claimed medical condition.

Different presumptions have different eligibility requirements. Do not assume that qualifying under one presumption establishes eligibility under another.

**2. What evidence addresses those requirements?**

Review available service and medical records.

Depending on the applicable presumption, relevant information may include:

- Qualifying military service or deployment.
- Relevant dates, locations, or exposure circumstances.
- Documentation of the claimed medical condition.
- Other requirements specific to the presumption.

For each item, identify which requirement it may help establish.

**3. What remains unanswered?**

Compare the applicable requirements with the information documented in your available evidence.

Identify which requirements appear to be addressed and which questions remain unclear.

An unanswered question does not automatically establish that you are ineligible.

Some qualifying facts may be established through information already available to VA.

Your goal is to understand what your evidence documents and where additional clarification may be useful.

# Understanding Increased-Rating Claims

An increased-rating claim concerns the severity of a disability VA has already recognized as service connected.

The central question is whether the current evidence establishes the requirements for a higher evaluation under the applicable rating criteria.

Review your existing medical evidence and consider:

- What symptoms are currently documented?
- What examination findings or test results are available?
- What functional limitations are described?
- What changes have occurred since the previous evaluation?
- Which relevant rating criteria does the evidence address?

An increase in symptoms does not automatically establish entitlement to a higher rating. The applicable evaluation criteria determine which findings are relevant.

# Symptoms Are Evidence. Rating Criteria Determine Their Significance.

Different disabilities are evaluated under different diagnostic codes and rating criteria.

Depending on the condition, relevant evidence may describe:

- Frequency of symptoms.
- Duration of episodes.
- Severity of symptoms.
- Functional impairment.
- Examination findings.
- Specific measurements or test results.

A veteran may experience worsening symptoms without automatically qualifying for a higher evaluation.

The purpose of reviewing this information is to understand what the evidence documents and how those findings relate to the applicable rating criteria.

For an increased-rating claim, evidence describing the disability's current severity is generally more relevant than repeating evidence originally used to establish service connection.

# Current Severity Evidence

Medical records, examination reports, treatment histories, and personal observations may provide information about a disability's current severity.

Review what each source actually documents.

Consider whether the available evidence describes the frequency, duration, severity, or functional effects of symptoms when those details are relevant to the applicable criteria.

Not every disability is evaluated using the same measurements or standards.

# Next-Step Review

Begin by identifying which claim pathway you are examining.

**Pathway 1 — Presumptive Service Connection**

1. Identify the presumption you believe may apply.
2. Review its specific eligibility requirements.
3. Identify which available records address those requirements.
4. Record which questions remain unanswered.

**Pathway 2 — Increased-Rating Claims**

1. Identify the already service-connected disability.
2. Review the applicable rating criteria.
3. Identify available evidence describing the disability's current severity.
4. Compare what the evidence documents with the relevant criteria.
5. Record which questions remain unanswered.

Remember that different claim pathways require different evidence reviews.

Your goal is to understand what your evidence establishes, identify unanswered questions, and recognize where additional information may be useful.

Do not independently determine eligibility, assign a disability rating, or attempt to predict VA's decision.






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# Lesson 11 — Preexisting-Condition Aggravation

A medical condition may have existed before military service and later changed during service. In certain circumstances, worsening of a preexisting condition may be relevant to establishing service connection through aggravation.

This lesson helps you examine the available evidence concerning the condition before service, what happened during service, and what questions remain about any worsening.

## Understanding the Earlier Condition

Begin by reviewing the records describing the condition before or near the beginning of military service.

Consider:

- What condition was documented?
- When was it first identified?
- What symptoms or limitations were recorded?
- What did the entrance examination document?
- What information about the earlier condition remains unclear?

The purpose is to understand the available history, not to independently determine whether VA must legally consider the condition preexisting.

## Two Different Starting Points

When reviewing a condition that may have existed before military service, an important distinction is whether the condition was officially noted during the entrance examination.

**1. Condition Noted at Entry**

When a condition was noted on the entrance examination, the evidence review may focus on whether the underlying disability increased in severity during service and whether any increase was attributable to the condition's natural progression.

**2. Condition Not Noted at Entry**

When a condition was not noted on the entrance examination, the presumption of soundness may apply.

In that situation, different legal standards govern whether VA can establish that the condition both existed before service and was not aggravated by service.

A veteran's report of symptoms or medical history before service does not necessarily mean the condition was legally noted at entry.

**Why This Matters**

These two situations involve different legal questions and burdens of proof.

Your role is to identify what the entrance examination and other available records actually document—not to independently decide which legal presumption applies.

# Reviewing In-Service Changes

Next, examine records describing the condition during military service.

Relevant information may include medical visits, examination findings, treatment, duty limitations, and personal observations.

Ask yourself:

- What changes were documented during service?
- When did those changes occur?
- Were symptoms or limitations different from the earlier history?
- What evidence helps explain the circumstances?
- What questions remain unanswered?

A temporary increase in symptoms does not necessarily establish aggravation of the underlying condition.

# Understanding Natural Progression

Natural progression refers to the expected course of a medical condition over time.

When reviewing possible aggravation, an important question is whether the condition became more severe during military service and whether that worsening exceeded its natural progression.

The significance of this question depends on the applicable legal standard, including whether the condition was noted at entry.

Medical records, examination findings, treatment histories, and other relevant evidence may help document changes in severity.

A temporary increase in symptoms does not necessarily establish a lasting worsening of the underlying condition.

Do not independently determine whether a change represents natural progression or aggravation. That assessment may require medical expertise and must be considered under the applicable legal standards.

# Next-Step Review

Select one medical condition that may have existed before military service.

Review the available evidence using these four questions:

**1. Entrance Examination**

What does the entrance examination document about the condition? Was the condition formally noted, or does the record contain only a reported history?

**2. Earlier Medical History**

What evidence describes the condition before military service, including symptoms, diagnoses, treatment, or functional limitations?

3**. Changes During Service**

What evidence documents changes in symptoms, severity, treatment, or functional limitations during military service?

**4. Remaining Questions**

What does the available evidence establish, what remains uncertain, and what additional information may help clarify the history?

Remember that the applicable legal standards depend on the circumstances of the individual claim, including whether the condition was noted at entry.

Your goal is to organize and understand the evidence—not to independently determine whether VA must find that a condition preexisted service or was aggravated by military service.





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# Lesson 12 — Secondary Aggravation

Secondary aggravation is different from aggravation of a condition that existed before military service.

Preexisting-condition aggravation examines whether military service worsened a condition that existed before service.

Secondary aggravation examines whether an already service-connected disability caused an increase in the severity of another disability.

These are separate legal pathways with different evidentiary considerations.

Understanding which pathway applies helps you identify the relevant medical history, relationship evidence, and unanswered questions.

Unlike secondary causation, the question is not necessarily whether the service-connected condition originally caused the other disability. Instead, the question concerns whether it contributed to additional disability through aggravation.

This lesson helps you examine the available evidence concerning both conditions, their relationship, and any documented increase in severity.

## Understanding the Two Conditions

Begin by identifying the service-connected disability and the other condition you believe may have been aggravated.

Review the available records for each.

Ask yourself:

- What disabilities are documented?
- Which condition is already service connected?
- What medical history is available for the other condition?
- What relationship between the conditions is being considered?
- What information remains unclear?

The existence of two disabilities does not, by itself, establish secondary aggravation.

## Reviewing Changes in Severity

Begin by examining the history of the disability that may have been aggravated.

Look for evidence describing its severity before and after the suspected aggravation.



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Relevant evidence may include:

- Changes in symptoms.
- Changes in frequency or duration.
- Examination findings or diagnostic results.
- Changes in treatment.
- Functional limitations affecting daily activities or employment.

**An Important Distinction**

Secondary aggravation does not necessarily require permanent worsening.

The relevant question is whether the service-connected disability caused an additional increase in disability beyond the other condition's natural progression.

For example, a veteran may have an independently developed medical condition that becomes more severe because of an already service-connected disability.

The existence of both conditions does not establish aggravation. The evidence must address the relationship between them.

Your purpose is to identify documented changes and determine which questions the available evidence addresses—not to independently establish medical causation.

## Understanding Baseline Evidence

Baseline severity refers to the level of disability before aggravation began, or the earliest level of severity that can be established under the applicable VA requirements.

Under 38 CFR § 3.310(b), VA considers baseline severity when determining the degree of disability attributable to aggravation by a service-connected condition.

The regulation addresses establishing a baseline through medical evidence created before the onset of aggravation or through the earliest available medical evidence created between the onset of aggravation and evidence establishing the current severity.

**When reviewing your evidence, consider:**

- What medical records describe the disability before the suspected aggravation?
- What is the earliest available medical evidence describing its severity?
- What records document changes after the suspected aggravation?
- What medical findings describe its current severity?
- What questions remain unanswered?

The baseline matters because VA must distinguish the degree of disability attributable to aggravation from the disability's baseline severity and natural progression.

Do not independently calculate a baseline disability rating or assume that identifying worsening automatically establishes secondary aggravation.

Your goal is to recognize what the available medical evidence documents and what additional clarification may be necessary.

# Reviewing Relationship Evidence

Medical evidence may address whether an already service-connected disability aggravated another condition.

When examining the available evidence, distinguish between three questions.

**1. What Changed?**

What evidence documents an increase in the severity of the additional disability?

Consider symptoms, medical findings, treatment history, and functional limitations.

**2. What Caused the Change?**

Does the available medical evidence discuss whether the service-connected disability contributed to the increase in severity?

Evidence documenting worsening does not necessarily establish what caused that worsening.

**3. What Does the Medical Explanation Establish?**

Does a medical opinion explain the relationship between the disabilities?

Does it address aggravation specifically, rather than discussing only whether one disability originally caused the other?

Does it consider relevant medical history and other possible explanations?

A medical opinion may be particularly relevant when the relationship involves medical causation or aggravation.

Your responsibility is to understand what the available evidence addresses and recognize unanswered questions—not to independently determine whether medical aggravation occurred.

# Next-Step Review

Select one already service-connected disability and another disability you believe may have been aggravated by it.

Review the available evidence using these five questions.

**1. Identify the Disabilities**

Which disability is already service-connected?

Which additional disability may have increased in severity?

**2. Establish the History**

What medical evidence describes the additional disability before the suspected aggravation?

What evidence describes its current severity?

**3. Identify Changes**

What documented changes in symptoms, medical findings, treatment, or functional limitations occurred over time?

**4. Review the Relationship**

Does the available medical evidence address whether the service-connected disability contributed to an increase in the severity of the additional disability?

Does it discuss aggravation separately from causation?

**5. Identify Unanswered Questions**

What does the available evidence establish?

Which questions remain uncertain?

What additional medical information may help clarify the relationship?

Remember that secondary aggravation does not necessarily require permanent worsening.

However, evidence of worsening alone does not establish that the service-connected disability caused that increase.

Your goal is to understand the documented history, identify evidence addressing the claimed relationship, and recognize unanswered questions.

Do not independently determine medical causation, assign a baseline disability rating, or predict VA's decision.





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# Lesson 13 — Organize & Check Your Evidence

Organizing your evidence helps you understand what information you have, what questions each document addresses, and what may still be missing.

A well-organized record can make it easier to review relevant information, identify inconsistencies, and recognize unanswered questions.

This lesson helps you create an evidence inventory, organize records by their purpose, and conduct a final review of the information available.

## Build Your Evidence Inventory

Begin by listing the records and other evidence you already possess.

For each item, identify:

- What the document or evidence is.
- When it was created.
- Who provided it.
- What relevant facts it contains.
- Which question or requirement it may help address.

Your inventory does not need to be complicated. A notebook, spreadsheet, or simple document list may be sufficient.

The goal is to understand what evidence is available and what information it contains.

## A Simple Evidence Inventory Method

Consider creating an inventory with six columns:

1. Document or Evidence Name
2. Date
3. Source
4. Relevant Information
5. Question or Requirement Addressed
6. Follow-Up Needed

For example, a treatment record might document a diagnosis, describe symptoms, and identify when treatment occurred. Your inventory can identify those facts and the questions they may help answer.

A document may address more than one requirement. Record each relevant connection rather than assuming every document serves only one purpose.

The inventory is an organizational tool. It does not determine whether evidence is sufficient or whether VA will grant a claim.

# Organize Evidence by Purpose

Different documents may address different questions.

For example, service records may help establish relevant events or circumstances during military service. Medical records may document diagnoses, symptoms, examination findings, or treatment.

Personal statements and buddy statements may describe events or symptoms that someone personally observed.

Consider grouping your evidence according to the questions it may help answer.

Remember that a document may be relevant to more than one question, and different claim pathways require different evidence.

# Organize Around the Question, Not Just the Document Type

Instead of organizing records only by category, such as medical records or service records, consider organizing them according to the questions they help answer.

For example, in a direct service-connection claim, those questions may concern a current disability, an in-service event or circumstance, and the relationship between them.

Other claim pathways may require different questions.

This approach helps you recognize when several documents address the same requirement while another important question remains unanswered.

# Review Your Evidence

Once your records are organized, review them against the questions identified in Lesson 1.

Ask yourself:

- What am I trying to establish?
- What evidence addresses each relevant question?
- Is the information specific and understandable?
- Are there inconsistencies or unanswered questions?
- Does other available evidence help clarify those questions?

# Recognizing Gaps and Weaknesses

As you review your evidence, distinguish between two situations.

Do not assume that a large number of documents means every necessary question has been answered.

Likewise, a smaller record may contain information that directly addresses the relevant requirements.

**Evidence Gap:** The available records do not address a question relevant to the claim.

**Evidence Weakness:** The available records address the question, but the information may be incomplete, unclear, inconsistent, or lacking important details.

For example, a medical record may document a diagnosis but contain little information about when symptoms began or how they affect daily activities.

That does not necessarily mean the evidence is inadequate. It means you should identify what the record actually establishes and what remains uncertain.

Recognizing these differences helps you determine which questions may benefit from additional documentation or clarification.

Your role is to identify unanswered questions, not to independently decide whether the evidence satisfies VA's legal or medical requirements.

# Recognizing Common Mistakes

As you review your evidence, look for issues that may make the record difficult to understand.

These may include:

- Documents that do not address the relevant question.
- Missing dates or unclear timelines.
- Statements that lack specific observations.
- Conflicting information requiring clarification.
- Important questions not addressed by the available records.

An inconsistency or unanswered question does not automatically mean the evidence is inadequate.

Consider the circumstances and the other information available.

# Next-Step Review

Select one claim or disability issue you are examining.

Complete the following five steps.

**1. Create Your Inventory**

List the available records and identify the relevant information each contains.

**2. Identify the Questions**

Determine which questions are relevant to the claim pathway you are examining.

**3. Match Evidence to Questions**

Identify which documents address each question. Remember that one document may address several requirements.

**4. Identify Gaps and Weaknesses**

Record questions that remain unanswered and information that appears incomplete, unclear, or inconsistent.

**5. Record Possible Follow-Up Actions**

Identify whether additional records, clarification, or professional guidance may help address the remaining questions.

You do not need to collect every possible document or eliminate every uncertainty.

Your goal is to understand the evidence you have, recognize what it addresses, and identify questions that may require further attention.

Do not independently determine medical causation, legal entitlement, or the outcome of a VA claim.





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# Final Review — Putting Your Evidence Blueprint Together

You have now worked through the major evidence concepts covered in the Evidence Blueprint.

This final review brings those concepts together into a structured review of the information you have, the questions your evidence addresses, and any uncertainties that remain.

The purpose is not to predict a VA decision or determine whether you should file. It is to help you understand your evidence and make more informed decisions about your next steps.

## Return to Your Original Question

Begin with the claim or disability issue you identified in Lesson 1.

Ask yourself:

- What am I trying to establish?
- Which claim pathway applies?
- What requirements are relevant to that pathway?
- What evidence do I currently have?
- Which questions does that evidence address?

Different claims require different evidence. Review your situation according to the requirements that actually apply.

## Review Your Evidence

Return to the inventory you organized in Lesson 13.

For each important item, consider:

- What information does it contain?
- Who provided the information?
- What question does it help answer?
- How does it relate to other available evidence?
- What, if anything, remains unclear?

Remember the three lenses introduced in Lesson 2: competency, credibility, and weight.

Evidence must be understood in context rather than reduced to a simple numerical score.

## Identify Remaining Questions

Review the gaps or uncertainties you identified throughout the earlier lessons.

Consider whether additional records, clarification, or professional guidance may help address them.

Not every unanswered question means evidence is inadequate, and not every uncertainty requires another document.

Your goal is to recognize what remains uncertain and understand why it may matter.

## Consider Your Next Steps

Once you understand your available evidence, consider what additional information or assistance, if any, may be appropriate.

You may wish to review official VA guidance or consult a VA-accredited representative regarding claim-specific requirements, filing procedures, deadlines, or effective-date considerations.

Do not assume that every identified evidence gap requires delaying a filing decision.

## Final Reflection

Compare your understanding today with where you began in Lesson 1.

You should now be better equipped to identify relevant evidence, recognize unanswered questions, and understand how different records may contribute to a disability claim.

The Evidence Blueprint does not guarantee a particular outcome.

It provides a repeatable method for examining evidence, asking better questions, and approaching the VA disability claims process with greater clarity.

Use the evidence inventory you created in Lesson 13 to complete this final review. Focus on one claim or disability issue at a time.

# Final Thoughts

You have completed The Evidence Blueprint Field Manual.

Throughout this educational journey, you have explored the different kinds of evidence involved in VA disability claims, the questions that evidence may help answer, and the importance of understanding how individual records fit into the larger picture.

You have learned that a large collection of documents does not necessarily mean every important question has been answered. You have also learned that an unanswered question does not automatically mean a claim will fail.

The purpose of this manual was never to predict your disability rating or guarantee a particular outcome.

It was to give you a practical framework for understanding your evidence, identifying unanswered questions, and approaching the VA disability claims process with greater clarity and confidence.

## Your Mission Going Forward

As you continue your journey, remember the principles introduced throughout the Evidence Blueprint:

- Understand the requirements relevant to your particular claim.
- Recognize what each piece of evidence establishes.
- Consider competency, credibility, and weight.
- Organize your records so important information can be located and understood.
- Identify questions that remain unanswered.
- Seek reliable information or qualified assistance when appropriate.

You do not need to become an expert in VA disability law.
You do need to understand enough about your own circumstances to ask informed questions and participate meaningfully in decisions affecting your claim.

# Continue Building Your Knowledge

The VA disability claims process involves different claim pathways, evidentiary requirements, and procedural considerations.

Requirements and policies may change over time.

Continue using official VA resources, reviewing applicable guidance, and seeking assistance from VA-accredited professionals when you need claim-specific advice or representation.

Return to the Evidence Blueprint whenever you need to organize your thoughts, examine new records, or better understand an unfamiliar part of the process.

# A Final Word From Gunny

After 20 years in the Marine Corps, one lesson has stayed with me: preparation begins with understanding the mission.

That principle applies here.

You cannot control every part of the VA disability claims process, and no amount of preparation can guarantee a particular decision.

But you can take responsibility for learning, asking questions, understanding your records, and making informed choices.

That is what Veteran Claims Made Easy is here to help you do.

**Clarity before action.**

Semper Fidelis,

Nicasio “Gunny” Rios
Founder, Veteran Claims Made Easy
Retired U.S. Marine Gunnery Sergeant






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