

DEPARTMENT OF VETERANS AFFAIRS Veterans Benefits Administration Regional Office

VA File Number

Represented By: AMVETS Rating Decision 02/20/2018

INTRODUCTION

The records reflect that you are a veteran of the Gulf War Era.

You filed a new claim for benefits that was received on August 9, 2017. Based on a review of the evidence listed below, we have made the following decision(s) on your claim.

DECISION

- 1. Service connection for plantar fasciitis left foot (also claimed as flat foot, left, secondary to residuals, right knee strain) with left calcaneal spur is granted with an evaluation of 20 percent effective August 9, 2017.
- 2. Evaluation of posttraumatic stress disorder, to include insomnia, with adjustment disorder unspecified, (also claimed as adjustment disorder), which is currently 70 percent disabling, is continued.
- 3. Evaluation of post-concussive headaches, which is currently 30 percent disabling, is continued.

EVIDENCE

 DD Form 214, Certificate of Release or Discharge from Active Duty, from May 30, 2007 through October 26, 2012

Prior Rating Decision, Dated October 16, 2017

 VA Form 21-526 EZ: Application for Disability Compensation and Related Compensation Benefits, October 30, 2017

• VA Form 21-4138, Statement in Support of Claim, received August 9, 2017

VA Form 21-4138, Statement in Support of Claim, received September 18, 2017

- VAMC (Veterans Affairs Medical Center) treatment records, San Antonio, from October 19, 2017 through January 30, 2018
- Foot Conditions, including Flatfoot (Pes Planus) Disability Benefits Questionnaire, dated December 20, 2017
- Lay Statement in support of Claimed Condition, Dated September 5, 2012

Lay Statement in support of Claimed Condition, Dated December 1, 2017

- Headaches (including Migraine Headaches) Disability Benefits Questionnaire, dated January 26, 2018
- Review Post Traumatic Stress Disorder (PTSD) Disability Benefits Questionnaire, dated January 26, 2018
- Initial Evaluation of Residuals of Traumatic Brain Injury (I-TBI) Disability Benefits Questionnaire, dated January 26, 2018

REASONS FOR DECISION

1. Service connection for plantar fasciitis left foot (also claimed as flat foot, left, secondary to residuals, right knee strain) with left calcaneal spur.

Service connection for plantar fasciitis left foot (also claimed as flat foot, left, secondary to residuals, right knee strain) with left calcaneal spur has been established as directly related to military service.

The effective date of this grant is August 9, 2017. Service connection has been established from the day VA received your claim. 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.

An evaluation of 20 percent is assigned from August 9, 2017.

We have assigned a 20 percent evaluation for your plantar fasciitis left foot (also claimed as flat foot, left, secondary to residuals, right knee strain) based on:

· Pain on manipulation of the feet, accentuated

· Pain on use of the feet, accentuated

Additional symptom(s) include:

- · Pain on manipulation of the feet
- Pain on use of the feet

A higher evaluation of 30 percent is not warranted for acquired flat foot unless the evidence shows:

• Unilateral involvement with pronounced symptoms; marked pronation, extreme tenderness of plantar surfaces of the feet, marked inward displacement and severe spasm of the tendo achillis on manipulation, not improved by orthopedic shoes or appliances; or,

• Bilateral involvement with severe symptoms; objective evidence of marked deformity (pronation, abduction, etc.), pain on manipulation and use accentuated, indication of swelling on

use, characteristic callosities.

2. Evaluation of posttraumatic stress disorder, to include insomnia, with adjustment disorder unspecified, (also claimed as adjustment disorder) currently evaluated as 70 percent disabling.

The evaluation of posttraumatic stress disorder, to include insomnia, with adjustment disorder unspecified, (also claimed as adjustment disorder) is continued as 70 percent disabling.

We have assigned a 70 percent evaluation for your posttraumatic stress disorder, to include insomnia, also claimed as adjustment disorder based on:

Forgetting names

- Occupational and social impairment, with deficiencies in most areas, such as work, school, family relations, judgment, thinking, or mood
- Suspiciousness
- Depressed mood
- Suicidal ideation
- Near-continuous depression affecting the ability to function independently, appropriately and effectively
- Disturbances of motivation and mood
- Impaired judgment
- · Retention of only highly learned material
- Mild memory loss
- Forgetting recent events
- Chronic sleep impairment
- Forgetting to complete tasks
- Near-continuous panic affecting the ability to function independently, appropriately and effectively
- · Panic attacks more than once a week
- Obsessional rituals which interfere with routine activities
- Difficulty in adapting to stressful circumstances
- Difficulty in adapting to work
- Impairment of short- and long-term memory
- · Flattened affect
- · Difficulty in adapting to a worklike setting
- Anxiety
- Difficulty in establishing and maintaining effective work and social relationships
- Forgetting directions

The overall evidentiary record shows that the severity of your disability most closely approximates the criteria for a 70 percent disability evaluation.

A higher evaluation of 100 percent is not warranted for posttraumatic stress disorder unless the evidence shows total occupational and social impairment, due to such symptoms as:

• gross impairment in thought processes 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.

Since there is a likelihood of improvement, the assigned evaluation is not considered permanent and is subject to a future review examination.

3. Evaluation of post-concussive headaches currently evaluated as 30 percent disabling.

The evaluation of post-concussive headaches is continued as 30 percent disabling.

We have assigned a 30 percent evaluation for your post-concussive headaches based on:
• Characteristic prostrating attacks occurring on an average once a month over last several

• Characteristic prostrating attacks occurring on an average once a month over last several months

A higher evaluation of 50 percent is not warranted for migraine unless the evidence shows very frequent completely prostrating and prolonged attacks productive of severe economic inadaptability.

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.