



**DEPARTMENT OF VETERANS AFFAIRS
VETERANS BENEFITS ADMINISTRATION
REGIONAL OFFICE**

[REDACTED]
VA File Number
[REDACTED]

Represented By:
[REDACTED]

Rating Decision
07/10/2020

INTRODUCTION

The records reflect that you are a veteran of the Gulf War Era and Peacetime. You served in the Navy from [REDACTED] and the Army from [REDACTED]. You filed an original disability claim that was received on January 28, 2020. Based on a review of the evidence listed below, we have made the following decisions on your claim.

DECISION

1. Service connection for tinnitus is granted with an evaluation of 10 percent effective August 30, 2019.
2. Service connection for degenerative arthritis, lumbar spine (claimed as low back condition) is denied.
3. Service connection for cubital tunnel syndrome, left upper extremity (also claimed as left elbow neuropathy) is denied.
4. Service connection for carpal tunnel syndrome, right upper extremity is denied.

5. Service connection for carpal tunnel syndrome, left upper extremity is denied.
6. Service connection for gastroesophageal reflux disease (GERD) is denied.
7. Service connection for bilateral hearing loss is denied.
8. Service connection for hypertension is denied.
9. Service connection for headaches is denied.
10. Service connection for anxiety is denied.
11. Service connection for left shoulder condition is denied.
12. Service connection for neck condition is denied.
13. Service connection for right shoulder condition is denied.

EVIDENCE

- VA Form 21-0966, Intent To File A Claim For Compensation and/or Pension, or Survivors Pension and/or DIC, received August 30, 2019
- VA Form 21-526 EZ: Application for Disability Compensation and Related Compensation Benefits, January 26, 2020
- VA Form 21-4138, Statement in Support of Claim, received January 28, 2018
- VA Form 21-4138, Statement in Support of Claim, spouse, received January 28, 2020
- VA Form 21-526 EZ: Application for Disability Compensation and Related Compensation Benefits, March 5, 2020
- Compensation Acknowledgement Letters dated January 29, 2020 and March 6, 2020
- Service Treatment Records, multiple periods of service (to include National Guard records), from [REDACTED]
- Military Personnel Records [REDACTED]
- Private Medical Records, [REDACTED]
- Private Medical Records, [REDACTED]
- Private Medical Records, [REDACTED]
- Private Medical Record (Letter), [REDACTED]
- Private Medical Record, [REDACTED]
- VA letter concerning your claim, dated April 8, 2020
- VA Form 27-0820 Report of General Information, dated April 21, 2020
- VA Examination, QTC MEDICAL SERVICES (CONTRACT), dated July 2, 2020
- VA Examination, AUDIO, QTC MEDICAL SERVICES (CONTRACT), dated July 3, 2020
- No pertinent VA Healthcare records from the VAMC available, dated July 10, 2020

REASONS FOR DECISION

1. Service connection for tinnitus.

Service connection for tinnitus has been established as directly related to military service. (38 CFR 3.303, 38 CFR 3.304)

The effective date of this grant is August 30, 2019. Service connection has been established from the day VA received your Intent to File. When a claim of service connection is received more than one year after discharge from active duty, the effective date is the date VA received the claim. (38 CFR 3.155, 38 CFR 3.400)

An evaluation of 10 percent is assigned from August 30, 2019.

We have assigned a 10 percent evaluation for your tinnitus based on:

- Recurrent tinnitus

A single evaluation for recurrent tinnitus is assigned whether the sound is perceived in one ear, both ears, or in the head.

This is the highest schedular evaluation allowed under the law for tinnitus. (38 CFR 4.87, DC 6260)

2. Service connection for degenerative arthritis, lumbar spine (claimed as low back condition).

Service connection may be granted for a disability which began in military service or was caused by some event or experience in service. (38 CFR 3.303)

Service connection for degenerative arthritis, lumbar spine (claimed as low back condition) is denied since this condition neither occurred in nor was caused by service. (38 CFR 3.303, 38 CFR 3.304)

The evidence does not show that your disease developed to a compensable degree within the specified time period after release from service to qualify for the presumption of service connection. (38 CFR 3.307, 38 CFR 3.309)

Your service treatment records do not contain complaints, treatment, or diagnosis for this condition.

You submitted a lay statement to support your claim. A credible lay statement may establish what was seen, heard, and directly experienced. The lay evidence was found not to be competent and sufficient in this case to establish a link or nexus between your medical condition and military service or to establish that such a link has been found by a medical professional. (38

CFR 4.6)

The VA medical opinion found no link between your diagnosed medical condition and military service.

Favorable Findings identified in this decision:

You have been diagnosed with a disability.

VA Examination notes a diagnosis of degenerative arthritis, lumbar spine.

3. Service connection for cubital tunnel syndrome, left upper extremity (also claimed as left elbow neuropathy).

Service connection may be granted for a disability which began in military service or was caused by some event or experience in service. (38 CFR 3.303)

Service connection for cubital tunnel syndrome, left upper extremity (also claimed as left elbow neuropathy) is denied since this condition neither occurred in nor was caused by service. (38 CFR 3.303, 38 CFR 3.304)

Your service treatment records do not contain complaints, treatment, or diagnosis for this condition.

The evidence does not show that your disease developed to a compensable degree within the specified time period after release from service to qualify for the presumption of service connection. (38 CFR 3.307, 38 CFR 3.309)

You submitted a lay statement to support your claim. A credible lay statement may establish what was seen, heard, and directly experienced. The lay evidence was found not to be competent and sufficient in this case to establish a diagnosis of your condition or to show that a diagnosis had been made by a medical professional. (38 CFR 4.6)

Favorable Findings identified in this decision:

You have been diagnosed with a disability.

Private medical records note a diagnosis of left elbow neuropathy.

4. Service connection for carpal tunnel syndrome, right upper extremity.

Service connection may be granted for a disability which began in military service or was caused by some event or experience in service. (38 CFR 3.303)

Service connection for carpal tunnel syndrome, right upper extremity is denied since this condition neither occurred in nor was caused by service. (38 CFR 3.303, 38 CFR 3.304)

Your service treatment records do not contain complaints, treatment, or diagnosis for this condition.

The evidence does not show that your disease developed to a compensable degree within the specified time period after release from service to qualify for the presumption of service connection. (38 CFR 3.307, 38 CFR 3.309)

You submitted a lay statement to support your claim. A credible lay statement may establish what was seen, heard, and directly experienced. The lay evidence was found not to be competent and sufficient in this case to establish a diagnosis of your condition or to show that a diagnosis had been made by a medical professional. (38 CFR 4.6)

Favorable Findings identified in this decision:

You have been diagnosed with a disability.

Private medical records note a diagnosis of tunnel syndrome, right upper extremity.

5. Service connection for carpal tunnel syndrome, left upper extremity.

Service connection may be granted for a disability which began in military service or was caused by some event or experience in service. (38 CFR 3.303)

Service connection for carpal tunnel syndrome, left upper extremity is denied since this condition neither occurred in nor was caused by service. (38 CFR 3.303, 38 CFR 3.304)

Your service treatment records do not contain complaints, treatment, or diagnosis for this condition.

The evidence does not show that your disease developed to a compensable degree within the specified time period after release from service to qualify for the presumption of service connection. (38 CFR 3.307, 38 CFR 3.309)

You submitted a lay statement to support your claim. A credible lay statement may establish what was seen, heard, and directly experienced. The lay evidence was found not to be competent and sufficient in this case to establish a diagnosis of your condition or to show that a diagnosis had been made by a medical professional. (38 CFR 4.6)

Favorable Findings identified in this decision:

You have been diagnosed with a disability.

Private medical records note a diagnosis of tunnel syndrome, left upper extremity.

6. Service connection for gastroesophageal reflux disease (GERD).

The evidence shows that gastroesophageal reflux disease (GERD) existed prior to service. There must be objective evidence of worsening of a pre-existing condition in order to establish service connection by aggravation. There is no evidence that the condition permanently worsened as a result of service. (38 CFR 3.303, 38 CFR 3.304, 38 CFR 3.306)

Favorable Findings identified in this decision:

The claimed issue existed prior to military service.

You have been diagnosed with a disability.

Report of Medical Examination dated October 13, 1982 (Army National Guard Service) notes "chest and abdominal discomfort x several months...felt to be secondary to peptic acid syndrome with reflux". Private medical records note a diagnosis of and treatment for gastroesophageal reflux disease GERD.

7. Service connection for bilateral hearing loss.

Service connection for bilateral hearing loss is denied. Service connection for the right ear is denied because there is no evidence that you currently have a hearing loss for VA purposes. Service connection for the left ear is denied because your hearing loss has not been linked to service. (38 CFR 3.303, 38 CFR 3.304, 38 CFR 3.385)

Service connection may not be established for disability due to impaired hearing unless the auditory threshold in any of the frequencies 500, 1000, 2000, 3000 or 4000 Hertz is 40 decibels or greater; or the auditory thresholds for at least three of the frequencies 500, 1000, 2000, 3000 or 4000 Hertz are 26 decibels or greater; or speech recognition scores using the Maryland CNC Test are less than 94 percent. (38 CFR 3.385)

There are no audiometric findings in your service treatment records that meet the above requirements.

Although hearing loss is not shown in-service, acoustic trauma or military noise exposure may constitute injury of the ear. However, in this case, acoustic trauma is not shown by the evidence of record.

Your VA examiner opined that it is less likely than not that your hearing loss is due to military noise exposure. Your examiner provided the following rationale: The Veteran's hearing loss is less likely than not caused by military service. The Veteran's audiograms while in the service did not reveal any significant threshold shifts or hearing loss..

VA examination findings show the left ear with 96 percent speech discrimination. Decibel (dB) loss at the puretone threshold of 500 Hertz (Hz) is 30, at 1000 Hz is 35, at 2000 Hz is 25, at 3000 Hz is 30, and at 4000 Hz is 35. The average decibel loss is 31 in the left ear. The right ear shows a speech discrimination of 100 percent. Your right ear Decibel (dB) loss at the puretone threshold of 500 Hertz (Hz) is 15, at 1000 Hz is 20, at 2000 Hz is 15, at 3000 Hz is 20, and at 4000 Hz is 20. The average decibel loss is 19 in the right ear.

In this case, the evidence of record does not show current audiometric findings which meet the criteria for a grant of service connection for hearing loss. As you do not currently meet the criteria for hearing loss in your right ear for VA purposes, service connection may not be granted. Although you currently have a hearing loss in your left ear for VA purposes, there is no medical link between your hearing loss and service. In the absence of such a link, service connection may not be granted. In addition, there is no evidence that disabling sensorineural hearing loss manifested itself to a compensable degree within a year of service. (38 CFR 3.303, 38 CFR 3.304, 38 CFR 3.307, 38 CFR 3.309(a), 38 CFR 3.385)

You submitted a lay statement to support your claim. A credible lay statement may establish what was seen, heard, and directly experienced. The lay evidence was found not to be competent and sufficient in this case to establish a link or nexus between your medical condition and military service or to establish that such a link has been found by a medical professional. (38 CFR 4.6)

Favorable Findings identified in this decision:

The evidence shows that a qualifying event, injury, or disease had its onset during your service.

Your MOS was signalman which has a moderate probability of noise exposure.

8. Service connection for hypertension.

Service connection may be granted for a disability which began in military service or was caused by some event or experience in service. (38 CFR 3.303)

Service connection for hypertension is denied since this condition neither occurred in nor was caused by service. (38 CFR 3.303, 38 CFR 3.304)

Your service treatment records do not contain complaints, treatment, or diagnosis for this condition.

The evidence does not show that your disease developed to a compensable degree within the specified time period after release from service to qualify for the presumption of service connection. (38 CFR 3.307, 38 CFR 3.309)

You submitted a lay statement to support your claim. A credible lay statement may establish what was seen, heard, and directly experienced. The lay evidence was found not to be competent

and sufficient in this case to establish a diagnosis of your condition or to show that a diagnosis had been made by a medical professional. (38 CFR 4.6)

Favorable Findings identified in this decision:

You have been diagnosed with a disability.

Private medical records note a diagnosis of and treatment for hypertension.

9. Service connection for headaches.

Service connection may be granted for a disability which began in military service or was caused by some event or experience in service. (38 CFR 3.303)

Service connection for headaches is denied since there is no evidence the claimed condition exists. (38 CFR 3.303, 38 CFR 3.304)

Your service treatment records do not contain complaints, treatment, or diagnosis for this condition.

You submitted a lay statement to support your claim. A credible lay statement may establish what was seen, heard, and directly experienced. The lay evidence was found not to be competent and sufficient in this case to establish a diagnosis of your condition or to show that a diagnosis had been made by a medical professional. (38 CFR 4.6)

Favorable Findings identified in this decision:

NONE

10. Service connection for anxiety.

Service connection may be granted for a disability which began in military service or was caused by some event or experience in service. (38 CFR 3.303)

Service connection for anxiety is denied since this condition neither occurred in nor was caused by service. (38 CFR 3.303, 38 CFR 3.304)

Your service treatment records do not contain complaints, treatment, or diagnosis for this condition.

You submitted a lay statement to support your claim. A credible lay statement may establish what was seen, heard, and directly experienced. The lay evidence was found not to be competent and sufficient in this case to establish a diagnosis of your condition or to show that a diagnosis had been made by a medical professional. (38 CFR 4.6)

Favorable Findings identified in this decision:

You have been diagnosed with a disability.

Private medical records note a diagnosis of and treatment for anxiety.

11. Service connection for left shoulder condition.

Service connection may be granted for a disability which began in military service or was caused by some event or experience in service. (38 CFR 3.303)

Service connection for left shoulder condition is denied since there is no evidence the claimed condition exists. (38 CFR 3.303, 38 CFR 3.304)

Your service treatment records do not contain complaints, treatment, or diagnosis for this condition.

You submitted a lay statement to support your claim. A credible lay statement may establish what was seen, heard, and directly experienced. The lay evidence was found not to be competent and sufficient in this case to establish a diagnosis of your condition or to show that a diagnosis had been made by a medical professional. (38 CFR 4.6)

Favorable Findings identified in this decision:

Private medical records note "musculoskeletal disorder involving upper trapezius muscle".

12. Service connection for neck condition.

Service connection may be granted for a disability which began in military service or was caused by some event or experience in service. (38 CFR 3.303)

Service connection for neck condition is denied since there is no evidence the claimed condition exists. (38 CFR 3.303, 38 CFR 3.304)

Your service treatment records do not contain complaints, treatment, or diagnosis for this condition.

You submitted a lay statement to support your claim. A credible lay statement may establish what was seen, heard, and directly experienced. The lay evidence was found not to be competent and sufficient in this case to establish a diagnosis of your condition or to show that a diagnosis had been made by a medical professional. (38 CFR 4.6)

Favorable Findings identified in this decision:

NONE

13. Service connection for right shoulder condition.

Service connection may be granted for a disability which began in military service or was caused by some event or experience in service. (38 CFR 3.303)

Service connection for right shoulder condition is denied since there is no evidence the claimed condition exists. (38 CFR 3.303, 38 CFR 3.304)

Your service treatment records do not contain complaints, treatment, or diagnosis for this condition.

You submitted a lay statement to support your claim. A credible lay statement may establish what was seen, heard, and directly experienced. The lay evidence was found not to be competent and sufficient in this case to establish a diagnosis of your condition or to show that a diagnosis had been made by a medical professional. (38 CFR 4.6)

Favorable Findings identified in this decision:

Private medical records note "musculoskeletal disorder involving upper trapezius muscle".

REFERENCES:

Title 38 of the Code of Federal Regulations, Pensions, Bonuses and Veterans' Relief contains the regulations of the Department of Veterans Affairs which govern entitlement to all veteran benefits. For additional information regarding applicable laws and regulations, please consult your local library, or visit us at our website, www.va.gov.