



## 6.6. Medical Opinion Disability Benefits Questionnaire

# MEDICAL OPINION (to be completed by the examiner)

Name of patient/Veteran: \_\_\_\_\_ SSN: \_\_\_\_\_

**Your patient is applying to the U. S. Department of Veterans Affairs (VA) for disability benefits. VA will consider the information you provide on this questionnaire as part of their evaluation in processing the Veteran's claim.**

### **1. Definitions**

Aggravation of preexisting nonservice-connected disabilities. A preexisting injury or disease will be considered to have been aggravated by active military, naval, or air service, where there is an increase in disability during such service, unless there is a specific finding that the increase in disability is due to the natural progress of the disease.

Aggravation of nonservice-connected disabilities. Any increase in severity of a nonservice-connected disease or injury that is proximately due to or the result of a service-connected disease or injury, and not due to the natural progress of the nonservice-connected disease, will be service connected.

### **2. Evidence review**

Was the Veteran's VA claims file reviewed?

Yes  No

If yes, list any records that were reviewed but were not included in the Veteran's VA claims file:

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If no, check all records reviewed:

- Military service treatment records
- Military service personnel records
- Military enlistment examination
- Military separation examination
- Military post-deployment questionnaire
- Department of Defense Form 214 Separation Documents
- Veterans Health Administration medical records (VA treatment records)
- Civilian medical records
- Interviews with collateral witnesses (family and others who have known the veteran before and after military service)
- No records were reviewed
- Other: \_\_\_\_\_

Complete only the sections below that you are asked to complete in the Medical Opinion DBQ request.

### **3 Medical opinion for direct service connection**

Choose the statement that most closely approximates the etiology of the claimed condition.

- a.  The claimed condition was at least as likely as not (50 percent or greater probability) incurred in or caused by the claimed in-service injury, event, or illness. Provide rationale in section c.
- b.  The claimed condition was less likely than not (less than 50 percent probability) incurred in or caused by the claimed in-service injury, event, or illness. Provide rationale in section c.

c. Rationale:

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**4 Medical opinion for secondary service connection**

a.  The claimed condition is at least as likely as not (50 percent or greater probability) proximately due to or the result of the Veteran's service connected condition. Provide rationale in section c.

b.  The claimed condition is less likely than not (less than 50 percent probability) proximately due to or the result of the Veteran's service connected condition. Provide rationale in section c.

c. Rationale:

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**5. Medical opinion for aggravation of a condition that existed prior to service**

a.  The claimed condition, which clearly and unmistakably existed prior to service, was aggravated beyond its natural progression by an in-service injury, event, or illness. Provide rationale in section c.

b.  The claimed condition, which clearly and unmistakably existed prior to service, was clearly and unmistakably not aggravated beyond its natural progression by an in-service injury, event, or illness. Provide rationale in section c.

c. Rationale:

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**6. Medical opinion for aggravation of a nonservice connected condition by a service connected condition**

a. Can you determine a baseline level of severity of (claimed condition/diagnosis) based upon medical evidence available prior to aggravation or the earliest medical evidence following aggravation by (service connected condition)?

Yes  No

If "Yes" to question 6a, answer the following:

i. Describe the baseline level of severity of (claimed condition/diagnosis) based upon medical evidence available prior to aggravation or the earliest medical evidence following aggravation by (service connected condition):

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ii. Provide the date and nature of the medical evidence used to provide the baseline: \_\_\_\_\_

iii. Is the current severity of the (claimed condition/diagnosis) greater than the baseline?

Yes  No

If yes, was the Veteran's (claimed condition/diagnosis) at least as likely as not aggravated beyond its natural progression by (insert "service connected condition")?

Yes (provide rationale in section b.)

No (provide rationale in section b.)

If "No" to question 6a, answer the following:

- i. Provide rationale as to why a baseline cannot be established (e.g. medical evidence is not sufficient to support a determination of a baseline level of severity): \_\_\_\_\_
- ii. Regardless of an established baseline, was the Veteran's (claimed condition/diagnosis) at least as likely as not aggravated beyond its natural progression by (insert "service connected condition")?
  - Yes (provide rationale in section b.)
  - No (provide rationale in section b.)

b. Provide rationale:

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**7. Opinion regarding conflicting medical evidence**

I have reviewed the conflicting medical evidence and am providing the following opinion:

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Physician signature: \_\_\_\_\_ Date: \_\_\_\_\_

Physician printed name: \_\_\_\_\_ Phone: \_\_\_\_\_

Medical license #: \_\_\_\_\_ Physician address: \_\_\_\_\_

**NOTE:** VA may request additional medical information, including additional examinations if necessary to complete VA's review of the Veteran's application.