



Combat PTSD Stressor Guide

Veteran's GUIDE on PTSD and finding information on stressor letters!

Vietnam Veterans

Suggestions for veterans or their survivors seeking VA benefits.

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The purpose of this guide is to assist you, the veteran or survivor, in presenting your claim based on the veteran's exposure to unusually stressful events that led to posttraumatic stress disorder (PTSD). The best way to present your claim to the U.S. Department of Veterans Affairs (VA) is to work with a trained veterans advocate.

This guide describes the VA's current programs for compensating veterans with PTSD or their survivors. Under current VA rules, you can be paid compensation for PTSD if you have a clear diagnosis of the condition, evidence that an in -service stressful event occurred and

medical evidence that the "Stressor" is linked to the PTSD. Once the VA agrees that your PTSD is service connected, it will then decide how seriously the condition impairs your ability to work.

This guide does not address treatment techniques but does give you suggestions for getting medical care. Additional resources are available to help you understand whether other VA programs may be available to you.

PTSD is not a new problem. It is simply a new name for an old disorder that has been around for thousands of years. The new name has been in use since 1980 when the American Psychiatric Association citation began to use it in its manual of mental disorders. Although it is often associated with Vietnam veterans, it is being increasingly reported in WWII veterans, perhaps as a consequence of publicity surrounding the 50th anniversaries of WWII events.

WHAT IS PTSD?

The Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition (1994) states:

Diagnostic Features

The essential feature of Posttraumatic Stress Disorder is the development of characteristic symptoms following exposure to an extreme traumatic Stressor involving direct personal experience of an event that involves actual or threatened death or serious injury, or other threat to one's physical integrity; or witnessing an event that involves death, injury, or a threat to the physical integrity of another person, or learning about unexpected or violent death, serious harm, or threat of death or injury experienced by a family member or other close associate.

- (Criterion A1). The person's response to the event must involve intense fear, helplessness, or horror (or in children, the response must involve disorganized or agitated behavior)
- (Criterion A2). The characteristic symptoms resulting from the exposure to the extreme trauma include persistent reexperiencing of the traumatic event

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- (Criterion B), persistent avoidance of stimuli associated with the trauma and numbing of general responsiveness
 - (Criterion C), and persistent symptoms of increased arousal
 - (Criterion D). The full symptom picture must be present for more than 1 month
 - (Criterion E), and the disturbance must cause clinically significant distress or impairment in social, occupational, or other important areas of functioning (Criterion F).

Traumatic events that are experienced directly include, but are not limited to, military combat, violent personal assault (sexual assault, physical attack, robbery, mugging), being kidnapped, being taken hostage, terrorist attack, torture, incarceration as a prisoner of war or in a concentration camp, natural or manmade disasters, severe automobile accidents, or being diagnosed with a life-threatening illness. For children, sexually traumatic events may

include developmentally inappropriate sexual experiences without threatened or actual violence or injury. Witnessed events include, but are not limited to, observing the serious injury or unnatural death of another person due to violent assault, accident, war, or disaster or unexpectedly witnessing a dead body or body parts. Events experienced by others that are learned about include, but are not limited to, violent personal assault, serious accident, or serious injury experienced by a family member or a close friend; learning that one's child has a life-threatening disease. The disorder may be especially severe or long lasting when the Stressor is of human design (e.g., torture, rape). The likelihood of developing this disorder may increase as the intensity of and physical proximity to the Stressor increase.

The traumatic event can be reexperienced in various ways. Commonly the person has recurrent and intrusive recollections of the event (Criterion B1) or recurrent distressing dreams during which the event is replayed (Criterion B2). In rare instances, the person experiences associative states that last from few seconds to several hours, or even days, during which components of the event are relived and the person behaves as though experiencing the event at that moment (Criterion B3). Intense psychological distress (Criterion B4) or physiological reactivity (Criterion B5) often occurs when the person is exposed to triggering events that resemble or symbolize an aspect of the traumatic event (e.g., anniversaries of the traumatic event; cold snowy weather or uniformed guards for survivors of death camps in cold climates; hot, humid weather for combat veterans of the South Pacific; entering any elevator for a woman who was raped in an elevator).

Stimuli associated with the trauma are persistently avoided. The person commonly makes deliberate efforts to avoid thoughts, feeling, or conversations about the traumatic event (Criterion C1) and to avoid activities, situations, or people who arouse recollections of it (Criterion C2). This avoidance of reminders may include amnesia for an important aspect of the traumatic event (Criterion C3). Diminished responsiveness to the external world, referred to as "psychic numbing" or "emotional anesthesia," usually begins soon after the traumatic event. The individual may complain of having markedly diminished interest or participation in previously enjoyed activities (Criterion C4), of feeling detached or estranged from other people (Criterion C5), or of having markedly reduced ability to feel emotions (especially those associated with intimacy, tenderness, and sexuality) (Criterion C6). The individual may have a sense of foreshortened future (e.g., not expecting to have a career, marriage, children, or a normal life span) (Criterion C7).

The individual has persistent symptoms of anxiety or increased arousal that were not present before the trauma. These symptoms may include difficulty falling or staying asleep that may be due to recurrent nightmares during which the traumatic event is relived (Criterion D1), hyper vigilance (Criterion D4), and exaggerated startle response (Criterion D5). Some individuals report irritability or outbursts or anger (Criterion D2) or difficulty concentrating or completing tasks (Criterion D3).

STEP 1: GET HELP

It is a good idea to get a representative to help you present your claim to the VA. VA rules and procedures are very complicated. It can be frustrating and hazardous to go it alone.

Many veterans service organizations and state and county veterans service agencies offer free assistance. No matter who you select to represent you, it is important that you be personally involved in your case and make certain that everything that should be done, is done.

Although it can be a difficult task, shop around for the best advocate. Talk to the prospective representative; ask if there are any limits on his service; get a feel for the person who will be working for you before you sign a power of attorney appointing the person as your representative.

STEP 2: APPLY

- **When to Apply:** You should notify the VA of the benefits you want at the earliest possible time. From anywhere in the U.S., you can call the nearest VA Regional Office (VARO) by using the following number: 1-800-827-1000. Do not wait until you have gathered all the evidence you think you need. Every day you delay can mean another day of benefits lost forever.

Warning: Do not be discouraged by a VA employee who says you are not entitled to benefits. Put your claim in writing and insist on a written reply from the VA.

- **How to Apply:** To apply, send the VA a letter stating that you have a problem with your nerves that arose out of your military service. This is called an informal claim and will count as an application (although you will eventually be re required to fill out some VA forms). If you have not heard back from the VA within a month you should call to confirm that your application has been received. If you applied before, send a letter that says you are "reopening" your claim.
- **What to Apply For:** The VA offers cash benefits to veterans with service-connected disabilities (under the compensation program) and to veterans with serious nonservice-connected disabilities (under the pension program). Survivors may be entitled to death benefits.
- **Who Can Apply:** A claim for PTSD is not limited to veterans who saw combat in Vietnam. You may have been assaulted or raped or involved in an auto accident or plane crash or other catastrophe, while in service.

Sometimes survivors of veterans including spouses or children and parents can apply for service-connected death benefits (the Dependency and Indemnity Compensation or DIC program) or for the nonservice-connected death benefits (pension program). A survivor might be able to show that a veteran with PTSD who commits suicide did so as a result of the PTSD and then qualify for DIC.

Frequently, veterans with PTSD may have other diagnoses: for example, personality disorder or substance abuse. It is very important that your doctor explain how your current diagnosis of PTSD relates to these other disorders. If alcohol or drug abuse was "self-medication" to lessen the symptoms of PTSD, that should be stated.

You can expect the VA to contact you for evidence or for permission to write to your doctor for your medical records. Your response to any VA request for evidence should be made only after consulting with your representative.

The VA ordinarily schedules you for an examination by one of its doctor at a VA hospital or clinic. This "C&P exam" is intended to confirm a diagnosis of PTSD. If you bring a copy of your doctor's report with you, it will be easier for the VA doctor to complete the exam.

If you do not already have a private doctor's report, you should expect the VA doctor to ask many questions about what symptoms you have, when you began to have them, how often and how long you have had them. Some of the hardest questions will be about the stressful experience you had. You will need to be able to describe in detail (and sometimes painful detail) exactly what you experienced. You might also be asked to take a written, standardized test.

The VA doctor prepares a written report that is sent to the VARO in about a month.

STEP 4: GET EVIDENCE OF STRESSOR

To win a PTSD-based claim, you need (1) a diagnosis of PTSD *and* (2) evidence of a stressful event during your military service. Even if you convince 10 VA and 10 private psychiatrists that you have PTSD, the VARO can still deny your claim if it does not accept your evidence about the stressful event that caused the PTSD.

The Stressor you experienced needs to be documented. If your Stressor was related to combat while engaged in action with the enemy, your testimony alone should convince the VA that you experienced the event. The VA should not even question your statement if you had a combat MOS or you received a Purple Heart or other award indicating combat service.

On the other hand, if you did not have a combat MOS and simply state that you were often under mortar and rocket attacks, the VA may simply say that your experience was not stressful enough to have caused PTSD since nearly everyone stationed in Vietnam came under such attacks. If, however, you were next to a buddy who was killed or injured, the fact of the death or injury is something that can be confirmed.

If you are a Vietnam vet and you provide the VA with enough details about stressful events in your service, the VA will contact the U.S. Army and Joint Services Environmental Support Group and ask it to review records of the Vietnam war to try to corroborate your experiences. Your representative should be able to show you the *guide for the Preparation of PTSD Research Requests* that the Support Group offers to reps to help them make a request that the Support Group can work with.

To understand what evidence the VA already has collected, get a free copy of your VA claims file from the VARO. If you need to document your service in Vietnam, get a free set of your complete military personnel records from the National Personnel Records Center in St. Louis using a Standard Form 180, Request Pertaining to Military Records. This form is available from your representative or any VA office.

STEP 5: PRESENT EVIDENCE

You do not help yourself if you simply dump a wad of loose records on the VA. Organize the records and explain their significance in a letter you and your representative prepare together.

If the VA Regional Office says your disability is not service-connected or if the percentage of disability is lower than what you think is fair, you have the right to appeal to the Board of Veterans' Appeals.

Once the VA agrees that your PTSD is service-connected, it must determine how impaired you are. The VA regulation that controls this determination is the VA Schedule for Rating Disabilities, 38 C.F.R. §4.130, Diagnostic Code 9411. Under this regulation, PTSD can be rated at 0, 10, 30, 50, 70 or 100%. The symptoms that the VA looks for to set a rating are listed below. Share this regulation with your therapist and ask him or her to write to the VA describing the severity of your condition. Also ask your therapist to use the Global Assessment of Functioning Scale listed in the Diagnostic and Statistical Manual of Mental Disorders.

Keep in mind that under another VA regulation (38 C.F.R. § 4.16), if you can't work because of your PTSD, the VA must set you at 100% even if you don't meet the criteria listed below for a 100% rating. If the VA evaluates your disability too low, you should appeal that.

Diagnostic Criteria of PTSD.

The following information is what the Veterans Affairs interviewer will be looking for during your intake interview. It's long, BUT please read it all and see how your trauma fits within these guidelines!

- A. The person has been exposed to a traumatic event in which both of the following were present:**
 - 1. the person experienced, witnessed, or was confronted with an event or events that involved actual or threatened death or serious injury, or a threat to the physical integrity of self or others**
 - 2. the person's response involved intense fear, helplessness, or horror.**
- B. The traumatic event is persistently re experienced in one (or more) of the following ways:**
 - 1. Recurrent and intrusive distressing recollections of the event, including images, thoughts, or perceptions.**
 - 2. Recurrent distressing dreams of the event.**
 - 3. Acting or feeling as if the traumatic event were recurring (includes a sense of reliving the experience, illusions, hallucinations, and associative flashback episodes, including those that occur on awakening or when intoxicated).**
 - 4. intense psychological distress at exposure to internal or external cues that symbolize or resemble an aspect of the traumatic event**
 - 5. physiological reactivity on exposure to internal or external cues that symbolize or resemble an aspect of the traumatic event**
- C. Persistent avoidance of stimuli associated with the trauma and numbing of general responsiveness (not present before the trauma), as indicated by three (or more) of the following:**
 - 1. efforts to avoid thoughts, feelings, or conversations associated with the trauma**
 - 2. efforts to avoid activities, places, or people that arouse recollections of the trauma**
 - 3. inability to recall an important aspect of the trauma**
 - 4. markedly diminished interest or participation in significant activities**
 - 5. feeling of detachment or estrangement from others**
 - 6. restricted range of affect (e.g., unable to have loving feelings)**

- 7. sense of a foreshortened future (e.g., does not expect to have a career, marriage, children, or a normal life span)
- D. Persistent symptoms of increased arousal (not present before the trauma), as indicated by two (or more) of the following:
 - 1. difficulty falling or staying asleep
 - 2. irritability or outbursts of anger
 - 3. difficulty concentrating
 - 4. hyper vigilance
 - 5. exaggerated startle response
- E. Duration of the disturbance (symptoms in Criteria B, C, and D) is more than 1 month.
- F. The disturbance causes clinically significant distress or impairment in social, occupational, or other important areas of functioning.

Specify if:

- Acute: if duration of symptoms is less than 3 months
- Chronic: if duration of symptoms is 3 months or more

Specify if:

- With Delayed Onset: if onset of symptoms is at least 6 months after the Stressor
- **A personal report.** A Stressor letter of a combat experience or other. To the Department of Veterans Affairs. (VA)

**38 C.F.R. 4.130 (excerpt),
General Rating Formula for Mental Disorders:**

Total occupational and social impairment, due to such symptoms as: gross impairment in thought process or communication; persistent delusions or hallucinations; grossly inappropriate behavior; persistent danger of hurting self or others; intermittent inability to perform activities of daily living (including maintenance of minimal personal hygiene); disorientation to time or place; memory loss for names of close relatives, own occupation, or own name
 100

Occupational and social impairment, with deficiencies in most areas, such as work, school, family relations, judgment, thinking, or mood, due to such symptoms as: suicidal ideation; obsessional rituals which interfere with routine activities; speech intermittently illogical, obscure, or irrelevant; near-continuous panic or depression affecting the ability to function independently, appropriately and effectively; impaired impulse control (such as unprovoked irritability with periods of violence); spatial disorientation; neglect of personal appearance and hygiene; difficulty in adapting to stressful circumstances (including work or a work like setting); inability to establish and maintain effective relationships
 70

Occupational and social impairment with reduced reliability and productivity due to such symptoms as: flattened affect; circumstantial, circumlocutory, or stereotyped speech; panic attacks more than once a week; difficulty in understanding complex commands; impairment of short- and long-term memory (e.g., retention of only highly learned material, forgetting to complete tasks); impaired judgment; impaired abstract thinking; disturbances of motivation and mood; difficulty in establishing and maintaining effective work and social relationships
..... 50

Occupational and social impairment with occasional decrease in work efficiency and intermittent periods of inability to perform occupational tasks (although generally functioning satisfactorily, with routine behavior, self-care, and conversation normal), due to such symptoms as: depressed mood, anxiety, suspiciousness, panic attacks (weekly or less often), chronic sleep impairment, mild memory loss (such as forgetting names, directions, recent events)
..... 30

Occupational and social impairment due to mild or transient symptoms which decrease work efficiency and ability to perform occupational tasks only during periods of significant stress, or; symptoms controlled by continuous medication
..... 10

A mental condition has been formally diagnosed, but symptoms are not severe enough either to interfere with occupational and social functioning or to require continuous medication
..... 0

HOW TO FILE A VA CLAIM

You can write them at:

DEPARTMENT OF VETERANS AFFAIRS Veterans Service Center

Don't Go It Alone

**Seek Free Help Thru Your Local State of Veterans Affairs,
Disabled American Veterans, Veterans Of Foreign Wars,
American Legion.**

What are the Steps in Processing My Claim?

- What you can do...?
- Step 1-You file your claim
- Step 2-We obtain evidence
- Step 3-You are examined at VA hospital

- Step 4-Complete record is evaluated
- Step 5-A decision is made

Other Information

what causes delays in the claims process?

How does the appeal process work?

What is the best way to communicate with the VA?

National Personnel Records Center

Fire Related Cases

Post Traumatic Stress Disorder

DEFINITIONS

In order to make our communications as clear as possible, we'd like to define some of our terms:

Compensation: The benefit paid to veterans whose disabilities arose from service. The disabilities themselves are often referred to as Service Connected or "S/C".

Pension: The benefit paid to veterans whose disabilities are not related to service and who have a financial hardship. The disabilities themselves are often referred to as Non-Service Connected or "NSC".

Rating Schedule: The guide we use to determine which disabilities we can pay for and the percent to which they are disabling.

Claim Number: How we monitor and identify your claim. Any letters you receive from this office should have the claim number in the upper right hand corner. The letters "C", "XC", "CSS" or "XSS" will precede your claim number. It is very important that you have this number available whenever you contact this office.

Step 1: You File Your Claim

the disability claim process begins when you file a claim.

If you have never filed a disability claim with us, we need you to complete and submit a VA Form 21-526 (Veteran's Application for Compensation or Pension). You may complete the form with the assistance of a case manager at our office or you may call or write and have this form sent to you. Once you have completed the form, you should return it to this office.

If you have questions while attempting to complete this form on your own, please call this office. It may save our having to delay processing your claim while we attempt to get clarification of your answer to the question about which you were unsure.

If you filed a claim in the past, whether you were granted or denied benefits, you do not need to complete a VA Form 21-526 again. However, we do need your signed statement telling us what you want to claim, why, and where you were treated for the claimed condition.

Step 2: We Obtain Evidence

(this step takes: 1-4 months)

Based on the disability claim you submit to us, we begin compiling evidence to support your claim. Thus, any evidence that you are able to secure beforehand and submit with your claim will expedite this step.

Your disability evaluation will be based on this evidence, so it is essential that we have complete and accurate information.

We will assist you by verifying your service dates (based on the information that you furnish on your application) and requesting your service medical records. If you send us a signed medical release (there are copies attached to VA Form 21-526), we will also request your private medical records.

We may request more information from you. This may include letters detailing specific experiences in service or information on your dependents, employment history or income. You can help speed the process by providing complete addresses for the medical care and be as exact as possible in reporting dates of treatment. Please send requested information in as soon as possible. You don't need to wait until the 60 days we have given you have expired. You should also make sure that you include your VA file number on all pages of anything that you submit.

**Step 3: You Are Examined at a VA Hospital
(this step takes 1-3 months)**

Often we request exams while we wait for other evidence to arrive. Sometimes, we first have to review the other evidence to be certain we are requesting the proper exams. The exams that we request for you will depend on your claim and treatment history.

The VA Medical Center will schedule you for the requested exam. They will contact you directly by mail to let you know when and what exams are scheduled for you. After each exam, an examination report will be prepared and sent to our office. You can help expedite this process by keeping your exam appointments and by asking your private medical providers to send a copy of your records to our office. Remember to ask them also to include your VA file number on the records that they submit.

**Step 4: Complete Record is Rated
(this step takes: 2-3 months)**

As evidence is received, VA places the records in your claims folder. When we have all the necessary evidence, your claim is ready to be rated. Due to our current backlog, there may be a two or three month wait before your individual claim can be rated.

We evaluate the medical evidence and other documents to support your medical condition. We then identify how these conditions correspond to the rating schedule. This schedule designates what disabilities we can pay for and at what percent. The schedule is based on the laws passed by Congress.

We will consider all evidence submitted and will pay the maximum benefit allowed by law. If there is a change in your disability after you've filed your claim or if you want us to evaluate

additional disabilities, please let us know as soon as possible.

Step 5: A Decision is Made (this step takes 1-3 weeks)

After the rating is completed, you will be notified promptly of our decision. We will provide you with the reasons for all decisions to grant or deny benefits. If you do not agree with our decision, we will explain the appeal process.

If you have any questions, please call their toll-free number at 1-800-827-1000.

WHAT CAN I DO TO HELP...?

Be as thorough as possible in completing your claim application. Do NOT assume that they have information on file already. ALWAYS sign your name on the application form.

Respond as quickly and completely as possible when we ask you for information.

If you are scheduled for a medical exam, please keep your appointment. If you are unable to keep your appointment (for whatever reason), please contact the VA medical Center where you were scheduled to report as soon as possible.

If you have been treated for your disability by private medical providers, please ask them to send us a copy of your treatment record.

On any application that you submit, ALWAYS provide a complete mailing address (to include your specific apartment number if you live in an apartment building) and, if possible, a daytime phone number (including the area code) where you can be reached in case we need to obtain clarification on any part of your application. Let us know, as soon as possible, if you change your address or phone number.

If you are in doubt about what to do at any time, please contact us at 1-800-827-1000.

Any time you call their office about your claim, please have your VA file number available to give to the person who assists you. You can find this number in the upper right hand section of any correspondence from this office. If you can't remember and can't find your VA file number, please have your Social Security number (or - if you are a survivor of a veteran - have the veteran's Social Security number) available since (starting in the mid-1970's) this is usually the number assigned as the VA file number.

Any time that you write to VA, you should include your VA file number not only on your letter but also on any documents that you submit in support of your claim - in case they become detached from your letter.

You were there when they needed you - now their here for you.

What Causes Delays?

Claims within a specific category are processed in the order they are received. Time to process is particularly hard to estimate on cases involving PTSD, Persian Gulf illnesses, reserve units, and fire-related cases. The time it takes to process a claim varies for several reasons. First, we need to get the information needed to make a decision; this includes medical records, verification of honorable discharges, copies of certificates, etc. Although we are a government department, we have no special way to get records from private hospitals, other government agencies, records centers (such as the National Personnel Records Center), or military bases, hospitals or reserve units. Claims with records from several sources take longer to get records than others. One way to help is to get as many of your records as possible to submit with your claim.

Appeals of Decisions

An appeal of a local decision involves many steps, some optional and some necessary, and strict time

limits. In order, the steps are:

Notice of Disagreement (NOD)

Statement of the Case (SOC)

Formal Appeal (VA Form 9 or equivalent)

Hearings (Optional)

Board of Veterans' Appeals (BVA)

United States Court of Appeals for Veterans' Claims (CAVC)

The case may also involve remands at the BVA and/or COVA levels. Someone may have several appeals at once, and several issues may be included in the same appeal. Usually, all issues on one VA decision will be included in the same appeal.

Notice of Disagreement (NOD)

A Notice of Disagreement is the first step in an appeal. It simply involves a written statement that you disagree with a decision that has been made. Certain things should be kept in mind when submitting a NOD:

Be specific about what you are disagreeing with. If a decision was made on 7 issues, specify the ones you are referring to- don't simply say you disagree with the decision.

Make sure that a decision has been made. For most decisions when benefits are reduced or terminated, we are required to propose it first; this is called a pre-determination notice. A NOD can only be accepted if a final decision has been made, not if a proposal has been made. If you don't receive paperwork describing the appeals process (a VA Form 4107), check your letter to see if it is a proposal.

Check the time limit. A NOD must be filed within one year of the date of the letter informing you of the decision. If you were notified of a decision in 1994, it is too late to file a NOD. Your option at that point is to file another claim, or request to reopen a claim, for the same condition as before.

Statement of the Case

A Statement of the Case is a summary of the evidence considered, actions taken, and decisions made, plus the laws governing the decision. A SOC must be done when a Notice of Disagreement is filed or when new evidence is received. Once the first SOC is done on an appeal, any ones done after that are Supplemental Statements of the Case (SSOC). An appeal may have several SSOC's.

Formal Appeal (VA Form 9 or equivalent)

An appeal must be formal before it can continue to higher levels. The standard form for formalizing (sometimes called perfecting) an appeal is the VA Form 9. This form must be received no later than one of these two dates:

one year from the date of the letter notifying you of the decision

60 days after the date of the Statement of the Case

Hearings (Optional)

Hearings are a chance for claimants to present evidence in person; they are totally optional. They are held at the regional office by a Hearing Officer (HO). If you have a hearing, the HO will review the evidence in conjunction with the testimony and make a decision on your case. If the issue is not resolved in your favor, the appeal will continue.

Board of Veterans' Appeals (BVA)

The Board of Veterans Appeals, located in Washington DC, is the highest appellate body in VA. Although most decisions are done in Washington, BVA does have travel boards that come to local offices. Travel boards have been limited the past couple of years, and Manchester would not expect more than one week of travel board hearings in a year. Due to a number of reasons, the pending workload at BVA has dramatically increased in the past few years. It is not unusual for an appeal to take 2 years or more from the initial NOD to the final BVA decision.

BVA looks at all of the evidence regarding the issue under appeal. If BVA decides that more information is needed to make a decision, it will issue a remand to the local office. BVA will not reconsider the case until its instructions in the remand are done. If the evidence is sufficient, BVA will issue a decision. This decision is the final VA one on the issue, and the appeal will have ended. However, a BVA decision can be reviewed by the Court of Veterans Appeals if an appeal to the court is filed within 120 days of the BVA decision.

United States Court of Appeals for Veterans' Claims (CAVC)

The United States Court of Appeals for Veterans' Claims (CAVC), located in Washington DC, was created in 1988 to review matters of law about VA benefits and decisions. CAVC is not part of VA; it is an appellate court in the US judicial system. CAVC will only consider decisions made by the Board of Veterans Appeals after 1988. As in most courts, one must have either an attorney or personal knowledge of legal proceedings in order to file the correct legal paperwork and conduct the appeal. CAVC decisions usually concern the procedural, legal issues involved in the "letter of the law". The deadline for filing an appeal to COVA is 120 days after the BVA decision (using the date of the letter to you informing you of the decision).

Communicating with the Veterans Service Center

COMMUNICATION IS NOT ONLY WHAT WE SAY, IT'S WHAT YOU THINK WE SAID.

If you get a letter from this office that is confusing, please let us know. We are truly interested in improving our communication. When doing so, provide the date of the letter in question.

Methods of contacting/communicating with VA/Veterans Service Center:

You can write us at:

**DEPARTMENT OF VETERANS AFFAIRS
Veterans Service Center**

In all correspondence to the VA please provide:

**The VA claim number
Veteran's social security number
Veteran's complete name**

Please be sure to keep them informed of address changes.

National Personnel Records Center

The National Personnel Records Center (NPRC), located in St. Louis, is the main center for a military person's records. NPRC has millions of records. Depending on the branch and years of service, we will make a request for records to NPRC. If medical records are available at NPRC, the originals will be sent to us. No copies are left at NPRC. Any individual can request their records from NPRC using a standard form (SF 180), which we can provide to you upon request. However, to reduce the substantial backlog at NPRC, duplicate requests from VA, individuals, and/or service organizations should not be made at the same time. If you receive notification from us that records could not be located, you may find it more efficient to deal with NPRC directly

Fire-related case

In July 1973, a fire broke out at NPRC. The majority of records for Army and Air Force veterans discharged before 1963 were destroyed. There are no alternate sources for personnel or other non-medical records. In the late 1980's, there were Surgeon General studies discovered that listed names of patients treated in Army hospitals during World War II and the Korean War. These records, usually containing only one line of information, can be requested if you were treated in an Army hospital during one of the wars. Unfortunately, there remains no alternate sources for the other burned records.

Reservists

If you are a reservist, you may want to request that your unit forward a copy of your medical records to this office. If you are filing a claim for a disability that occurred while you were on reserve duty, we also need a copy of the paperwork showing your duty status on the day you were injured. We frequently experience significant delays in receiving records from reserve units.

PTSD

PTSD cases often take several months to process. In order to establish a finding of PTSD, as opposed to other mental conditions, the event causing the stress disorder (the stressor) must be identified. Sometimes the stressor is apparent on the discharge document (for example, a Purple Heart). Often, we must request personnel and other records from the National Personnel Records Center. However, while personnel records will show units, job classifications, etc., they do not show events that happened. For those records, we must make an additional request to another records center for information they may have on particular events. This search is why we need as specific information as possible on the stressor form that we send (names, dates, units, etc.). The current backlog at this records center is several months. This time, added what it takes to get records from NPRC, is why PTSD cases take longer to pro.

S2/S3

DAILY STAFF JOURNAL OR DUTY OFFICER'S LOG

DAILY STAFF JOURNAL OR DUTY OFFICER'S LOG <small>(AR 220-346)</small>					PAGE NO.	NO. OF PAGES		
ORGANIZATION OR INSTALLATION S-2/S-3 4th Bn, 3d Inf AVDF-BARK			LOCATION IZ SAN JUAN BS635382		PERIOD COVERED			
					FROM		TO	
					HOUR	DATE	HOUR	DATE
					0001	19 Nov 69	2100	19 Nov 69
ITEM NO	TIME		INCIDENTS, MESSAGES, ORDERS, ETC.			ACTION TAKEN	INITIALS	
	IN	OUT						
39	1700		(U) Bn SITREP neg; loc same.			Bde, DO	JV	

IS FULL PROOF EVIDENCE. THOSE WILL FULLY SUBSTANTIATE YOUR CLAIM FOR VA DISABILITY COMPENSATION BENEFITS.

JOURNAL'S AND DUSTOFF REPORTS.

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