

# BOOTS 2 BENEFITS OPERATION FUBAR

## THE FUBAR FIX

COMPANION WORKBOOK



Your Step-by-Step  
Tactical Battle Plan

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## **DISCLAIMER**

### *Scope of this Workbook*

This workbook exists to turn chaos into clarity—so you don't fight this battle alone. It's free because too many veterans quit in the gap between "I should file" and "I know exactly what to do." I won't let that be the reason you miss benefits you earned.

#### **Why this matters**

- The VA speaks in forms, rules, and evidence.
- You speak in memories, injuries, and service.
- This book is the bridge: plain-English steps, checklists, and scripts that "spoon-feed" your proof so nothing gets missed.

#### **Why it's free**

- Access should never be behind a paywall.
- Not everyone can afford help at the start.
- If this gets you moving—great. If you want coaching, I'm here, but you don't owe me a dime to begin.
- This is for you, thank you for your service.

#### **How to use it**

1. Start with your Ailments & Conditions Tracker.
2. Request your DD214 and C-File (if you don't have a copy).
3. Build one evidence packet at a time.
4. Practice your C&P script (work, home, relationships).
5. Humble yourself, be honest, especially about your worst days.
6. If you need support, ask—IGY6.2 (I got your six, too!).

**My promise** - You get direct, veteran-smart guidance. No fluff, no false guarantees—just the mission plan and the nudge to keep going. You earned these benefits with your service. Let's get you the benefits you already earned.



# FUBAR FIX

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## *Workbook*

Companion to *Operation FUBAR*  
From Chaos to Clarity, One Claim at a Time





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# Check Your Gear

## CHAPTER 1

### *Are you ready to file?*

**Bottom Line Up Front (BLUF):** If you served in the military, you can file a VA disability claim. It doesn't matter how long it's been since separation, and it doesn't need to appear in STRs if we can connect the dots.

**How to use this section:** If you served in the military, you can file a VA disability claim; it doesn't matter how long it's been since separation. This team can connect the dots—then work through each prompt honestly to capture your fears, assumptions, and questions about filing. Don't worry about “right” answers; just get your thoughts on paper and mark anything that hits a nerve with a star or underline. By the time you finish, you should be clearer on why you're filing.

**Scan your situation:** Physical ailments, mental health, and service connection (direct, secondary, presumptive).

**Talk to fellow veterans:** Research, and book your 30-minute free consultation with Sarge.

**Create a Pros & Cons list:** This process can be emotionally taxing—plan support and boundaries.

**Know the upside:** At 50%, dependents may qualify for certain benefits; at 100% P&T you may receive full medical/dental, children's education benefits, and student loan forgiveness (program dependent).

**Consider timing and impact:** How will filing affect your mental well-being, physical health, work, and family rhythm?

**Consider financial/quality of life outcomes:** VA Healthcare, monthly compensation, and potential state benefits like property tax relief.



# Pros & Cons Worksheet

Pros	Cons

## DECISION & NEXT STEPS

### READINESS CHECK (TICK WHAT'S TRUE)

- ☐ I can handle the emotional lift (have support).
- ☐ I've listed top 3 conditions to file now.
- ☐ I can gather civilian records or authorize VA to do it.
- ☐ I'm willing to be brutally honest about worst days.
- ☐ I understand the wait time and will stick to a plan.





# Pros & Cons

## QUICK BENEFITS SNAPSHOT

### MOTIVATION

- At 50%: dependents may get certain benefits/ID access.
- At 100% P&T: full VA medical/dental; kids' education benefits; student loan forgiveness (program-dependent); many states offer property-tax relief.

### RISKS & MITIGATIONS

- Triggering symptoms → Plan: \_\_\_\_ (clinician, peer, coping).
- Records gaps → Plan: buddy letters, unit logs, request C-File.
- Overwhelm → Plan: one packet/week, 30-min SITREP.

### PRIORITY FLAGS (CHECK IF APPLICABLE)

- ☐ Terminal Illness
- ☐ Homeless/at risk
- ☐ Age 85+
- ☐ Severe hardship

**NOTE:** *If yes, include documentation and request priority processing.*

### EVIDENCE GAPS (FILL IN)

1. \_\_\_\_\_ (source/page?)
2. \_\_\_\_\_ (source/page?)
3. \_\_\_\_\_ (source/page?)
4. \_\_\_\_\_ (source/page?)
5. \_\_\_\_\_ (source/page?)
6. \_\_\_\_\_ (source/page?)



# Pros & Cons

## QUICK BENEFITS

### SNAPSHOT

#### DECISION: (CHECK)

- ☐ Go
- ☐ Hold

Target file date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Intent to file date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

#### YOUR SUPPORT ROSTER: YOUR BOOTS ON THE GROUND TEAM

\* SARGE: [sarge@boots2benefits.com](mailto:sarge@boots2benefits.com) PHONE: 443-924-6809

1. Clinician: \_\_\_\_\_ Phone: \_\_\_\_\_
2. Clinician: \_\_\_\_\_ Phone: \_\_\_\_\_
3. Clinician: \_\_\_\_\_ Phone: \_\_\_\_\_
4. VSO: \_\_\_\_\_ Phone: \_\_\_\_\_
5. Peer/Battle Buddy: \_\_\_\_\_ Check-in: \_\_\_\_\_
6. Peer/Battle Buddy: \_\_\_\_\_ Check-in: \_\_\_\_\_
7. Family/Partner: \_\_\_\_\_ Role: \_\_\_\_\_

#### CONSULTATION (OPTIONAL)

Book Your 30-Min Consult (optional)

date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Time: \_\_\_\_\_

Method: Phone/Video

Notes for Sarge: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

BLUF: IF YOU CAN CHECK MOST READINESS BOXES AND HAVE A PLAN FOR GAPS, IT'S TIME TO GO FROM CHAOS TO CLARITY—ONE CLAIM AT A TIME.

[illegible]





# First Priorities

## CHAPTER 2

### *Accounts, Records & Intent to File*

#### **BLUF (Bottom Line Up Front):**

Your first priority is to get your accounts, records, and Intent to File in place. Once your VA.gov account is set up, your medical records are requested, and your Intent to File is submitted, your effective date is protected and the clock is working for you, not against you.

#### **Timeline:**

You have one (1) year from your Intent to File date to complete the claim.

#### **How to Use This Section:**

Work through this section in order, using each worksheet as a checklist and parking lot. Start by listing and organizing your key logins (VA.gov, My HealtheVet, premium ID, secure email), then track every records request you've made or still need to make, including VA, DoD, and civilian providers. When you get to the Intent to File portion, follow the prompts to decide which path you're taking (online, phone, or paper), record the date and confirmation, and note any questions or hiccups you hit along the way. Don't stress about having everything perfect—use the blanks to note what's missing, star anything you need help with later, and keep this section as your “mission control” for accounts, records, and protecting your start date.



# First Priorities

## VA.GOV & AILMENT TRACKER

1. Create/verify your VA.GOV account works *and* you have the user name and password.

Username: \_\_\_\_\_ (Do not share/confidential)

Email used: \_\_\_\_\_ (Do not share/confidential)

Password: \_\_\_\_\_ (Do not share/confidential)

2. Locate your DD214. If missing, request it. If incorrect, initiate corrections.
3. Begin your Ailments & Conditions Tracker (Excel template provided).
4. Submit an Intent to File (locks in your effective date).
5. Gather Service Treatment Records and VA medical records.
6. List your civilian doctors and start requesting records.

### Ailments & Conditions Tracker

Doctor/Practice Name	Injury/Ailment	Treatment Date(s)	Nexus Ltr Yes/No

**Tip:** Use the downloadable Excel file to track up to 100 entries with a Yes/No dropdown for Nexus Letters.

**Get it here:** <https://boots2benefits.com/templates-%26-samples>



# Medical Records

## ACTIVE DUTY, VA, AND CIVILIAN RECORDS

Ailment Name: \_\_\_\_\_ Primary Dr. \_\_\_\_\_

What do you have/what do you need to request?

<input type="checkbox"/>	Active Duty Medical	<input type="checkbox"/>	Rehabilitation Center
<input type="checkbox"/>	Veterans Ad Records	<input type="checkbox"/>	Physical Therapy, Chiropractor
<input type="checkbox"/>	Civilian Doctor	<input type="checkbox"/>	Urgent Care/Minute Clinic
<input type="checkbox"/>	ER Room/Hospital	<input type="checkbox"/>	Test Results (X-rays, MRI, Scans)

Ailment Name: \_\_\_\_\_ Primary Dr. \_\_\_\_\_

What do you have/what do you need to request?

<input type="checkbox"/>	Active Duty Medical	<input type="checkbox"/>	Rehabilitation Center
<input type="checkbox"/>	Veterans Ad Records	<input type="checkbox"/>	Physical Therapy, Chiropractor
<input type="checkbox"/>	Civilian Doctor	<input type="checkbox"/>	Urgent Care/Minute Clinic
<input type="checkbox"/>	ER Room/Hospital	<input type="checkbox"/>	Test Results (X-rays, MRI, Scans)





# Medical Records

Ailment Name: \_\_\_\_\_ Primary Dr. \_\_\_\_\_

What do you have/what do you need to request?

<input type="checkbox"/>	Active Duty Medical	<input type="checkbox"/>	Rehabilitation Center
<input type="checkbox"/>	Veterans Ad Records	<input type="checkbox"/>	Physical Therapy, Chiropractor
<input type="checkbox"/>	Civilian Doctor	<input type="checkbox"/>	Urgent Care/Minute Clinic
<input type="checkbox"/>	ER Room/Hospital	<input type="checkbox"/>	Test Results (X-rays, MRI, Scans)

Ailment Name: \_\_\_\_\_ Primary Dr. \_\_\_\_\_

What do you have/what do you need to request?

<input type="checkbox"/>	Active Duty Medical	<input type="checkbox"/>	Rehabilitation Center
<input type="checkbox"/>	Veterans Ad Records	<input type="checkbox"/>	Physical Therapy, Chiropractor
<input type="checkbox"/>	Civilian Doctor	<input type="checkbox"/>	Urgent Care/Minute Clinic
<input type="checkbox"/>	ER Room/Hospital	<input type="checkbox"/>	Test Results (X-rays, MRI, Scans)



# Presumptive Conditions

Presumptive Condition: \_\_\_\_\_

Primary Dr. \_\_\_\_\_

Ailment Name: \_\_\_\_\_

What do you have/what do you need to request?

<input type="checkbox"/>	TERA (Toxic Exposure Risk Assess)	<input type="checkbox"/>	PACT Act Eligibility
<input type="checkbox"/>	Active Duty Medical	<input type="checkbox"/>	Rehabilitation Center
<input type="checkbox"/>	Veterans Ad Records	<input type="checkbox"/>	Physical Therapy, Chiropractor
<input type="checkbox"/>	Civilian Doctor	<input type="checkbox"/>	Urgent Care/Minute Clinic
<input type="checkbox"/>	ER Room/Hospital	<input type="checkbox"/>	Test Results (X-rays, MRI, Scans)

Presumptive Condition: \_\_\_\_\_

Primary Dr. \_\_\_\_\_

Ailment Name: \_\_\_\_\_

What do you have/what do you need to request?

<input type="checkbox"/>	TERA (Toxic Exposure Risk Assess)	<input type="checkbox"/>	PACT Act Eligibility
<input type="checkbox"/>	Active Duty Medical	<input type="checkbox"/>	Rehabilitation Center
<input type="checkbox"/>	Veterans Ad Records	<input type="checkbox"/>	Physical Therapy, Chiropractor
<input type="checkbox"/>	Civilian Doctor	<input type="checkbox"/>	Urgent Care/Minute Clinic
<input type="checkbox"/>	ER Room/Hospital	<input type="checkbox"/>	Test Results (X-rays, MRI, Scans)



# Secondary Conditions

Service Connected Condition: \_\_\_\_\_

Primary Dr. \_\_\_\_\_

Ailment Name: \_\_\_\_\_

What do you have/what do you need to request?

<input type="checkbox"/>	TERA (Toxic Exposure Risk Assess)	<input type="checkbox"/>	PACT Act Eligibility
<input type="checkbox"/>	Active Duty Medical	<input type="checkbox"/>	Rehabilitation Center
<input type="checkbox"/>	Veterans Ad Records	<input type="checkbox"/>	Physical Therapy, Chiropractor
<input type="checkbox"/>	Civilian Doctor	<input type="checkbox"/>	Urgent Care/Minute Clinic
<input type="checkbox"/>	ER Room/Hospital	<input type="checkbox"/>	Test Results (X-rays, MRI, Scans)

Service Connected Condition: \_\_\_\_\_

Primary Dr. \_\_\_\_\_

Ailment Name: \_\_\_\_\_

What do you have/what do you need to request?

<input type="checkbox"/>	TERA (Toxic Exposure Risk Assess)	<input type="checkbox"/>	PACT Act Eligibility
<input type="checkbox"/>	Active Duty Medical	<input type="checkbox"/>	Rehabilitation Center
<input type="checkbox"/>	Veterans Ad Records	<input type="checkbox"/>	Physical Therapy, Chiropractor
<input type="checkbox"/>	Civilian Doctor	<input type="checkbox"/>	Urgent Care/Minute Clinic
<input type="checkbox"/>	ER Room/Hospital	<input type="checkbox"/>	Test Results (X-rays, MRI, Scans)





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# Who is Going to File?

## CHAPTER 3

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### *Who is using your voice at the VA?*

#### **BLUF (Bottom Line Up Front):**

The VA only hears one voice per veteran - either yours or someone speaking on your behalf. So you need to be crystal clear on who is filing, what authority they have, and whether they actually understand your story, your conditions, and your goals.

#### **How to Use this Section:**

Use this section to decide who is officially carrying your voice into the VA system and to sanity-check whether that setup is working for you. You'll identify whether you're filing on your own, using a VSO, attorney, claims agent, or trusted family member, and note what paperwork (POA, 21-22, 21-22a, etc.) is already in place or still needed.

If you do not file for yourself, please do yourself a favor. As you work through the prompts, be honest about how well much you trust your representative. This person listens, explains things, and keeps you informed, and mark any red flags with a star. By the end of the chapter, you should know exactly who is authorized to speak for you, how to reach them, and whether you need to keep them, fire them, or adjust the plan before you move deeper into the claim.



# Who is Going to File?

## CHAPTER 3

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**Your Options, Your Decision:** Nobody takes care of you like you do. But if this feels too big, you've got options—and you can always switch later.

### **The Reality Check**

Here's what you need to understand: If you pick someone else to represent you, you will sign a Power of Attorney document. That person then speaks to the VA on your behalf—and whatever is said, the VA believes it is YOU saying it.

### **Let that sink in for a minute.**

Your claim is personal. Your story is yours. Your symptoms, your struggles, your service—that's YOUR narrative. When you hand that over to someone else, you're *trusting* them to tell your story the way YOU would tell it. And not everyone will.

- **Option 1:** Do It Yourself - Complete breakdown of pros/cons and what it means (Boots 2 Benefits can coach you through this option so you are in control.)
- **Option 2:** Veteran Service Officer (VSO) - Expanded with the hard truth about limited control and workload
- **Option 3:** Attorney - Typically the most expensive option with the 'benefit' to let the claim take longer to process.



# Who is Going to File?

## YOU - THE VETERAN

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1. Steep learning curve, e.g. 38CFR, etc.
2. Time-intensive
3. Can be emotionally challenging



1. YOU control the timeline
2. You know the details of your ailments and injuries
3. You are invested in the outcome so you'll try
4. No one takes a percentage of your backpay





# Who is Going to File?

## VETERAN SERVICE OFFICER

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1. May not know you personally
2. May lack urgency to get it done 'now'
3. Workload of VSOs varies depending on the organization
4. Does the VSO stay current on all updates at the VA?



1. Free service - it is illegal for someone to charge you to submit your claim!
2. Trained
3. Experienced in the VA process



# Who is Going to File?

## ATTORNEY

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1. Charges 20-33% Backpay
2. Incentive to let claims 'wait' for bigger payout
3. Expensive



1. Highly Experienced
2. Professional Representation
3. Handles appeals
4. Best for complex cases



# Who is Going to File?

## **YOUR CHOICE**

### **The Real Talk**

Here's the thing about hiring an attorney: They make money based on a percentage of your back pay. So if your claim sits on their desk for 6 months instead of 3 months, they make more money. Your back pay gets larger, and they get a bigger cut. And there are attorneys that aren't this way. I'm just asking you to think about that incentive structure. Is your attorney motivated to move your claim quickly, or to let it sit and accumulate back pay?

### **Example:**

- Claim approved in 6 months: \$12,000 back pay × 33% = \$3,960 for attorney
- Claim approved in 12 months: \$24,000 back pay × 33% = \$7,920 for attorney
- Who benefits from the delay?
- Best For: Complex cases, appeals, or when you've already been denied and need professional firepower.

### **The Bottom Line**

Nobody takes care of you like you do. That's not cynicism—that's reality. You know your body. You know your service. You know what you've sacrificed. You know what you need. When you hand that over to someone else, you're trusting them to advocate for you with the same passion and urgency that you would. And sometimes, they do but sometimes, they don't.

### **So ask yourself:**

- Do I want to stay in control of my narrative?
- Do I have time to learn the system?
- Can I handle the emotional weight of this process?
- Do I trust someone else to tell my story?

**Your answers will guide you to the right choice.**



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# You are Your Own Warrior

## CHAPTER 4

### *Embrace the Suck!*

#### **BLUF (Bottom Line Up Front):**

This part of the mission is going to suck—and you’re going to do it anyway. The memories, paperwork, and waiting may be painful, but facing them on your terms is how you take your power back from the VA, from your past, and from anyone who told you to just “suck it up and drive on.”

#### **How to Use this Section:**

Use this section to name, *not hide*, and find the difficult parts of this process that you will overcome. As you work each page, write down the frustrations, fears, grief, anger, and “this isn’t fair” moments that come up, instead of shoving them back in the ruck.

Mark anything that really stings with a star so you know it deserves extra care or backup later. You’re not trying to be tough here; you’re documenting what this fight actually costs you so that when the system wears you down, you - can lean on your support team for extra endurance. Your whole team, all of the boots on the ground can see why you’re tired yet why you’re still in the fight.



# You are Your Own Warrior

## EMBRACE THE SUCK!

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**New Language:** You're learning a new language—VA-speak. And you're going to become fluent. These benefits are not “given,” you have already earned them with your service to your country.

In VFW speak, “Make them honor the contract” which means that the American government is obligated to take care of you from your service connected ailments and injuries.

### The Reality

1. This is an adventure. The VA has rules, regulations, and processes that seem simple but often aren't explained clearly. That's where we come in. We're your boots on the ground. We're your team.
2. Learn to Speak VA: 38 CFR
3. What is 38 CFR? It's the Code of Federal Regulations for the VA. It tells you EXACTLY what symptoms equal what disability rating.
4. The *Standard of Proof* for your ailment is “more likely than not” (51%) it is connected to your military service. Let's play connect the dots!

### Your Homework:

1. Find 38 CFR sections related to your ailments - <https://www.ecfr.gov/current/title-38/chapter-I/part-4>
2. Match your symptoms to the regulation
3. Know the foundation of your claim - regardless of who files for you.



# Embrace the Suck & Kick Ass

## WHAT DOES IT MEAN?

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### 1. What "Embrace the Suck" Really Means

- It's not about enjoying the pain—it's about accepting reality and moving forward anyway.
- You can't control the VA's timeline, but you CAN control your preparation.
- The process will be frustrating. The paperwork will be overwhelming. The wait will be agonizing. That's the suck. Now embrace it.

### 2. You are battled tested, remember you've embraced the suck before:

- Basic training when you thought you couldn't go another mile or do another push-up while facing downward on a hill!
- Deployments separated you from everything you loved. You survived. You know what matters now.
- Field conditions that would make civilians tap out? You pushed through those monsoon rains and sand storms!
- Orders you didn't agree with but executed anyway.
- Your body screamed at you to quit. Your mind wanted to give up. You didn't, the warrior you in reused to quit.
- Emotional weight you carried alone because you wouldn't wish those memories on your worst enemy.

### 3. The VA Process IS Designed to Be Confusing

- It's not a conspiracy—it's bureaucracy
- The VA uses language most civilians don't understand
- Forms reference other forms that reference regulations
- This is intentional complexity, not personal attack
- Your mission: Learn the language, master the system





# The Suck is the Mission

## BATTLE TESTED WARRIORS

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### 4. Why Other Veterans Quit But You Won't!

- 70% of veterans give up after their first denial
- They get overwhelmed by the jargon
- They don't understand the appeals process
- They think "denied" means "never"
- You're different. You're reading this workbook. You're preparing. You're not quitting.

### 5. The Emotional Toll (Let's Talk About It)

- This process will trigger memories you've buried,
- You'll have to relive trauma to document it,
- You'll feel angry, frustrated, and defeated some days,
- That's *normal*. That's part of the suck.

#### **Build your support system NOW:**

- Therapist or counselor
- Battle buddy who understands
- Family member who can be your accountability partner
- Veteran support group

### 6. The Timeline Reality Check

- Initial claim: 3-12 months (sometimes longer)
- Appeals: Add 6-18 months
- This is a marathon, not a sprint
- Set realistic expectations so you don't burn out

### 7. Small Wins Matter - Celebrate yourself!

- Got your DD-214? Win.



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# Documentation & Medical Records

## CHAPTER 5

### *Your Records are Your Ammunition - Load Up!*

#### **BLUF (Bottom Line Up Front):**

You can't win a war without ammunition. Your medical records are your ammunition. The VA won't hand them to you—you have to collect them yourself. This section shows you how.

#### **Why This Matters**

The VA doesn't care about your story. They care about evidence.

Your medical records are proof:

- That you have a condition,
- That the condition is connected to your service,
- That the condition affects your daily life; and
- That you deserve a higher rating.

#### **No records = No problem! Let Sarge help you connect the dots!**

- Buddy statements from people who witnessed your condition,
  - Your personal statement explaining when symptoms started and how they affect you,
  - Nexus letters from medical professionals linking your condition to service,
  - Military HR files showing duty assignments, performance issues, or medical profiles,
  - Service treatment records documenting in-service injuries or complaints,
  - VA examinations where examiners document current symptoms,
  - Lay evidence like photos, journals, or prescriptions you kept; and
  - Secondary conditions that prove the primary condition exists.
- The VA looks for patterns. Your job is to show the pattern—with or without a stack of medical records.



# Types of Medical Records

## ACTIVE DUTY

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### First Priority: Active Duty Records You Need

**Active Duty Medical Records:** Everything from your time in service is important - sick call visits, injuries, hospitalizations, mental health appointments—*all* of it.

### Request Your Active Duty Records

Where to Get Them: National Personnel Records Center (NPRC) 1  
Archives Drive St. Louis, MO 63138

### How to Request:

- Online: [eVetRecs.archives.gov](http://eVetRecs.archives.gov)
- By Mail: Send SF 180 form (Request Pertaining to Military Records)
- By Phone: 314-801-0800

### What to Ask For:

- Complete medical records from your entire service
- Dental records
- Mental health records
- Hospitalization records
- Sick call records
- Any injury reports or incidents

**Timeline:** 30-60 days (sometimes longer)

**Pro Tip:** Request everything. Don't assume something isn't important.

The VA might find a connection you didn't see.



# Missing Medical Records

## ACTIVE DUTY - RECONSTRUCTION

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### Reconstruct Your Story

#### **When records are gone, your story isn't.**

Sometimes medical records disappear. Offices close. Files get destroyed. The VA loses paperwork. But here's the truth: You don't need perfect records to win your claim. You need to reconstruct your story.

### Why This Matters

The VA wants evidence. But evidence isn't just medical records. Evidence is the pattern of your condition—documented however you can prove it.

#### **When you reconstruct your story, you're showing the VA:**

- When your condition started
- How it's progressed
- How it affects your daily life
- Why it's connected to your service

And you're doing it without a stack of medical files.

### How to Reconstruct Your Story

#### **Step 1: Timeline Everything**

Write down every detail you remember:

- When did symptoms start? (Month/year, even if approximate)
- What triggered them? (Injury, deployment, exposure, event)
- What did you do about it? (Saw a doctor, self-treated, ignored it)
- Who witnessed it? (Family, battle buddies, supervisors, coworkers)
- How has it changed over time? (Gotten worse, stayed the same, cycles)

\*Don't worry about perfect dates. "Summer of 2005" is better than nothing. "Around the time we deployed to Iraq" is evidence.



# Missing Medical Records

## ACTIVE DUTY - MISSING RECORDS

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### Step 2: Gather Lay Evidence

Lay evidence is anything that proves your condition exists—without a doctor's signature.

#### Examples:

- Photos (scars, swelling, medical equipment, you looking unwell)
- Journals, diaries, or personal notes (even old texts or emails)
- Prescriptions you kept (bottles, receipts, pharmacy records)
- Medical equipment receipts (braces, crutches, heating pads, compression sleeves)
- Appointment cards or reminder letters from doctors
- Insurance explanation of benefits (EOBs) showing you were treated
- Credit card statements showing medical charges
- Emails or messages to friends/family about your condition
- Social media posts mentioning illness or injury
- Performance reviews noting health issues or accommodations
- Leave/sick time records from your employer
- Disability accommodations documentation from work or school

### Step 3: Get Buddy Statements

This is **CRITICAL**. Buddy statements are powerful evidence.

Ask people who witnessed your condition:

- Battle buddies from your unit
- Family members
- Close friends
- Coworkers
- Supervisors
- Neighbors
- Anyone who saw you struggle



# Missing Medical Records

## ACTIVE DUTY - MISSING RECORDS

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### Step 3 continued:

#### What should they write?

- When they knew you
- What condition they witnessed
- Specific examples of how it affected you
- How it's impacted your life
- Their relationship to you

**Format:** A simple letter. Doesn't need to be fancy. Handwritten is fine. Typed is fine. Email is fine.

**Important:** They should sign and date it. Include their contact info.

**The VA may reach out to verify.**

### Step 4: Write Your Personal Statement

Your personal statement is YOUR story, in YOUR words.

What to include:

- When symptoms started
- What caused them (service-connected event, deployment, exposure, injury)
- How they've affected your daily life (work, relationships, activities, sleep, mental health)
- What you've done to manage them
- How they're getting worse, staying the same, or cycling
- Why you believe they're connected to your service
- What you need (treatment, accommodations, disability rating)

**Keep it honest. Don't exaggerate. Don't minimize. Tell the truth.**





# Missing Medical Records

## ACTIVE DUTY - MISSING RECORDS

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**Step 4** continued:

**Example structure:** "I was deployed to [location] in [year]. During [event/time period], I experienced [injury/exposure/trauma]. Since then, I've had [symptoms]. This affects me by [specific examples]. I've tried [treatments/management], but [outcome]. I believe this is connected to my service because [reason]."

### **Step 5: Get a Nexus Letter**

A nexus letter is a medical professional's opinion linking your condition to your service.

Who can write one?

- Your civilian doctor
- A VA doctor
- A mental health professional
- Any licensed medical provider who knows your condition

What should it say?

- Your diagnosis
- That the condition is at least as likely as not connected to your service
- The medical reasoning (why they believe the connection exists)
- Reference to your symptoms, timeline, and service history

How to request one:

- Ask your doctor directly
- Provide them with your service history and symptoms
- Explain what you need (a letter stating the connection to service)
- Some doctors charge a fee (\$100-500); ask upfront
- Give them time (2-4 weeks is typical)



# Missing Medical Records

## ACTIVE DUTY - MISSING RECORDS

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### **Step 5** continued:

If your doctor won't write one:

- Ask another provider
- Consider hiring a VA-accredited representative or attorney (they often have relationships with medical professionals who write nexus letters)

### **Step 6: Organize Your Reconstruction**

Create a "Reconstruction Binder" with:

- Your timeline
- All lay evidence (photos, receipts, documents)
- Buddy statements
- Your personal statement
- Nexus letter(s)
- Any other supporting evidence
- Label everything clearly. Include dates. Make it easy for the VA to understand your story.

### **What If Records Are Truly Lost?**

Document your effort to find them.

- Keep copies of all requests you made
- Note dates you called, who you spoke to, what they said
- Save emails confirming records don't exist
- Document that you tried multiple times
- This documentation is evidence too. It shows you did everything you could to find records, and it wasn't your fault they're gone.



# Lost Medical Records Battle Plan

## RECONSTRUCTED EVIDENCE

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### **The Bottom Line**

Reconstructing your story isn't a backup plan—it's a BATTLE PLAN. Medical records are powerful. But they're not the only evidence that matters. Your story, told through your words, your witnesses, your documentation, and your medical professional's opinion, is just as powerful.

You don't need perfect records. You need to show the VA who you are, what happened to you, and why you deserve your rating.



# Types of Medical Records

## VETERANS ADMINISTRATION

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### Second: VA Records You Need

**VA Medical Records:** Everything the VA has on file about you. C&P exams, VA hospital visits, VA clinic appointments, prescriptions. If you have never been to the VA, that's o.k. But did you get a disability exam when you transitioned out of the service? Get those records!

### Request Your VA Records (Your C-File)

**What Is Your C-File?** Your complete VA file. Every document the VA has ever created about you. This is CRITICAL.

#### How to Request:

- Online: VA.gov (My HealtheVet or VA.gov account)
- By Phone: 1-800-827-1000
- In Person: Your local VA Regional Office
- By Mail: Send a written request to your VARO

#### What You'll Get:

- All C&P exam reports
- Rating decisions
- Medical records from VA hospitals and clinics
- Correspondence from the VA
- Your entire claims history

#### Timeline: 7-30 days

**Pro Tip:** Request your C-File EARLY. Review it for errors, missing records, or incomplete exams. If something's wrong, you can challenge it.



# Types of Medical Records

## CIVILIAN RECORDS

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### Last but IMPORTANT: Civilian Medical Records

**Civilian Medical Records:** Collect everything from doctors outside the VA. Your civilian doctor, therapist, specialist, emergency room visits, urgent care—all of it. Don't forget that if you have a secondary or presumptive (even if it is not in your Active Duty or VA Records) get these civilian medical records, too!

### This Is Where Most Veterans Fail.

The VA doesn't have your civilian doctor's records. You have to get them or give the VA permission to request them on your behalf. And this is your biggest opportunity to build a bulletproof case. In the next chapter, Sarge will teach you how to get the VA to request your civilian records.

### Make Your List First: Before you start calling, get organized:

#### Step 1: Write Down Every Doctor You've Seen

- Primary care physician (current and past)
- Specialists (orthopedic, neurologist, cardiologist, etc.)
- Mental health providers (therapist, psychiatrist, counselor)
- Urgent care and emergency room visits
- Physical therapy providers
- Chiropractors
- Dentists
- Any other healthcare provider

**Step 2:** Include Dates When did you see them? What years? Write it down.



# Types of Medical Records

## CIVILIAN RECORDS

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**Step 3:** Note What They Treated What condition did you see them for? This helps you request the RIGHT records.

### How to Collect:

1. Call the office. Ask to speak to Medical Records or Patient Records.
2. Be specific. Say: "I need my complete medical records from [DATE] to [DATE] for my VA disability claim."
3. Ask for electronic format. Request PDF or email if possible. It's faster and easier to organize.
4. Request everything. Office notes, test results, imaging reports, prescriptions, diagnoses, treatment plans—*all of it*.
5. Get it in writing. Ask them to email or mail confirmation of your request with an expected delivery date.
6. Follow up. If you don't get records within 30 days, call again. Providers are required by law to give you your records.

### What to Request:

- Office visit notes (what the doctor wrote about your visit)
- Test results (labs, blood work, imaging)
- Imaging reports (X-rays, MRIs, CT scans)
- Prescriptions and medication lists
- Referrals to other doctors
- Diagnoses and diagnoses codes
- Treatment plans
- Any notes about your symptoms or complaints

**Timeline:** 5-30 days per provider

**Cost:** Many civilian providers charge copying fees (\$10-50). Ask upfront. (If the VA requests the records, the VA pays the fee.)



# Types of Medical Records

## CIVILIAN RECORDS

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**Pro Tip:** Don't wait for the VA to ask for your records. Collect them NOW and submit them WITH your claim. This speeds up the process and prevents delays.

### **What If a Provider Won't Give You Your Records?**

They have to. It's the law (HIPAA).

#### **If they give you trouble:**

- Ask to speak to the Privacy Officer
- Request your records in writing (email or certified mail)
- Reference HIPAA and your right to access your medical records
- If they still refuse, file a complaint with your state's medical board or the HHS Office for Civil Rights

**Note:** Don't take no for an answer. Your records are YOUR property.

### **What If a Doctor's Office Is Closed?**

This happens. Doctors retire, practices shut down, offices move.

#### **Here's what to do:**

- Call the state medical board and ask where records were transferred
- Contact the hospital where the doctor had privileges
- Search online for the doctor's current location
- Ask the VA to help locate records (they have resources)
- If you can't find them, document your effort and use other evidence (buddy statements, personal records, prescriptions you kept)





# Critical Warnings

## ALL MEDICAL RECORDS

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### Female Veterans (SHEREOS) & Name Changes

Special Consideration: If you changed your name (marriage, divorce, legal change), your records might be under different names. Be proactive and communicate with the doctor's office staff.

### **NEVER—AND I MEAN NEVER—GIVE THE VA YOUR ONLY COPY OF ANY MEDICAL RECORD.**

Here's why:

- Records get lost in the VA system
- Files get misfiled, misplaced, or destroyed
- You may need those records for appeals, supplemental claims, or future increases
- Once the VA has your originals, you may never get them back

### **THE RULE:**

- ALWAYS give the VA a COPY
- ALWAYS keep the ORIGINAL for yourself
- ALWAYS keep a BACKUP COPY in a separate location

### **If you mail records to the VA:**

- Send copies, not originals
- Keep proof of mailing (certified mail, tracking number)
- Keep a copy of everything you send

### **If you upload records to VA.gov:**

- Keep the original files on your computer
- Back them up to an external drive or cloud storage
- Keep printed copies in your binder



# Critical Warnings

## ALL MEDICAL RECORDS

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### **If you hand-deliver records to a VA office:**

- Give them copies
- Ask for a receipt showing what you submitted and when
- Keep your originals in your possession

**Bottom line:** The VA is not a storage facility for your irreplaceable medical records. Protect your originals like your life depends on it—because your claim does.

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# Take Charge

## CHAPTER 6

### Put the VA to Work for You!

#### **BLUF (Bottom Line Up Front):**

The VA is not doing you a favor—it has a legal duty to help develop your claim. When you understand what they're required to do, you can stop begging and start directing traffic so the VA is working for you, not the other way around.

#### **How to Use this Section:**

Use this section to flip the script from “I hope they help me” to “Here’s what I need the VA to do next.” As you move through the pages, you’ll list what you can reasonably expect from VA (records they should request, exams they must schedule, decisions they must explain), track what they’ve actually done, and note where they’ve stalled, dropped the ball, or confused you.

Focus and treat each worksheet like a command log: date what happened, who you spoke with, what was promised, and what follow-up you requested. Star any places where the VA didn’t follow through so you know exactly where to push back, ask questions, or request help as we move deeper into your claim.



## Take Charge

# ORGANIZATION IS YOUR WEAPON

### 1. Records Organization Complete (From Chapter 5)

- Active duty records requested or received
- VA C-File requested or received
- Civilian medical records collected
- Everything organized in a binder and digitally backed up
- You know where everything is

**If you haven't done Chapter 5 yet, STOP.** Go back and do it now. Your records are your ammunition. You can't fight without ammunition.

### 2. Ensure You Have Those 12 Essential VA Vocabulary Words Learned

You need to understand these terms before you start:

- C&P Exam = Compensation & Pension exam (VA's medical evaluation of you)
- Rating Decision = VA's decision on your disability rating
- Effective Date = When your benefits start (usually the date you filed)
- Backpay = Money owed to you from the effective date to now
- Secondary Condition = A condition caused by your service-connected condition
- Service Connection = VA's acknowledgment that your condition is connected to your service
- Nexus = The link between your condition and your service
- Continues on next page...



# Take Charge

## WORKING FOR YOU

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### 12 Essential VA Vocabulary Words, continued

- Intent to File = Your official notice to the VA that you're filing a claim
- Supplemental Claim = A new claim with new evidence after a denial
- Appeal = Challenging a VA decision you disagree with
- Regional Office (VARO) = Your local VA office that handles your claim
- Duty to Assist = VA's legal obligation to help you find evidence

You don't need to be an expert. But you need to understand these words so you don't get lost in VA letters.

### 3. Get Your Tracking System Ready!

This is CRITICAL. This is how you stay in control.

You need a system to track:

- Every date you submit something to the VA
- Every date the VA responds
- Every piece of evidence you've sent
- Every deadline the VA gives you
- Every status update
- Every mistake or missing piece

Your Tracking System Can Be:

#### Option 1: Simple Spreadsheet

- Date | Action | Submitted To | Response | Status | Notes
- Easy to update
- Easy to search
- Works on any device



# Take Charge

## WORKING FOR YOUR FAMILY

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### **Option 2: Three-Ring Binder - The Physical System**

1. Physical copies of everything,
2. This can be created using your career binder,
3. Chronological order,
4. Tabs for each section,
5. Checklist of what you've submitted; and
6. Calendar of important dates.

#### Section 1: Claim Overview

- Copy of your Intent to File
- Claim number and confirmation
- List of all conditions you're claiming
- Contact information (VA regional office, phone numbers, websites)
- Important dates (date filed, expected decision date)

#### Section 2: Active Duty Records

- DD-214 (NEVER the original—always a certified copy)
- Service medical records (chronological order, oldest to newest)
- Deployment orders
- Awards and commendations
- Performance evaluations
- Any incident reports or injury documentation

#### Section 3: VA Records

- C-File documents
- All C&P exam reports
- Rating decisions (current and past)
- VA medical records (hospital visits, clinic appointments)
- Correspondence from the VA
- Benefit letters





# Take Charge

## WORKING FOR YOUR FAMILY

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### **Option 2: Three-Ring Binder - continued**

#### Section 4: Civilian Medical Records

- Organized by provider (each provider gets a subsection)
- Chronological order within each provider
- Office visit notes
- Test results and imaging reports
- Prescriptions and medication lists
- Treatment plans
- Referrals

#### Section 5: Evidence Submitted

- Copies of EVERYTHING you've sent to the VA
- Proof of mailing (certified mail receipts, tracking numbers)
- Screenshots of online submissions
- Confirmation emails
- Date submitted and method (mail, fax, online upload)

#### Section 6: VA Requests & Responses

- Every letter the VA sends you
- Every request for additional evidence
- Your responses to VA requests
- Deadlines highlighted in yellow
- Completed items checked off

#### Section 7: Buddy Statements & Personal Statements

- All buddy statements (organized by person)
- Your personal statement
- Nexus letters from medical professionals
- Any supporting lay evidence



# Take Charge

## WORKING FOR YOUR FAMILY

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### Option 2: Three-Ring Binder - continued

#### Section 8: Tracking Log

- Master checklist of what you've submitted
- Calendar of important dates
- Follow-up log (who you called, when, what they said)
- Status updates (check VA.gov weekly and write it down)

#### Section 9: Notes & Questions

- Questions to ask your VSO or representative
- Notes from phone calls with the VA
- Things you need to follow up on
- Ideas for additional evidence

#### Section 10: Financial Records

- Backpay calculations
- Payment history
- Tax documents related to VA benefits
- Any financial correspondence

#### Pro Tips for Physical Binders:

- Use sheet protectors for your most important documents (DD-214, Intent to File, Rating Decisions)
- Color-code tabs by priority: Red = urgent, Yellow = pending, Green = complete
- Keep a duplicate binder at home in a fireproof safe or with a trusted family member
- Take photos of every page and back them up digitally (just in case)
- Update your binder weekly—set a recurring reminder
- Bring your binder to every VA appointment, VSO meeting, or C&P exam



# Take Charge

## WORKING FOR YOUR FAMILY

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### Option 2: Three-Ring Binder - continued

#### Why This Works:

- You can physically flip through and see your progress
- No technology required—works even if your computer crashes
- Easy to bring to appointments
- Satisfying to check things off and move tabs from "pending" to "complete"

### Option 3: Digital Folder System - The Cloud Based System

- Google Drive or OneDrive folder
- Subfolders by date or action type
- Screenshots of VA.gov status updates
- Copies of all emails and letters
- Master spreadsheet tracking everything

**Best for:** Veterans who are tech-savvy, want access from anywhere, and prefer searchable digital files.

#### What You Need:

- Google Drive, OneDrive, Dropbox, or iCloud account (free or paid)
- Scanner or scanning app (CamScanner, Adobe Scan, Genius Scan)
- Spreadsheet software (Google Sheets, Excel)
- Calendar app (Google Calendar, Outlook, Apple Calendar)
- Password manager (LastPass, 1Password, Bitwarden) for security



# Take Charge

## WORKING FOR YOUR FAMILY

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### How to Set It Up:

- Use the SAME 10 SECTIONS as Option 2 (Three-Ring Binder), but organize them as digital subfolders instead of physical tabs.

### Pro Tips for Digital Systems:

- Name files clearly: "2025-01-15\_Knee-MRI\_Submitted.pdf"
- Use consistent date format: YYYY-MM-DD (sorts chronologically)
- Set up automatic backups (Google Drive auto-syncs, but also back up to external hard drive monthly)
- Password-protect sensitive documents (DD-214, medical records with SSN)
- Share view-only access with a trusted family member (in case of emergency)
- Set calendar reminders for deadlines (1 week before, 3 days before, day of)
- Take screenshots of EVERYTHING on VA.gov (status updates, confirmation pages, submitted evidence)
- Use OCR (Optical Character Recognition) when scanning so documents are searchable
- Create a "Quick Access" folder with your most-used documents (DD-214, Intent to File, Claim Number)

### Why This Works:

- Access from anywhere (phone, tablet, computer)
- Searchable (find documents instantly by keyword)
- Automatic backups (cloud storage protects against loss)
- Easy to share with VSO, attorney, or family member
- No physical storage space required
- Can't be destroyed in a fire or flood (as long as it's in the cloud)



# Take Charge

## WORKING FOR YOUR FUTURE

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### **Option 4: Combination (RECOMMENDED)**

- Binder with physical copies (backup)
- Spreadsheet tracking dates and status
- Digital folder with all documents
- Calendar with important deadlines

**Best for:** Veterans who want the security of physical copies AND the convenience of digital access.

Why This Is the Best Option:

- Redundancy: If your computer crashes, you have the binder. If your house floods, you have the cloud backup.
- Flexibility: Use the binder for appointments and the digital system for quick searches.
- Accountability: Physical binder keeps you disciplined; digital system keeps you organized.
- Peace of Mind: You'll never lose a document because you have it in THREE places (binder, cloud, external backup).

### **How to Set It Up:**

Physical Binder (Primary Reference)

Use the full setup from Option 2 above:

- 10 tabbed sections (same sections as listed above)
- Chronological order
- Sheet protectors for critical documents
- Weekly updates



# Take Charge

## WORKING FOR YOUR FUTURE

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### Option 4: Combination (RECOMMENDED)

#### Digital Folder System (Primary Storage)

Use the full setup from Option 3 above:

- Cloud storage (Google Drive, OneDrive, Dropbox)
- 10 organized subfolders (same sections as Option 2 and Option 3)
- Master tracking spreadsheet
- Weekly screenshots of VA.gov

#### External Backup (Disaster Recovery)

- External hard drive or USB drive
- Copy your entire digital folder system monthly
- Store in a fireproof safe or off-site (trusted family member, safe deposit box)
- Update after major submissions or decisions

#### Calendar System (Deadlines & Reminders)

- Google Calendar, Outlook, or Apple Calendar
- Set reminders for:
  - VA deadlines (1 week before, 3 days before, day of)
  - Weekly VA.gov status checks (every Monday at 9 AM)
  - Monthly record review (first Sunday of every month)
  - Follow-up calls (if VA hasn't responded in 30 days)
  - C&P exam prep (1 week before exam)



# Take Charge

## WORKING FOR YOUR FUTURE

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### Option 4: Combination (RECOMMENDED)

#### Pro Tips for Combination System:

- Scan EVERYTHING into your digital folder the same day you add it to your binder
- Use your phone to take photos of documents on the go (then transfer to digital folder)
- Keep a "Go Bag" with copies of your most critical documents (DD-214, Intent to File, Claim Number, current rating decision) in case you need to go to the VA office unexpectedly
- Label your binder clearly: "VA DISABILITY CLAIM - [YOUR NAME] - DO NOT DISCARD"
- Tell a trusted family member where your binder and external backup are stored
- If you travel, bring your binder or have digital access via phone/tablet
- Keep your 10 sections organized identically in both binder and digital folders (same names, same order)

#### Why This Is the Gold Standard:

- You're protected against every possible disaster (fire, flood, computer crash, lost paperwork)
- You have instant access to any document, any time, anywhere
- You can physically see your progress (binder) and digitally track it (spreadsheet)
- The VA can NEVER say "we didn't receive it" because you have proof in three places
- You stay disciplined with weekly and monthly routines
- You're always prepared for appointments, exams, or VA requests
- Your binder and digital folders mirror each other perfectly (same 10 sections).



# Take Charge

## WORKING FOR SUCCESS

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### What Your Tracking System MUST Include:

- ☐ Date you filed your claim
- ☐ Claim number (the VA gives you this)
- ☐ Every piece of evidence you submitted (date, what, how)
- ☐ Every VA request (date received, deadline, what they want)
- ☐ Every VA response (date received, what they said)
- ☐ Every deadline (when you need to respond by)
- ☐ Every status update (check VA.gov weekly)
- ☐ Every mistake or missing piece (document it)
- ☐ Every follow-up you make (date, who you called, what they said)

### Why This Matters:

1. When the VA says "We never got your evidence," you can pull out your tracking system and show them the date you mailed it, the tracking number, and the signature confirmation.
2. When they miss a deadline, you can point to your calendar and say "You had until [DATE] to respond. Today is [DATE]. You're late."
3. When they deny your claim, you can review your tracking system and see exactly what evidence you submitted and what they said they received.

**Your tracking system is your proof. It's your power. Don't skip this.**

### Ready?

- You've got your records organized. You know the vocabulary.
- You've got your tracking system ready.





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## CHAPTER 7

### *Prepare Like Your Life Depends On It*

#### **BLUF (Bottom Line Up Front):**

The C&P (Compensation & Pension) exam is the single most important appointment in your entire VA disability claim. The examiner's report will directly determine your disability rating, your monthly benefit amount, and potentially your entire financial future. This isn't a routine doctor's visit. This is a battle. And you're going in prepared.

#### **The Reality Check**

##### **Here's what you need to understand:**

The VA examiner doesn't know you. They don't know your story, your struggles, or your worst days. They have 30-60 minutes to evaluate a condition that's been affecting you for years. They're reading your file for the first time. They're forming opinions based on what they see in that room—your body language, your responses, your presentation.

##### **This is not fair. This is not right. But this is the system.**

Your job is to make sure that in those 30-60 minutes, the examiner sees the REAL you—not a version of you on a good day, not a version of you putting on a brave face, but the actual impact of your condition on your life.

**Here's the truth nobody tells you:** The C&P examiner isn't your enemy, *but* they're also not your advocate. They're a fact-finder with a checklist, a time limit, and a stack of files waiting after yours. Their job is to observe, document, and move on to the next veteran.



# Critical Intel

## ROLES TO PLAY

**The veteran's job:** Make damn sure that what they observe and document is the full, unfiltered truth of what you're living with every single day. Because once that report is written, it becomes the foundation of your rating decision—and changing it later is an uphill battle you don't want to fight.

### **What the C&P Exam Actually Is**

1. **Not a medical appointment.** You're not there to get treatment or advice. The examiner isn't your doctor. They're a fact-finder for the VA.
2. **A rating decision in motion.** Everything you say, do, and show in that exam room becomes part of your C-File. It becomes evidence. It becomes the basis for your rating.
3. **Your chance to tell your story.** You get to show the examiner what your condition actually looks like, how it impacts your daily life, and why you deserve a higher rating.
4. **A test you can study for.** Unlike most exams, you can prepare for this one. You can know what's coming. You can practice your responses. You can walk in ready.

**The C&P report is a permanent record** that follows you. Every word in that report gets filed in your C-File. It stays there. If you appeal your rating, the VA will reference it. If you file for an increase later, they'll compare your new exam to this one. If there are inconsistencies between what you said today and what you say six months from now, the VA will use that against you. This isn't a one-time conversation—it's the official record of your condition on this specific day, and it will be used to evaluate every future claim you make.



## WHAT IS A C&P EXAM?

### Before the Exam: The 30-Day Preparation Plan

1. Not a medical appointment. You're not there to get treatment or advice. The examiner isn't your doctor. They're a fact-finder for the VA.
2. A rating decision in motion. Everything you say, do, and show in that exam room becomes part of your C-File. It becomes evidence. It becomes the basis for your rating.
3. Your chance to tell your story. You get to show the examiner what your condition actually looks like, how it impacts your daily life, and why you deserve a higher rating.
4. A test you can study for. Unlike most exams, you can prepare for this one. You can know what's coming. You can practice your responses. You can walk in ready.

### Before the Exam: The 30-Day Preparation Plan Week 1: Know Your Condition

#### Your Mission:

- Review your medical records (everything in your C-File)
- Read the VA rating criteria for your condition(s)
- Understand what the VA is looking for
- Know the difference between 10%, 20%, 30%, 40%, 50%, 60%, 70%, 80%, and 100%



# Critical Intel

## **BATTLE PLAN**

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### **Action Items:**

- ☐ Pull all your medical records (VA and civilian)
- ☐ Read the VA rating schedule for your condition(s)
- ☐ Highlight key phrases that match YOUR symptoms
- ☐ Create a one-page summary: "My Condition & How It Affects Me"
- ☐ List your worst symptoms (not your best days—your worst days)

### **Week 2: Document Your Daily Reality**

#### **Your Mission:**

- Create a detailed picture of how your condition impacts your life
- Gather evidence that shows functional limitations
- Prepare specific examples and stories

#### **Action Items:**

1. Write down your typical day (morning routine, work, activities, evening)
2. Document specific limitations (can't walk more than X minutes, can't sit for Y hours, etc.)
3. List medications you take and side effects
4. Gather photos/videos of adaptive equipment, mobility aids, or environmental modifications
5. Collect receipts for medical equipment, medications, or treatments
6. Get statements from family members about how your condition affects them
7. Write down 3-5 specific stories/examples of your worst days.



# Critical Intel

## WEEK 3

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### Week 3: Practice Your Responses

#### Your Mission:

- Anticipate common C&P exam questions
- Practice answering clearly and honestly
- Get comfortable talking about your symptoms

#### Action Items:

- Review common C&P exam questions (see list below)
- Write out your answers (don't memorize—just practice)
- Practice with a trusted friend or family member
- Record yourself answering questions (listen back—do you sound credible?)
- Prepare your "worst day" story (specific, detailed, honest)
- Practice describing your symptoms without minimizing or exaggerating

### Week 4: Final Preparation

#### Your Mission:

- Confirm all exam details
- Prepare your physical and mental state
- Get ready to show up as your authentic self

#### Action Items:

- Confirm exam date, time, and location (call if needed)
- Plan your route (arrive 15 minutes early)
- Prepare comfortable clothing that shows your condition (if applicable)



# Critical Intel

## WEEK 4

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### Week 4

#### Action Items (continued):

- Get a good night's sleep the night before
- Eat a healthy breakfast
- Bring all required documents (ID, insurance card, list of medications)
- Bring a notebook and pen (take notes if allowed)
- Review your one-page summary the morning of the exam

#### Common C&P Exam Questions (And How to Answer Them)

**Question:** "How are you doing today?"

**What They're Really Asking:** Are you functional? Are you in pain? Are you stable?

#### How to Answer:

- Be honest. If you're having a bad day, say so.
- "I'm managing, but I'm having more pain than usual today."
- Don't say "I'm fine" if you're not fine. That contradicts your claim.

**Question:** "Tell me about your service-connected condition."

**What They're Really Asking:** Do you understand your own condition? Can you articulate it clearly?

#### How to Answer:

- Stick to facts. Use medical terminology when appropriate.
- "I was diagnosed with PTSD following my deployment to [location]. I experience hypervigilance, nightmares, and panic attacks, especially in crowded spaces."
- Connect it to your service if possible.
- Don't ramble. Be concise and specific.



# Critical Intel

## COMMON C&P QUESTIONS

**Question:** "How does this condition affect your daily life?"

**What They're Really Asking:** What are your functional limitations? How bad is it really?

**How to Answer:**

- Give specific examples. Not vague statements.
- Instead of: "It's hard to do things."
- Say: "I can't sit for more than 20 minutes without severe back pain. I have to change positions constantly. I can't drive more than 30 minutes without stopping. I can't do household chores for more than an hour at a time."
- Use percentages or time limits: "I'm productive about 40% of the time."
- Describe the impact on work, relationships, hobbies, self-care.

**Question:** "What medications are you taking?"

**What They're Really Asking:** How severe is your condition? What are the side effects?

**How to Answer:**

- List all medications (bring a written list).
- Include dosages and frequency.
- Mention side effects: "I take [medication] for pain, but it makes me drowsy and affects my concentration."
- Don't downplay side effects. They matter.

**Question:** "Can you walk/sit/stand for long periods?"

**What They're Really Asking:** What are your physical limitations?

**How to Answer:**

- Be specific about time limits.
- Continued on next page...





## COMMON C&P QUESTIONS

**Question:** "Can you walk/sit/stand for long periods?"

**How to Answer:**

- "I can walk about 10 minutes before I need to sit down."
- "I can stand for about 15 minutes before my legs give out."
- "I can sit for about 20 minutes before my back pain becomes unbearable."
- Mention what happens when you exceed your limit: pain, swelling, loss of function, etc.

**Question:** "Do you have any good days?"

**What They're Really Asking:** Is your condition consistent? Or are you exaggerating?

**How to Answer:**

- Be honest. Most conditions have better and worse days.
- "Yes, I have better days, but even on my best days, I still have [specific symptom]. My good days are maybe 20% of the time."
- Explain what a "good day" looks like: "A good day means I only have mild pain instead of severe pain, but I still can't do [activity]."
- Don't let this question minimize your condition.

**Question:** "How does this affect your work?"

**What They're Really Asking:** Can you work? How much? What's the impact?

**How to Answer:**

- If you work: "I work [X hours], but I struggle with [specific tasks]. I miss work [X days] per month. My productivity is affected by [symptom]."
- If you don't work: "I'm unable to work because [specific reason]. I've tried [X], but [symptom] prevents me from maintaining employment."
- If you're self-employed: "I can only work [X hours] before my symptoms flare up. I've had to reduce my business by [X]%."



# Critical Intel

## COMMON C&P QUESTIONS

**Question:** "Have you had any treatment for this condition?"

**What They're Really Asking:** Are you actively managing your condition?  
Are you compliant with treatment?

**How to Answer:**

- List all treatments: therapy, medications, physical therapy, surgery, etc.
- "I've been in therapy for [X] years. I take [medications]. I've tried [treatments]."
- Mention what works and what doesn't: "Physical therapy helps temporarily, but the pain returns."
- If you haven't pursued treatment: Explain why (cost, access, side effects, etc.).

**Question:** "What are your worst symptoms?"

**What They're Really Asking:** What's the real impact? Don't hold back.

**How to Answer:**

- This is your moment. Be specific and detailed.
- "My worst symptom is [X]. It happens [when/how often]. It affects me by [specific impact]."
- Give an example: "Last week, I had a panic attack at the grocery store and couldn't leave my car for 45 minutes."
- Don't minimize. Don't exaggerate. Just tell the truth.

**Listen:** This is not the time to be a hero. This is not the time to downplay your pain because you don't want to look weak. This is not the time to minimize your struggles because you think that's what a soldier does. Humble yourself and be brutally honest. The examiner cares about the facts - the fact is, your condition is real. Your pain is real. Your limitations are real. This exam isn't about you it's about your service and sacrifice. Check your ego at the door, tell the examiner the raw, unfiltered truth about your worst days, and fight for what you have already earned.



## Critical Intel

# BRING YOUR AMMO TO C&P EXAM

### What to Bring to Your C&P Exam

#### Required Documents:

- ☐ Photo ID
- ☐ Insurance card (if applicable)
- ☐ List of current medications (with dosages)
- ☐ List of providers (doctors, therapists, etc.)
- ☐ Any recent medical records or test results

#### Recommended Items:

- ☐ Notebook and pen (to take notes)
- ☐ List of your symptoms (for reference)
- ☐ Photos of adaptive equipment or environmental modifications
- ☐ Buddy statements or family letters (if allowed—ask the examiner)
- ☐ Your personal statement (if allowed—ask the examiner)

#### Do NOT Bring:

- ▲ Attitude or defensiveness
- ▲ Exaggerations or lies
- ▲ Complaints about the VA system
- ▲ Demands for a specific rating
- ▲ Anger or hostility

### Day of the Exam: Your Battle Plan

#### The Night Before:

- ☐ Get 7-8 hours of sleep
- ☐ Avoid alcohol
- ☐ Prepare your clothes (comfortable, appropriate)
- ☐ Gather all documents
- ☐ Review your one-page summary
- ☐ Do a relaxation exercise (deep breathing, meditation, etc.)



## PREPARE FOR THE C&P EXAM

### **The Morning Of:**

- ☐ Eat a healthy breakfast
- ☐ Take your medications as prescribed
- ☐ Shower and dress in clean, comfortable clothes
- ☐ Avoid caffeine if it increases anxiety
- ☐ Leave early to avoid rushing
- ☐ Do a grounding exercise on the way (5-4-3-2-1 technique)

### **Arriving at the Exam:**

- ☐ Arrive 15 minutes early
- ☐ Check in at the front desk
- ☐ Sit in the waiting room and take deep breaths
- ☐ Review your notes one more time
- ☐ Remind yourself: "I'm prepared. I'm ready. I'm going to tell my truth."

### **During the Exam:**

- ☐ Shake the examiner's hand (firm grip, eye contact)
- ☐ Sit up straight (posture matters)
- ☐ Make eye contact when answering questions
- ☐ Speak clearly and at a normal pace
- ☐ Take your time answering—don't rush
- ☐ Ask for clarification if you don't understand a question
- ☐ Be honest. Always.
- ☐ Show your symptoms (if asked to walk, move, etc.)
- ☐ Don't minimize your condition
- ☐ Don't exaggerate your condition
- ☐ If you need a break, ask for one



## AFTER THE C&P EXAM

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### After the Exam:

- ☐ Thank the examiner
- ☐ Ask when the report will be available
- ☐ Don't discuss the exam with anyone until you've reviewed the report
- ☐ Document your own notes about the exam (what was asked, how you responded)
- ☐ Add the exam report to your Subfolder 3: VA Records (once received)

### Red Flags: What Examiners Are Looking For They're looking for:

- Inconsistency between your statement and your medical records. If you say you can't walk 10 minutes, but your medical records show you ran a 5K last month, that's a problem.
- Inconsistency between your statement and your behavior in the exam room. If you say you can't sit for more than 20 minutes, but you sit comfortably for the entire 45-minute exam, that's a problem.
- Exaggeration. If you're clearly functional but claiming complete disability, examiners will notice.
- Minimization. If you're downplaying your symptoms to seem "tough," examiners will notice that too.
- Lack of medical evidence. If you claim severe symptoms but have no medical documentation, that's a red flag.
- Vague or evasive answers. If you can't articulate your symptoms clearly, examiners wonder if they're real.

**The solution?** Be honest. Be specific. Be consistent. Let your actual condition speak for itself.



## WHAT HAPPENS NEXT?

### What Happens Next

#### The Examiner's Report

- The examiner writes a detailed report of the exam
- This report goes into your C-File
- The VA uses this report to make your rating decision
- You can request a copy of this report (you should)

#### Timeline

- Report typically available within 2-4 weeks
- Rating decision typically issued within 4-6 weeks after exam
- Check your VA.gov account weekly for updates
- Update your Tracking Spreadsheet (Subfolder 8) with the exam date and expected decision date

#### If You Disagree with the Report

- Request a copy and review it carefully
- If there are errors or misstatements, file a Notice of Disagreement (NOD)
- Consider requesting a new exam if the examiner missed critical information
- Work with your VSO or representative to challenge the rating

#### If You Disagree with Your Rating

- File a Notice of Disagreement (NOD) within one year
- Request a Higher-Level Review or Board Appeal
- Gather additional evidence to support a higher rating
- Consider filing for an increase after 6-12 months if your condition worsens



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# 38 CFR

## CHAPTER 8

### *Know the Rulebook, Win the Game*

#### **BLUF (Bottom Line Up Front):**

The Code of Federal Regulations (CFR) Title 38 is the VA's rulebook. It's the law that governs your disability claim, your rating, your benefits, and your appeals. If you don't know the rules, you're fighting blind. If you DO know the rules, you have power. This chapter teaches you how to read, understand, and use the CFR to your advantage—because the VA isn't going to hand you a manual.

#### **What is the CFR?**

CFR stands for Code of Federal Regulations. It's the official collection of all federal rules and regulations published by the executive departments and agencies of the United States government.

**Title 38 of the CFR covers Veterans' Benefits.** Everything the VA does—disability ratings, compensation, pensions, healthcare, education, home loans—is governed by Title 38.

**Think of it like this:** The CFR is the referee's rulebook. The VA has to follow it. You have the right to hold them accountable to it. But only if you know what's in it.

#### **Why You Need to Know the CFR**

Because the VA won't tell you the rules. They'll deny your claim and say "insufficient evidence" without telling you exactly what evidence you needed or what regulation they're citing.

Because knowledge is power. When you know the specific regulation that applies to your condition, you can cite it in your claim, your appeal, or your statement. You can call out the VA when they get it wrong.





38 CFR

# REASONABLE DOUBT

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## **Why You Need to Know the CFR, continued.**

Because the CFR is written in your favor—if you know how to read it. The VA is required to give you the benefit of the doubt when evidence is roughly equal. That's in the CFR. The VA is required to consider all evidence favorable to you. That's in the CFR. But if you don't know these rules exist, you can't enforce them.

**Bottom line:** The CFR is your weapon. Learn how to use it.

## **The Most Important CFR Sections for Veterans**

You don't need to read all 5,000+ pages of Title 38. You need to know the sections that directly impact YOUR claim. Here are the critical ones:

### **38 CFR § 3.102** – Reasonable Doubt

What it says: When there is an approximate balance of positive and negative evidence regarding any issue material to the determination of a matter, the VA shall give the benefit of the doubt to the claimant.

**What it means:** If the evidence is 50/50, you win. The VA is legally required to decide in your favor when evidence is roughly equal. This is HUGE.

**How to use it:** In your personal statement or appeal, cite this regulation. "Per 38 CFR § 3.102, the evidence supports a finding in my favor under the reasonable doubt standard."



38 CFR

## SERVICE CONNECTION

### **38 CFR § 3.303** – Principles Relating to Service Connection

What it says: Service connection may be established for any disease diagnosed after discharge when all the evidence, including that pertinent to service, establishes that the disease was incurred in service.

**What it means:** You don't have to be diagnosed IN service. You can be diagnosed years later, as long as you can prove the condition started during service or was caused by service.

**How to use it:** If you were diagnosed with PTSD, sleep apnea, or any other condition AFTER service, cite this regulation to show that post-service diagnosis is valid for service connection.

### **38 CFR § 3.304** – Direct Service Connection

What it says: A disability that was incurred in or aggravated by service is service-connected.

**What it means:** If you got hurt, sick, or worse during service, it's service-connected. If a pre-existing condition got worse because of service, that's also service-connected.

**How to use it:** Cite this when filing your initial claim. "Per 38 CFR § 3.304, my [condition] was incurred during active duty service and is therefore service-connected."



## 38 CFR

# **PRESUMPTIVE & SECONDARY**

### **38 CFR § 3.310** – Disabilities That May Be Presumed to Be Service Connected

**What it says:** Certain chronic diseases (like hypertension, diabetes, arthritis) are presumed to be service-connected if they appear within one year of discharge, even if there's no record of them during service.

**What it means:** You don't need a service treatment record for certain conditions. If they showed up within a year of getting out, the VA presumes they started in service.

How to use it: If you have a chronic condition that appeared within a year of discharge, cite this regulation and the specific presumptive condition list in 38 CFR § 3.309.

### **38 CFR § 3.310(a)** – Secondary Service Connection

**What it says:** Disability that is proximately due to or the result of a service-connected disease or injury shall be service-connected.

**What it means:** If your service-connected condition CAUSED another condition, that second condition is also service-connected. Example: Service-connected knee injury causes lower back pain. The back pain is secondary service-connected.

How to use it: File for secondary conditions. "Per 38 CFR § 3.310(a), my [secondary condition] is caused by my service-connected [primary condition]."



## 38 CFR

# GENERALITIES

### **38 CFR § 3.321** – General Rating Considerations

**What it says:** The percentage ratings represent the average impairment in earning capacity resulting from diseases and injuries and their residual conditions.

**What it means:** Your rating is based on how much your condition affects your ability to work and function, not just the medical diagnosis.

**How to use it:** When arguing for a higher rating, focus on functional impairment—how your condition limits your daily life, work, and earning capacity.

### **38 CFR § 4.1** – General Policy in Rating

**What it says:** The rating schedule is primarily a guide in the evaluation of disability resulting from all types of diseases and injuries encountered as a result of or incident to military service.

**What it means:** The rating schedule is a GUIDE, not a strict rulebook. The VA has discretion to rate your condition based on the totality of your symptoms and limitations.

**How to use it:** If your symptoms don't fit neatly into one rating percentage, argue that your condition warrants a higher rating based on the totality of evidence.



## 38 CFR

# REASONABLE DOUBT

### 38 CFR § 4.3 – Resolution of Reasonable Doubt

**What it says:** When there is a question as to which of two evaluations shall be applied, the higher evaluation will be assigned if the disability picture more nearly approximates the criteria for that rating.

**What it means:** If you're between two rating percentages (say, 50% and 70%), and your symptoms are closer to 70%, the VA should give you 70%.

**How to use it:** Cite this when appealing a rating. "Per 38 CFR § 4.3, my symptoms more closely align with the 70% rating criteria, and I request the higher evaluation."

### 38 CFR § 4.7 – Evaluation of Evidence

**What it says:** Where there is a question as to which of two evaluations shall be applied, the higher evaluation will be assigned if the disability picture more nearly approximates the criteria required for that rating.

**What it means:** The VA must consider ALL evidence—medical records, lay statements, buddy statements, personal testimony—not just medical opinions.

**How to use it:** If the VA denied your claim based solely on a C&P exam and ignored your personal statement or buddy statements, cite this regulation in your appeal.



# 38 CFR

## SCHEDULE

### 38 CFR Part 4 – Schedule for Rating Disabilities

**What it says:** This is the entire rating schedule. Every condition, every body system, every percentage rating is listed here.

**What it means:** This is THE source for understanding how your condition is rated. If you have PTSD, look up 38 CFR § 4.130. If you have a knee injury, look up 38 CFR § 4.71a.

**How to use it:** Before you file a claim or appeal, look up your condition in Part 4. Know the exact criteria for each rating percentage. Match your symptoms to the criteria. Cite the specific regulation in your claim.

### How to Read the CFR (Without Losing Your Mind)

The CFR is written in legal language. It's dense. It's boring. It's confusing. But you can do this.

### Here's how:

#### Step 1: Find the Right Section

- Go to [www.ecfr.gov](http://www.ecfr.gov) (Electronic Code of Federal Regulations)
- Search "Title 38" or "38 CFR [your condition]"
- Use the table of contents to navigate to the section you need

#### Step 2: Read Slowly and Carefully

- Don't skim. Every word matters.
- If you don't understand a term, look it up in the VA's definitions (38 CFR § 3.1)
- Read the section multiple times until it makes sense



# 38 CFR

## **SCHEDULE & USE**

### **Here's how, continued:**

#### **Step 3: Take Notes**

- Write down the regulation number (e.g., 38 CFR § 3.102)
- Summarize what it says in plain English
- Note how it applies to YOUR claim

#### **Step 4: Cross-Reference**

- Many CFR sections reference other sections. Follow those links.
- Example: 38 CFR § 3.310 references 38 CFR § 3.309. Read both.

#### **Step 5: Use It in Your Claim**

- Cite the specific regulation in your personal statement, appeal, or NOD
- Example: "Per 38 CFR § 3.102, the evidence supports a finding in my favor under the reasonable doubt standard."

### **How to Use the CFR in Your Claim**

#### **In Your Initial Claim:**

- Cite the regulation that establishes service connection (38 CFR § 3.303 or § 3.304)
- Cite the rating schedule for your condition (38 CFR Part 4)
- Example: "Per 38 CFR § 3.304, my PTSD was incurred during active duty service. Per 38 CFR § 4.130, my symptoms meet the criteria for a 70% rating."

#### **In Your Personal Statement:**

- Reference the specific rating criteria and explain how your symptoms match
- Example: "Per 38 CFR § 4.130, a 70% rating for PTSD includes 'occupational and social impairment with deficiencies in most areas.' My condition causes [specific examples]."



# 38 CFR

## **CLAIM USAGE**

### **How to Use the CFR in Your Claim, continued:**

#### **In Your Appeal:**

- Cite the regulation the VA violated or misapplied
- Example: "The VA failed to apply the benefit of the doubt standard per 38 CFR § 3.102. The evidence is at least evenly balanced, and I am entitled to a favorable finding."

#### **In Your Higher-Level Review or Board Appeal:**

- Point out errors in the VA's application of the CFR
- Example: "The rater incorrectly applied 38 CFR § 4.71a by evaluating my knee condition under the wrong diagnostic code. The correct code is 5257, which supports a 30% rating."

#### **SPECIAL NOTE: Totality of Evidence**

The VA can't cherry-pick. They're required to look at ALL the evidence—your medical records, your personal statement, your buddy statements, your C&P exam, your work history, your daily limitations—everything. If they ignore evidence that supports your claim and only focus on what hurts your case, **they're violating 38 CFR § 4.7**. Your job is to make sure they consider the full picture. You can cite the totality of evidence in your claim or appeal to force the VA to look at the whole story.

#### **Your CFR Action Plan - Spoon feed this information the VA**

- Step 1: Identify Your Conditions
- Step 2: Find the Relevant CFR Sections
- Step 3: Read the Rating Criteria
- Step 4: Match Your Symptoms to the Criteria
- Step 5: Cite the CFR in Your Claim
- Step 6: Hold the VA Accountable





## 38 CFR

# PROTECT YOUR RIGHTS

**These are the section in the 38 CFR that protect YOU—if the VA won't tell you about them, Sarge will!**

### **38 CFR § 3.159 – Duty to Assist**

**What it says:** The VA has a duty to assist you in developing your claim. They must help you get evidence, schedule exams, and obtain records.

**What it means:**

**How to use it:** If the VA denied your claim without helping you, cite this in your appeal. "The VA failed to fulfill its duty to assist per 38 CFR § 3.159."

### **38 CFR § 3.103(a) – Procedural Due Process**

**What it says:** The VA must provide you with notice and an opportunity to respond before making an adverse decision.

**What it means:** The VA can't just deny your claim without telling you why or giving you a chance to submit more evidence.

**How to use it:** If the VA denied your claim without proper notice or explanation, cite this regulation in your appeal.

### **38 CFR § 20.1304 – Rule of Prejudicial Error**

**What it says:** The Board will not reverse a decision unless the error materially affected the outcome.

**What it means:** If the VA made a mistake, but it didn't change the outcome, they don't have to fix it. BUT if the error DID affect your rating, they must correct it.

**How to use it:** When appealing to the Board, identify specific errors that materially affected your rating.



38 CFR

## **39 CFR IS YOUR BATTLE PLAN**

**THE CFR IS NOT OPTIONAL READING.**

**THE VA KNOWS THIS REGULATION - INSIDE AND OUT. THEY USE IT TO DENY CLAIMS, REDUCE RATINGS, AND DELAY DECISIONS. YOUR JOB IS TO KNOW IT TOO, JUST AS WELL—AND USE IT TO FIGHT BACK.**

**YOU PROBABLY DON'T NEED A LAWYER; YOU JUST NEED TO BE IN THE KNOW. THAT IS WHERE OPERATION FUBAR AND THIS WORKBOOK COME INTO PLAY - AS PART OF YOUR TEAM, E.G. BOOTS ON THE GROUND. READ THE SECTIONS THAT APPLY TO YOUR CLAIM. CITE THEM IN YOUR STATEMENTS. PRINT OFF A COPY OF IT! USE IT TO HOLD THE VA ACCOUNTABLE.**

**THE RULES ARE WRITTEN - LEARN HOW TO PLAY THE GAME.**



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# Nexus Letters

## CHAPTER 9

### *Your Doctor Connects the Dots!*

#### **BLUF (Bottom Line Up Front):**

A nexus letter is a medical opinion from a qualified healthcare provider that connects your current disability to your military service. It's the bridge between "I have this condition" and "This condition is service-connected." Without a nexus letter, the VA can deny your claim even if you have a legitimate service-connected disability. This chapter shows you what a nexus letter is, why you need one, how to get one, and what it must say to win your claim.

#### **What is a Nexus Letter?**

A nexus letter is a written medical opinion from a doctor, nurse practitioner, physician assistant, psychologist, or other qualified healthcare provider that states—based on medical evidence and professional judgment—that your current condition is "at least as likely as not" (51% or more) related to your military service.

Think of it like this: You're telling the VA, "I hurt my back in service, and now I have chronic back pain." The VA says, "Prove it." A nexus letter is your proof. It's a medical professional saying, "Yes, based on the evidence, this veteran's back pain is connected to their military service."

#### **The nexus letter does three things:**

1. Confirms your diagnosis (You have X condition)
2. Establishes the connection (X condition is related to your military service)
3. Provides medical reasoning (Here's why, based on medical evidence and professional opinion)



## YOUR GOLDEN TICKET

**Without a nexus letter,** you're asking the VA to connect the dots themselves. And guess what? They won't. They'll deny your claim and say "insufficient evidence" or "no medical nexus established."

**You take care of you by connecting the dots, and spoon feeding it to the VA!**

### **The Strategy: You Write It, They Sign It**

Listen up, because this is the part nobody tells you. You know what 38 CFR says about your ailment or injury. You know your service history. You know your symptoms. You know the connection between your military service and your current condition. Your doctor doesn't have the full scope that you do. Help them out!

**Here's the reality:** Writing a nexus letter is administrative work. It's time-consuming. It's not billable. Most doctors don't get paid for it, and even if they do, it's not worth their hourly rate. They're busy. They have patients to see. They don't have time to research VA regulations, review your entire service record, and craft a legally sound medical opinion from scratch.

**So here's what you do:** You draft it for them! You know what it needs to say from 38 CFR. You know the magic phrase, "more likely than not". So what if you don't have formal training to write one! Go off the examples in Operation FUBAR or the [boots2benefits.com](https://boots2benefits.com) website!



## **PART OF A TEAM**

### **Draft it yourself, continued:**

You are your best advocate. This is a team effort and you are an essential part of this team.

You are the team player that knows what the VA needs to see. You know what 38 CFR § 3.303, § 3.304, and § 3.310 require. You know the "at least as likely as not" standard. You know your timeline, your injuries, your symptoms, and your limitations better than anyone.

**Draft the nexus letter yourself.** Write it in the third person. Use medical terminology. Cite your service records. You know what it needs to say from your 38 CFR research. You know the magic phrase, "more likely than not". Get the doctor's information - often found on their website, e.g. (credentials, diagnosis, service connection statement, medical reasoning, signature line).

**So what if you don't have formal training to write one!** Go off the examples in Operation FUBAR or the boots2benefits.com website! Get the doctor's information - often found on their website, e.g. (credentials, diagnosis, service connection statement, medical reasoning, signature line).

**Don't worry if it is not perfect** - it is a template for the doctor to use so they don't have to recreate the wheel. AND you will encourage the doctor to edit the letter to suit.



## TEAM PLAYER COMMUNICATION

**Send the letter to your doctor with a message:**

"Dr. [Name],

*Good morning. Thank you for your continued care for my [condition]. I'm filing a VA disability claim for [condition], and I need a nexus letter to establish the connection between my condition and my military service. I know how busy you are so I've drafted a letter based on my medical records, service history, and the federal regulation 38 CFR for your convenience and to save you time.*

*Please review this draft and **feel free to edit it in any way** to fit your medical opinion. Once you are comfortable that your medical opinion is dictated, please put it on your letterhead, sign it, and date it. If you need to make changes or add anything, that's fine—it must accurately reflect your medical opinion.*

*Thank you for your help. I really appreciate it."*

**What happens next, there are several options:**

**Most doctors will appreciate this.** You've done the heavy lifting. You've made it easy for them. All they have to do is review it, make any necessary edits, print it on their letterhead, and sign it.

**Some doctors will edit it.** That's great. That's actually BETTER, because it shows the opinion is genuinely theirs, not just something you wrote and they rubber-stamped.



# Nexus Letters

## **END RESULTS**

**Some doctors will refuse.** If they're uncomfortable signing something you wrote, respect that. Ask if they'd be willing to write their own version, or find another provider who will.

**But here's the key:** You're not asking them to lie. You're not asking them to say something they don't believe. You're asking them to review a draft that accurately reflects your medical history and service connection, and to sign it *if* they agree with it.

**This is not unethical. This is not fraud.**

**This is you being your own advocate and making it easier for your doctor to help you. The VA uses this strategy, too.**

### **Why this works:**

- ✓ Professional and respectful tone ("Good morning," "Thank you for your continued care")
- ✓ Acknowledges the doctor's time ("I know how busy you are")
- ✓ Shows you did your homework ("based on my medical records, service history, and the federal regulation 38 CFR")
- ✓ Gives the doctor control ("feel free to edit," "it must accurately reflect your medical opinion")
- ✓ Makes it easy for them ("for your convenience and to save you time")
- ✓ Sets the right expectation ("Once you are comfortable that your medical opinion is accurately represented")

**Get a nexus letter for every ailment and injury.**





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# Buddy Statements

## CHAPTER 10

### *They Were There Too!*

#### **BLUF (Bottom Line Up Front)**

A buddy statement is a written account from someone who served with you, witnessed your service-connected condition, and can testify to what they saw. It is not just other service members but people in your life, e.g. chaplain, confidant, employer, and spouse. It's lay evidence—not a medical opinion, but eyewitness testimony from someone who knows you, your service, and your condition. Buddy statements are often MORE powerful than medical records because they come from people who were actually there from the time of the incident.

#### **What is a Buddy Statement?**

A buddy statement is a written statement from a fellow service member (or sometimes a family member, employer, or friend) who witnessed your service-connected condition and can attest to its existence, severity, and impact on your life.

**Think of it like this:** You're telling the VA about your PTSD. Your medical records show you have PTSD. But a buddy statement says, "I served with this veteran. I saw their hypervigilance in action. I watched them struggle with nightmares. I witnessed how this condition affected them during service and continues to affect them today."

**That's powerful.** That's credible. That's the kind of evidence the VA can't easily dismiss.



# Buddy Statements

## SHARED MEMORIES

### A buddy statement does three things:

1. Confirms your condition existed (I witnessed this veteran's [symptom/condition])
2. Establishes the timeline (This started during service and continues today)
3. Provides specific examples (Here's what I saw, when I saw it, and how it affected them)

**Buddy statements are lay evidence.** They're not medical opinions. They're not diagnoses. They're eyewitness accounts from people who know you and your service. And per 38 CFR § 4.7, the VA is REQUIRED to consider lay evidence in your claim.

**You have two options for buddy statements:** VA form or a regular piece of paper with the signature notarized.

### **Option 1:** VA Form 21-0781a (Statement in Support of Claim)

The VA has an official form for buddy statements: VA Form 21-0781a – Statement in Support of Claim.

- **What it is:** A fill-in-the-blank form designed specifically for lay evidence statements. It includes sections for:

### **Option 2:** Notarized Letter

A notarized letter is a written statement from the buddy that's been signed in front of a notary public. The notary verifies the person's identity and witnesses their signature. This is a comfortable alternative for many civilians.



# Buddy Statements

## WHO TO ASK?

Anyone who has direct knowledge of your service, your condition, or your symptoms can write a buddy statement.

This includes:

- **Fellow service members** – People from your unit, your platoon, your squad, your battalion
- **Officers or NCOs** – People who supervised you or worked with you
- **Medics or Corpsmen** – People who treated you in service
- **Spouse or romantic partner** – Someone who has witnessed your symptoms, limitations, and how your condition affects your daily life and your relationship
- **Family members** – Parents, siblings, children who witnessed your condition before and after service and can attest to changes in your behavior, mood, or functioning
- **Chaplain** – Military or civilian chaplain who counseled you about service-related trauma or struggles
- **Confidant** – Anyone you talked to about what happened during service (a friend, mentor, trusted person who can testify that you disclosed your experience to them)
- **Employers** – People who worked with you after service and saw how your condition affects your work performance and ability to function in the workplace
- **Friends** – People who know you well and have witnessed your symptoms and limitations over time
- **Mental health providers** – Therapists or counselors who have treated you (though this is more like a medical opinion than a buddy statement)



# Buddy Statements

## WHO WRITES ONE?

### The person does NOT need to:

- Be a medical professional
- Have formal training
- Be a lawyer
- Know VA regulations
- Write in perfect English
- Have served in the military (family members, spouses, employers, and chaplains don't need military experience)

### The person DOES need to:

- Know you personally
- Have direct knowledge of your service, your condition, or your symptoms
- Be willing to put their statement in writing
- Be credible (someone the VA will believe)
- Be able to provide specific examples and details

## Why These Different Types of Buddy Statements Matter

**Fellow service members** provide credibility about what happened during service and how your condition manifested in a military setting.

**Spouses and romantic partners** provide powerful evidence about how your condition affects your daily life, your relationships, your sleep, your mood, and your ability to function at home. They see your worst days. They see the real impact.



# Buddy Statements

## WORTH IT'S WEIGHT IN GOLD

**Family members** (parents, siblings, children) can testify to how you've changed since service. They knew you before the military. They can say, "This is not who he was before deployment." That's powerful evidence of service connection.

**Chaplains** provide credibility about your emotional and spiritual struggles during service. If you confided in a chaplain about trauma or moral injury, their statement carries weight because chaplains are trained to listen and remember these conversations.

**Confidants** (trusted friends, mentors, people you talked to about what happened) can testify that you disclosed your service-related trauma to them. This establishes the timeline and the severity of your condition. "He told me about what happened in [location]. He was clearly struggling with it."

**Employers** provide evidence about how your condition affects your ability to work, your attendance, your performance, and your interactions with coworkers. This is functional impairment evidence—exactly what the VA uses to determine ratings.

**The bottom line:** The VA needs to see that your condition is REAL and that it affects your LIFE. Buddy statements from different people in different contexts (military, home, work, relationships) paint a complete picture that the VA can't ignore.



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# VA Decision Letter

## CHAPTER 11

### *The Verdict is In!*

#### **BLUF (Bottom Line Up Front)**

The VA Decision Letter is the official document that tells you whether your disability claim was approved or denied, what rating you received, what your effective date is, and what your monthly benefit amount will be. This letter is YOUR PROOF that the VA made a decision. It's also your roadmap for what happens next—whether you celebrate your approval or file an appeal. This chapter shows you how to read, understand, and use your Decision Letter to your advantage.

#### **What is the VA Decision Letter?**

The VA Decision Letter is your GOLDEN TICKET. Whether you got approved or denied, this letter is a wealth of information. This is NOT a document you skim. This is NOT a document you file away and forget about. This is THE document that determines your future—your benefits, your rating, your appeal strategy, everything.\*\*

**Think of it like this:** You filed a claim. You submitted evidence. You waited. Now the VA has made a decision and they're telling you EXACTLY what it is—in writing, on official VA letterhead, with all the details you need to know. This letter is your proof. This letter is your roadmap. This letter is your ammunition for whatever comes next.

#### **The Decision Letter includes:**

1. Your claim information (Your name, SSN, claim number, date filed)
2. The decision (Approved or denied for each condition you claimed)





# VA Decision Letter

## IS IT A CELEBRATION OR FIGHT?

### What is the VA Decision Letter?

3. Your rating (10%, 30%, 50%, 70%, 100%, or 0%)
4. Your effective date (When your benefits start)
5. Your monthly benefit amount (How much you'll get paid)
6. The reasons for the decision (Why the VA approved or denied your claim)
7. Your appeal rights (How to appeal if you disagree)

**This letter is CRITICAL.** It's not just information—it's official documentation. It's proof. It's your starting point for everything that comes next.

### The Decision Letter can give four choices:

**Approved:** The VA approved your claim for service connection. You're getting a rating and monthly benefits.

**Denied:** The VA denied your claim. They found insufficient evidence of service connection. You have the right to appeal.

**Deferred:** The VA needs more information before making a decision. They'll schedule a C&P exam or request additional evidence. You'll get another Decision Letter once they have what they need.

**Mixed Decision:** The VA approved some conditions and denied others. You might get a 30% rating for one condition and a denial for another. This is common.



# VA Decision Letter

## EXTRACTING THE INTEL

**Your Decision Letter will have several sections. Here's what to look for:**

### **Section 1: Your Information**

- Your name, SSN, VA file number, claim number
- Make sure this is correct. If it's wrong, contact the VA immediately.

### **Section 2: The Decision**

- This is the BIG ONE. It will say something like:
  - "We've approved your claim for service connection for PTSD"
  - "We've denied your claim for service connection for back pain"
  - "We've assigned you a rating of 50% for PTSD"

### **Section 3: Effective Date**

- The date your benefits start
- Usually the date of your intent to file or C&P exam
- This determines when you start getting paid

### **Section 4: Monthly Benefit Amount**

- How much you'll get paid each month
- Based on your rating and the current VA benefit rates

### **Section 5: Reasons for the Decision**

- This is CRITICAL. The VA will explain WHY they made this decision.
- They'll cite the evidence they considered (or didn't consider)
- They'll cite the regulations they applied
- This is where you'll find errors if you need to appeal

### **Section 6: Appeal Rights**

- Your options if you disagree with the decision
- Deadlines for filing an appeal
- Instructions on how to appeal



# VA Decision Letter

## FINDING THE GOLD

**The reasons section** is the part of your Decision Letter where the VA explains their logic. It's usually several paragraphs (or sometimes several pages) that walk through:

- What conditions you claimed
- What evidence they reviewed
- What regulations they applied
- Why they approved or denied each condition
- What they found convincing
- What they rejected

**This is NOT fluff.** This is not the VA being nice and explaining themselves. This is the **VA's LEGAL JUSTIFICATION** for their decision. And if they made a mistake, it will be visible here.

**Think of it like this:** The VA is telling you their entire thought process. They're showing you their work. And if their work is wrong—if they misapplied a regulation, ignored evidence, or made a factual error—you'll see it in the reasons section.

**Where to find it?** It's usually in the middle or toward the end of the Decision Letter. After they tell you the decision, they explain why. It might be long. Some reasons sections are a few paragraphs. Some are several pages. Read all of it. Don't skip ahead.

It might reference other documents. The VA might say, "See attached Rating Decision" or "See C-File." Make sure you have all the attachments. The full reasons might be in a separate document.



# VA Decision Letter

## **FINDING THE GOLD**

### **The reasons section, continued:**

**If you need it, it's your roadmap for appeal.** If you got denied and you want to appeal, you need to know WHY you got denied. The reasons section tells you. Once you know why, you know what to fix.

**Outlines** what the VA found convincing. If you got approved, the reasons section tells you what evidence the VA believed. This is GOLD because it shows you what works. If you file for secondary conditions or a rating increase, you'll use the same strategy.

**Shows what the VA ignored.** If you submitted evidence and the VA didn't mention it in the reasons section, that's a problem. They're supposed to consider ALL evidence. If they ignored yours, that's grounds for appeal.

**What regulations the VA applied.** If the VA cited the wrong regulation, or misapplied a regulation, you can call them out on it in your appeal.

**This is where the VA makes mistakes.** The VA is not infallible. They make errors. They misread evidence. They apply the wrong standard. They ignore facts. The reasons section is where these mistakes show up. These *are* human beings applying the rules & regulations. We are all human but this is your ammunition to get back into the fight.

**Because it's your evidence of error.** If you appeal, you'll cite the reasons section and point out where the VA went wrong. You'll say, "The VA stated [X], but that's incorrect because [Y]."



# VA Decision Letter

## RED FLAGS & INTEL

### ▶ Red Flags to Look For

- ▶ "Insufficient Evidence"
- ▶ "No Nexus Established"
- ▶ They Ignored Evidence You Submitted
- ▶ They Misapplied a Regulation
- ▶ They Didn't Apply the Benefit of the Doubt
- ▶ They Made a Factual Error

### ✓ How to Extract the Gold

1. Read the Reasons Section Carefully
2. Make a List (evidence considered, ignored, regulations, what worked, what didn't, factual findings, errors)
3. Check Their Work
4. Identify Errors
5. Plan Your Appeal (If Needed)
6. Plan Your Next Move (If Approved)

### ✓ Finding the Gold!

The reasons section is dense, legal, and buried in bureaucratic language—but the gold is there, and your mission is to find it. The VA is counting on you to skim it, accept the decision, and walk away. Don't.

**Your mission:** Extract every piece of actionable intelligence. Read it multiple times. Highlight key passages. Make a list of evidence considered, regulations cited, factual findings, and errors. Look up every regulation they cited. Verify every fact. Check their work. If they misapplied a regulation, ignored evidence, or made a factual mistake, you'll find it here. The VA is showing you their entire process—if their work is wrong, you'll see it.



**PAGE 102 OF 141**



# Appeals

## CHAPTER 12

### *It's Not Over Until the Fat Lady Sings!*

#### **BLUF (Bottom Line Up Front)**

If the VA denied your claim or gave you a lower rating than you deserve, you have the right to appeal. **It's o.k. to tell them you do not agree.** Appeals are complex, but you're NOT alone.

#### **You have THREE appeal options**

1. Notice of Disagreement (NOD),
2. Higher-Level Review (HLR), and
3. Board of Veterans' Appeals (BVA)

\*Each with different timelines and strategies.

#### **Time Constraints and Deadlines (CRITICAL)**

ONE YEAR from your Decision Letter date is your deadline to file a Notice of Disagreement.

**This is NOT a suggestion. This is a LEGAL DEADLINE.**

This workbook shows you how to use your homework (your database, your 38 CFR citations, your buddy statements, your nexus letters) to build a winning appeal, and tells you when and how to seek professional help. The fight is not over. You have options. You have time. You have ammunition. Now it's time to use it.

#### **Why Appeals Matter**

Because a denial is NOT final. The VA made a decision, but that doesn't mean it's the right decision. You have the legal right to challenge it. Many veterans win on appeal. This can be you.



# Appeals

## WHY IT MATTERS

**Because you have TIME.** You don't have to appeal immediately. You have one year from the date of your Decision Letter to file a Notice of Disagreement. That gives you time to gather more evidence, get more buddy statements, get a nexus letter, and build a stronger case.

**Because your homework PAYS OFF** here. Everything you did in the previous chapters—building your database, learning the CFR, getting buddy statements, getting a nexus letter—all of that becomes your AMMUNITION in your appeal. This is where it all comes together.

**Because the VA makes mistakes.** The VA denies claims on technicalities. They ignore evidence. They misapply regulations. They fail to apply the benefit of the doubt. If they made a mistake, an appeal can fix it.

**Because you deserve what you earned.** You served your country. You sacrificed. You earned your benefits. If the VA got it wrong, you have the right to fight back.

**Understand your three appeal options** (NOD, HLR, BVA), choose which option is best for your situation, gather your ammunition (your database, your CFR citations, your buddy statements, your nexus letters, your evidence), and file your appeal before the one-year deadline.

**Seek help if you need it:** Reach out to a VSO, attorney, or representative. Be patient. You can win.





# Appeals

## **REALITY CHECK**

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**Appeals take TIME.** Don't expect a quick decision. HLR can take 4-6 months. BVA can take 1-2 years or longer. Be patient.

**Appeals require EVIDENCE.** You can't just say "I disagree." You have to show WHY you disagree. You have to cite regulations, evidence, and facts.

**Appeals require STRATEGY.** You have to know what the VA got wrong and how to prove it. This chapter shows you how.

**Appeals are WINNABLE.** Many veterans win on appeal. If the VA made a mistake, you can prove it. If you have strong evidence, you can win.

**You're not alone.** If you need help, ask for it. VSOs, attorneys, and representatives are there to help you.

*The fight is not over. The fat lady hasn't sung yet. You have options. You have time. You have ammunition. Now it's time to use it.*



**PAGE 106 OF 141**



# Military Sexual Trauma (MST)

## CHAPTER 13

### Breaking the Silence!

**This section may bring up intense memories. Take breaks, skip or come back. Your safety comes first.**

#### **BLUF (Bottom Line Up Front)**

Military Sexual Trauma (MST) is sexual assault or harassment that occurs during military service. It happens to men AND women. It is NOT your fault. You do NOT have to report it to file a VA claim. You do NOT need a police report, a conviction, or the perpetrator's name. You control your narrative. You decide what to share and with whom. The VA has a process specifically for MST claims, and evidence requirements are different from other disability claims. This chapter walks you through filing an MST claim, gathering evidence, understanding secondary conditions, accessing VA resources, protecting your privacy, and appealing denials. You are not alone. Your story matters. It's time to break the silence.

*(Yes, Sarge has successfully help a male service member apply for and receive a disability rating for unreported MST.)*

#### **What is MST?**

**Military Sexual Trauma (MST) is sexual assault or harassment that occurs during military service.**

#### **Sexual assault includes:**

- Rape
- Attempted rape
- Unwanted sexual contact (touching, groping, fondling)
- Forced sexual activity
- Sexual coercion



# Military Sexual Trauma (MST)

## **NO ONE IS IMMUNE**

**What is MST?** Military Sexual Trauma (MST) is sexual assault or harassment that occurs during military service.

**Sexual harassment includes:**

- Unwanted sexual comments, jokes, or advances
- Pressure for sexual favors
- Retaliation for refusing sexual advances
- Creating a hostile environment based on sex

**MST happens to men AND women.** The VA estimates that 1 in 4 women and 1 in 100 men experience MST during service. But these numbers are likely underestimated because many survivors don't report. Did you experience a hazing that crosses the line into sexual perverted, sexual coercion, assault by superior officers, peer assault, etc. that made you feel trapped or powerless? Some don't even recognize what happened as MST.

**MST is NOT your fault.** You did not cause it. You did not deserve it. You are not to blame. The person who committed the assault is responsible. Not you. Not ever.

### **"It Has to Be Reported"**

**THIS IS A LIE. You do NOT have to report MST to file a VA claim.**

You did not have to file a police report or press charges. You did not have to tell anyone (family, command),

Here's **what you WILL have to do:** Tell the VA. That's it. And here's the critical part: The VA cannot repeat or tell anyone else.



# Military Sexual Trauma (MST)

## **THE BIG MYTH**

---

### **"It Has to Be Reported"**

**THIS IS A LIE. You do NOT have to report MST to file a VA claim.**

#### **You do NOT have to:**

- Go to law enforcement
- File a police report
- Press charges
- Name the perpetrator
- Tell your command
- Tell your family
- Tell anyone except the VA

You control your narrative. You decide what to share and with whom. You decide when to tell your story. You decide how much detail to include. You decide who knows.

#### **Many survivors don't report because they fear:**

- Not being believed
- Retaliation
- Shame or judgment
- Losing their military career
- Being blamed
- Having their story used against them

These fears are REAL and VALID. But they should NOT stop you from filing a VA claim and getting the benefits and support you deserve.



# Military Sexual Trauma (MST)

## **THE BIG MYTH**

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These fears are REAL and VALID. But they should NOT stop you from filing a VA claim and getting the benefits and support you deserve.



# Military Sexual Trauma (MST)

## HOW TO FILE A CLAIM

### How to File an MST Claim

**Filing an MST claim is similar** to filing any other VA disability claim, but with some important differences.

### Step 1: Understand What You're Claiming

#### You can file a claim for:

- MST itself (as the stressor event)
- PTSD from MST (the most common secondary condition)
- Other conditions caused by MST (depression, anxiety, substance abuse, sleep disorders, etc.)

### Step 2: You Don't Need a Police Report

This is CRITICAL. Many survivors believe they need a police report to file an MST claim. This is FALSE.

#### You do NOT need:

- A police report
- A conviction
- Criminal charges
- The perpetrator's name
- Witnesses to the assault

#### What you DO need:

- Your personal statement describing what happened
- Evidence that you experienced MST
- Evidence that the MST caused your current condition (PTSD, depression, etc.)



# Military Sexual Trauma (MST)

## **FILING A CLAIM**

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### **Step 3: File Your Claim**

#### **You can file an MST claim using:**

- VA Form 21-0781 (Statement in Support of Claim for PTSD)
- VA Form 21-0781a (Statement in Support of Claim for PTSD - Secondary Condition)
- Online at VA.gov (using the VA disability benefits application)
- In person at your local VA office
- By mail

#### **The form asks:**

- When did the MST occur?
- Where did it occur?
- What happened?
- How has it affected you?

You can write as much or as little as you want. There's no word limit. Some veterans write a few paragraphs. Some write several pages. Tell your story in your own words.

#### **Evidence for MST Claims**

The VA recognizes that MST evidence is different from other disability evidence. You may not have medical records from the time of the assault. You may not have a police report. You may not have witnesses. That's okay. The VA has a special standard for MST evidence.

##### **1. Your Personal Statement (Most Important)**

Your personal statement is the MOST IMPORTANT piece of evidence in an MST claim.





# Military Sexual Trauma (MST)

## EVIDENCE

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### **Evidence, continued:**

#### **1. Your Personal Statement (Most Important)**

Your personal statement is the MOST IMPORTANT piece of evidence in an MST claim.

#### **Your personal statement should include:**

- When it happened (specific date if possible, or approximate timeframe)
- Where it happened (on base, off base, during deployment, etc.)
- Who was involved (the perpetrator's name if you know it, or description if you don't)
- What happened (describe the assault or harassment in your own words)
- How it affected you (emotionally, physically, mentally, behaviorally)
- How it continues to affect you (current symptoms, struggles, impact on your life)
- Any details you remember (what was said, what you felt, what you did afterward)

#### **Your personal statement does NOT have to be:**

- Perfectly written
- Grammatically correct
- Detailed or graphic
- Witnessed or corroborated
- Reported to anyone



# Military Sexual Trauma (MST)

## EVIDENCE

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### **Evidence, continued:**

Your personal statement CAN be:

- Emotional
- Painful
- Difficult to write
- Vague about details you don't remember
- Focused on how it affected you

Write it in your own words. Tell your story. The VA will listen.

### **2. Buddy Statements**

A buddy statement from someone who knew you during or after the MST can be powerful evidence.

#### **Who can write a buddy statement:**

- Fellow service members who knew you
- People who noticed changes in your behavior
- People who know about the MST (even if they didn't witness it)
- People who can testify to your symptoms (sleep problems, anxiety, depression, substance use, etc.)

#### **What the buddy statement should include:**

- Their relationship to you
- When they knew you
- What they observed about your behavior or condition
- Specific examples of changes they noticed
- How the MST affected you (if they know about it)
- Their credibility (how they know you, how long they've known you)



# Military Sexual Trauma (MST)

## EVIDENCE

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### **Evidence, continued:**

Example: "I served with [Veteran Name] from [dates]. After [MST event], I noticed significant changes in [his/her] behavior. [He/She] became withdrawn, had difficulty sleeping, and started drinking heavily. [He/She] told me about the sexual assault and how it was affecting [him/her]. I can attest that [his/her] current struggles with PTSD and anxiety are directly related to this trauma."

### **3. VA Medical Records**

If you've received VA mental health treatment, your records can support your MST claim.

#### **Look for:**

- Counseling or therapy notes mentioning MST or trauma
- Diagnoses of PTSD, depression, anxiety, or other conditions
- Notes about your symptoms (nightmares, flashbacks, hypervigilance, etc.)
- Any mention of military service trauma

#### **Even if your records don't explicitly mention MST, they can show:**

- You have PTSD or other trauma-related conditions
- Your symptoms are consistent with MST
- You've been in treatment for trauma

Request your VA medical records from your local VA facility or online at VA.gov.



# Military Sexual Trauma (MST)

## EVIDENCE

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### 4. Behavioral Markers

Changes in your behavior after the MST can be evidence of the trauma.

#### **Behavioral markers include:**

- Increased substance use or alcohol abuse
- Changes in relationships (isolation, difficulty trusting)
- Changes in sleep patterns (nightmares, insomnia)
- Increased anger or irritability
- Avoidance of certain places or people
- Changes in sexual function or intimacy
- Self-harm or suicidal thoughts
- Changes in work performance or military performance

#### **How to document behavioral markers:**

- Write about specific changes you noticed in yourself
- Include dates or timeframes if possible
- Explain how these changes relate to the MST
- Get buddy statements about behavioral changes they observed

### 5. Corroborating Evidence

Corroborating evidence supports your claim that the MST occurred.

#### **Corroborating evidence can include:**

- Emails, text messages, or letters mentioning the assault or harassment
- Journal entries or personal notes from the time
- Medical records from civilian providers (if you sought treatment)
- Testimony from people who know about the MST



# Military Sexual Trauma (MST)

## EVIDENCE

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### **Corroborating evidence can include:**

- Records showing you reported the MST to someone (chaplain, medic, trusted officer, etc.)
- Military records showing you requested a transfer or change of duty
- Records of any disciplinary action against the perpetrator
- Statements from others who experienced similar assault by the same perpetrator

You **do NOT** need corroboration to file an MST claim. But if you have it, it strengthens your case.

### **6. What You DON'T Need**

#### **You do NOT need:**

- A police report
- Criminal charges
- A conviction
- The perpetrator's name (though it helps)
- Witnesses to the assault
- Medical records from the time of the assault
- A formal report to your command

The **VA understands** that MST survivors often don't report, don't seek immediate medical care, and don't have official documentation. That's okay.



# Military Sexual Trauma (MST)

## SECONDARY CONDITIONS

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### Secondary Conditions from MST

**MST often causes other conditions.** You can file claims for these secondary conditions.

#### PTSD from MST

PTSD (Post-Traumatic Stress Disorder) is the most common condition caused by MST.

#### PTSD symptoms include:

- Intrusive thoughts or memories of the trauma
- Nightmares or flashbacks
- Avoidance of reminders of the trauma
- Negative changes in thinking or mood
- Changes in arousal or reactivity (hypervigilance, anger, recklessness)

#### To file a PTSD claim from MST:

- Use VA Form 21-0781 (Statement in Support of Claim for PTSD)
- Describe the MST event
- Describe your PTSD symptoms
- Explain how the MST caused your PTSD

**The VA has a special standard** for PTSD from MST. You do NOT have to prove that the MST "stressor" is accurate. The VA recognizes that trauma memories can be fragmented or unclear. Your personal account is enough.



# Military Sexual Trauma (MST)

## SECONDARY CONDITIONS

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**Depression is common after MST.**

**Depression symptoms include:**

- Persistent sad mood
- Loss of interest in activities
- Changes in appetite or sleep
- Fatigue or low energy
- Feelings of worthlessness or guilt
- Difficulty concentrating
- Thoughts of death or suicide

**To file a depression claim from MST:**

- Describe how the MST caused your depression
- Describe your current depression symptoms
- Get a nexus letter from a provider linking depression to MST
- Include buddy statements about mood changes

**Anxiety is common after MST.**

**Anxiety symptoms include:**

- Excessive worry or fear
- Panic attacks
- Avoidance of certain situations
- Physical symptoms (rapid heartbeat, sweating, trembling)
- Difficulty sleeping or concentrating

**To file an anxiety claim from MST:**

- Describe how the MST caused your anxiety
- Describe your current anxiety symptoms
- Get a nexus letter from a provider linking anxiety to MST
- Include buddy statements about anxiety symptoms



# Military Sexual Trauma (MST)

## SECONDARY CONDITIONS

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### **Substance Abuse**

Some MST survivors turn to alcohol or drugs to cope with trauma.

Substance abuse can be a secondary condition of MST.

### **To file a substance abuse claim from MST:**

- Describe how the MST caused you to use substances
- Describe your current substance use
- Get a nexus letter from a provider linking substance abuse to MST
- Include buddy statements about substance use changes

### **Other Secondary Conditions**

Other conditions that can result from MST include:

- Sleep disorders (nightmares, insomnia)
- Chronic pain
- Sexual dysfunction
- Eating disorders
- Self-harm behaviors
- Suicidal ideation

### **For each secondary condition:**

- File a separate claim
- Describe how MST caused the condition
- Get a nexus letter from a provider
- Include supporting evidence (medical records, buddy statements, personal statement)





# Military Sexual Trauma (MST)

## HELPFUL RESOURCES

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**VA MST Coordinators & Resources:** Every VA medical facility has an MST Coordinator.

### **MST Coordinators can:**

- Help you understand your MST claim options
- Connect you with counseling and support services
- Help you file your claim
- Answer questions about privacy and confidentiality
- Provide resources and referrals

### **How to find your MST Coordinator:**

- Call your local VA facility and ask for the MST Coordinator
- Visit VA.gov and search "MST Coordinator"
- Call the VA MST Hotline: 1-855-500-MST (1-855-500-6278)

**Free MST Counseling:** The VA offers free, confidential counseling for MST survivors.

### **Counseling is available:**

- In person at VA facilities
- By phone or video
- In individual or group settings
- For both men and women

**You do NOT have to file a VA disability claim to access counseling.** Counseling is available to all veterans who experienced MST, regardless of discharge status or other factors.



# Military Sexual Trauma (MST)

## HELPFUL RESOURCES

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**Crisis Resources:** If you're in crisis or having thoughts of suicide:

**988 Veterans Crisis Line:**

- Call or text 988, then press 1
- Available 24/7
- Free and confidential
- Veterans talking to veterans

**Crisis Text Line:**

- Text HOME to 741741
- Available 24/7
- Free and confidential

**National Suicide Prevention Lifeline:**

- Call 1-800-273-8255
- Available 24/7
- Free and confidential

**You are not alone. Help is available.**

**Privacy & Confidentiality:** Your MST claim is protected.

**How the VA Protects Your Privacy** - The VA keeps MST claims confidential.



# Military Sexual Trauma (MST)

## HELPFUL RESOURCES

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### **Your MST information is:**

- Kept separate from your general medical records
- Not shared with law enforcement without your consent
- Not shared with your command without your consent
- Protected under federal privacy laws
- Only accessible to VA personnel who need to know

### **Who Has Access to Your Information - Your MST information is only shared with:**

- VA personnel directly involved in your claim or care
- People you authorize (attorney, representative, family member)
- Law enforcement or courts if legally required (rare)

### **Your information is NOT automatically shared with:**

- Your employer
- Your family
- Your command
- Law enforcement
- Anyone else

### **You have the right to:**

- Know who has access to your information
- Request copies of your records
- Request corrections to inaccurate information
- File a privacy complaint if your information is misused
- Control who you tell about your MST



# Military Sexual Trauma (MST)

## COMMON DENIALS

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**Common Denial Reasons & Appeals** - Some MST claims are denied. If yours is, you can appeal.

### Common Denial Reasons

#### 1. "Insufficient Evidence"

**The VA might say:**

- "You did not provide enough evidence that MST occurred"
- "Your personal statement is not detailed enough"
- "You did not provide corroborating evidence"

**This is often an error.** The VA is supposed to have a lower evidentiary standard for MST claims. You do NOT need corroboration. Your personal statement is enough.

**Your appeal argument:** "The VA applied the wrong standard. MST claims do not require corroboration. My personal statement is sufficient evidence that MST occurred. Per VA regulations, my account of the stressor event is credible."

#### 2. "No Service Connection Established"

**The VA might say:**

- "We cannot connect your current condition to the MST"
- "Your symptoms are not consistent with MST"
- "You did not provide a nexus letter"



# Military Sexual Trauma (MST)

## COMMON DENIALS

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**Your appeal argument:** "I have provided evidence linking my condition to MST, including my personal statement, buddy statements, and VA medical records showing trauma-related symptoms. A nexus letter from Dr. [Name] further establishes service connection."

### 3. "Stressor Event Not Credible"

**The VA might say:**

- "Your account of the MST is not credible"
- "The details don't match military records"
- "We cannot verify the stressor event"

**This is often an error.** The VA is supposed to accept your personal account of MST as credible. The VA is NOT supposed to require verification or corroboration.

**Your appeal argument:** "Per VA regulations, my personal account of the MST stressor event is credible and does not require corroboration. The VA must accept my statement as true."

### How to Appeal if your MST claim is denied:

**Step 1:** File a Notice of Disagreement (NOD) within one year of your Decision Letter



# Military Sexual Trauma (MST)

## APPEAL

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### **Step 2: In your appeal, cite:**

- Your personal statement (resubmit if necessary)
- Buddy statements
- VA medical records
- Behavioral markers
- Any corroborating evidence
- VA regulations on MST claims (lower evidentiary standard, no corroboration required)

### **Step 3: Consider getting help:**

- Contact your MST Coordinator
- Reach out to a VSO (Veteran Service Officer)
- Consider hiring a VA-accredited attorney
- Contact an MST advocacy organization

### **Step 4: Be patient.**

Appeals take time, but many MST appeals are won.

**Breaking the Silence:** MST is common. You are not alone.

Approximately 1 in 4 women and 1 in 100 men experience MST during service. But these numbers are likely much higher because many survivors—especially men—don't report or seek help.

**MST is NOT your fault.** You did not cause it. You did not deserve it. You are not to blame.



# Military Sexual Trauma (MST)

## YOU MATTER, YOUR STORY MATTERS

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**You have the right to file a claim.** You do NOT have to report it to law enforcement. You do NOT have to press charges. You do NOT have to tell anyone except the VA. You control your narrative.

**And the VA will keep it confidential.** The VA cannot repeat or tell anyone else.

**You deserve support and benefits.** Whether you file a claim or not, you deserve access to counseling, resources, and community.

### **Breaking the silence means:**

- Acknowledging what happened
- Recognizing it was not your fault
- Seeking support and healing
- Filing a claim if you choose to
- Helping other survivors

**Your story matters. Your experience is valid. You are not alone.**

**If you're ready to file an MST claim, start here.** If you're not ready yet, that's okay too. The VA MST Coordinator and counseling services are available whenever you're ready. You survived. You are strong. It's time to break the silence.

[illegible]





# Female Veterans

## CHAPTER 14

### *You are a Hero - With an "S"*

#### **BLUF (Bottom Line Up Front)**

Women veterans are veterans - period. However, sheroes have unique service-connected conditions that men don't have—reproductive health issues, pregnancy complications, postpartum depression, and conditions specific to the female body. Women also process trauma differently, and PTSD doesn't care if you served in a combat zone or not. The VA often overlooks women's conditions because the system was built by and for men. This chapter walks you through filing claims for women-specific conditions, understanding how trauma affects women differently, navigating a male-dominated VA system, and advocating for yourself without apology. You are a warrior. Your service matters. Your body matters. Your claim matters.

#### **Women Warriors: Your Service Counts**

**You served your country.** Whether you deployed to a combat zone or served stateside, whether you were in the field or behind a desk, whether you saw direct combat or supported the mission—your service counts. Full stop.

**Others can acts like women's service is less significant.** Like we didn't sacrifice. Like we didn't earn our benefits. Like our conditions aren't "real" because we didn't serve in a traditional combat role. I call bull crap! We answer the call to serve just like males do!

**It is wrong to treat sheroes as less than** - the VA has to address our female issues, too.



# Female Veterans

## EVERYONE IS UNIQUE

**Women veterans face the same stressors as men.** We face deployment stress, separation from family, witnessing trauma, loss of comrades, moral injury, and the weight of responsibility. We also face additional stressors: sexual harassment, discrimination, isolation, lack of female leadership, and a culture that wasn't built to include us.

**PTSD doesn't care if you served in a combat zone.** PTSD doesn't care if you were a pilot, a medic, a mechanic, or an administrator. PTSD doesn't care if you were in the field or at a desk. If you experienced a traumatic event during service—or if service itself was traumatic—you can have PTSD.

**Your trauma is valid. Your service is valid. Your claim is valid.**

### Women's Bodies, Women's Conditions

**Women veterans have body parts that men don't have.** And those body parts can be affected by military service in ways that the VA often doesn't recognize or understand.

**Reproductive Health Issues** - Military service can affect your reproductive health.

#### **This includes:**

- Endometriosis – Chronic pain condition affecting the tissue lining the uterus
- Polycystic Ovary Syndrome (PCOS) – Hormonal disorder affecting ovulation and fertility



# Female Veterans

## UNIQUE FEMALE ISSUES

### **Military service can affect your reproductive health, continued:**

- Infertility – Difficulty conceiving, potentially caused by service-related stress, exposure, or injury
- Irregular menstrual cycles – Caused by stress, deployment, weight changes, or exposure
- Pelvic pain – Chronic pain in the pelvic region, sometimes caused by service-related injury or stress
- Hysterectomy – Surgical removal of the uterus, sometimes necessary due to service-related conditions

**These conditions are service-connected** if they were caused by or aggravated by military service.

### **How to file a claim:**

- Describe when the condition started (during or after service)
- Describe how service caused or aggravated it (stress, exposure, injury, etc.)
- Get medical records documenting the condition
- Get a nexus letter from a provider linking the condition to service
- Include a personal statement describing how it affects your daily life



# Female Veterans

## **PREGNANCY**

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**Pregnancy Complications:** During military service, it can be complicated. Deployment, stress, exposure, and lack of adequate prenatal care can cause complications.

**Service-connected pregnancy complications include:**

- Miscarriage or stillbirth caused by service stress or exposure
- Gestational diabetes
- Preeclampsia or eclampsia
- Placental abnormalities
- Premature labor
- Complications requiring hospitalization or surgery

**If you experienced pregnancy complications during service, you can file a claim for:**

- The condition itself (gestational diabetes, preeclampsia, etc.)
- Secondary conditions caused by the pregnancy complication (anemia, hypertension, etc.)
- Ongoing health issues resulting from the complication

**How to file a claim:**

- Describe the pregnancy complication and when it occurred
- Explain how service caused or aggravated it
- Provide medical records from pregnancy and delivery
- Get a nexus letter from your OB/GYN or provider
- Include a personal statement about the impact on your health and life



# Female Veterans

## POSTPARTUM CONDITIONS

### Postpartum Depression & Postpartum Psychosis

**Postpartum depression (PPD)** is a serious mental health condition that can occur after pregnancy.

#### **Postpartum depression symptoms include:**

- Persistent sadness or hopelessness
- Anxiety or panic attacks
- Difficulty bonding with baby
- Intrusive thoughts about harming yourself or baby
- Sleep disturbances (beyond normal newborn sleep deprivation)
- Loss of interest in activities
- Feelings of worthlessness or guilt

**Postpartum psychosis is a rare** but serious condition including hallucinations, delusions, or disorganized thinking.

#### **If you experienced PPD or postpartum psychosis during or after service, you can file a claim if:**

- You were pregnant or postpartum while on active duty
- The condition was caused by or aggravated by service stress, deployment, or circumstances
- You have medical documentation of the condition

#### **How to file a claim:**

- Describe when PPD/postpartum psychosis occurred
- Explain how service caused or aggravated it (deployment while pregnant, lack of support, stress, etc.)



# Female Veterans

## **FEMALE SPECIFIC CONDITIONS**

### **How to file a claim, continued:**

- Provide medical records from that time period
- Get a nexus letter from your OB/GYN, psychiatrist, or mental health provider
- Include a personal statement describing the severity and impact

**Note:** If you were discharged before or shortly after giving birth, you may still be eligible if the condition was service-connected.

### **Other Women-Specific Conditions that can be service-connected in women veterans include:**

- Breast cancer (especially if exposed to burn pits, Agent Orange, or other environmental hazards)
- Ovarian cancer
- Cervical cancer
- Thyroid disease
- Autoimmune disorders
- Chronic pain conditions
- Bladder or urinary issues

### **For each condition:**

- File a separate claim
- Describe how service caused or aggravated it
- Provide medical documentation
- Get a nexus letter if possible
- Include a personal statement about impact



# Shero Note from Sarge

Women veterans have served with honor, sacrifice, and courage. Your story matters. Your service matters. Your body matters. Your claim matters.

Whether you served in a combat zone or stateside, whether you experienced direct combat or supported the mission, whether you have PTSD or a reproductive health condition—your claim is valid.

You are a SHERO. You fought for your country. Now it's time to fight for yourself. But here's something else you need to know: **Young women are watching you.**

They're looking for role models. They're looking for women who've walked the military path and come out stronger. They're looking for us. And they need to see us—not just our struggles, but our pride. Our strength. Our transformation.

Every female warrior has a responsibility to share her story. Not just the hard parts—though those matter too—but the good parts. The growth. The leadership. The camaraderie. The pride. The opportunities that military service gave you.

Young women need to know that military service is a path available to them. That women belong in uniform. That we can lead, serve, and succeed. That we're strong, capable, and proud.

Share your story by talking to young women in your community. They need more than the Kardashians to emulate. Speak at schools, career fairs, veteran events. Mentor them. Be visible. Be proud. Be honest about the challenges and the rewards, growth, and the honor.

Tell them what military service taught you. How it changed your life. What you're proud of. Why it mattered.

This is not about recruiting. This is about representation. This is about showing young women that they have options. That they can serve their country with honor. That they can be warriors too.

Young women are watching. Let them see you stand tall. Let them see you fight for what you've earned. Let them see that we are SHEROs.

Never apologize for what you've earned. Your voice matters. Your story matters. You matter. And the young women watching - you matter, too.



*Catch All*

## **CHAPTER 15**

# *Templates, Resources & Boots on the Ground*

### **BLUF (Bottom Line Up Front)**

This book is a tactical guide, not the final word. The VA system is constantly changing. New regulations are added. New presumptive conditions are recognized. New resources become available. This chapter gives you templates, checklists, and resources to get started—but the real work happens when you take these tools and adapt them to YOUR case, YOUR situation, YOUR story. You are not alone. Thousands of veterans are fighting the same fight. And I'm here to help. If you have questions, if you find something that needs editing, if you want to see a book on a topic we haven't covered—reach out. This is a community. We fight together.

### **What's NOT in This Book**

#### **This book is a starting point, not the finish line.**

We've covered the major VA claims topics, women-specific conditions, appeals, and tactical strategies. But the VA system is massive. There are regulations we didn't cover. There are conditions we didn't mention. There are edge cases and unique situations that don't fit neatly into chapters.

#### **Here's what you need to know:**

- Your case is unique. What works for one veteran might not work for another. Use this book as a foundation, but adapt it to YOUR situation.





*Catch All*

## **YOUR MISSION, YOUR LIFE**

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### **Here's what you need to know, continued:**

- The VA changes constantly. New presumptive conditions are added. Regulations are updated. Court decisions change how the VA operates. Stay informed.
- You might need specialized help. If your case involves MST, discharge upgrades, incarcerated veterans benefits, or other specialized topics, you might need additional resources or professional help.
- This book is not legal advice. I'm a veteran advocate, not a lawyer. If your case is complex or you're facing a difficult appeal, consider talking to a VA attorney.
- There's always more to learn. The more you know about the VA system, the better you can advocate for yourself.

### **Not Everything Is in This Book - and that's okay.**

This book covers the major VA claims topics, tactical strategies, and women-specific conditions. But the VA system is massive. There are regulations we didn't cover. There are conditions we didn't mention. There are unique situations that require specialized knowledge.

### **That's where **YOU** come in.**

#### **Contact Sarge**

Do you have questions? Did you find something that needs editing? Tell us. This book is a living document. If something is unclear, outdated, or wrong, I want to know so I can fix it.



*Catch All*

## **FUTURE BOOKS**

**Do you want to see a book on a topic we haven't covered?**

**Let us know. Future books in the Operation series are:**

- Operation Permanent & Total (how to do it, what it means, and benefits)
- Operation K-9 (how to get one)
- Operation Caregiver (benefits for caregivers of disabled veterans)
- Operation Shero (female veterans)
- Operation Families (veteran family benefits and support)
- And more...

**Here's how to reach Sarge:**

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 **Facebook:** [Boots 2 Benefits](https://www.facebook.com/Boots2Benefits)

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 **YouTube:** [@B2BAskSarge](https://www.youtube.com/@B2BAskSarge)

 **Twitter/X:** [@Boots2Benefits](https://twitter.com/Boots2Benefits)

Sarge reads every email, answers every question and considers every suggestion. This is for YOU, her brothers and sisters in service. This is not a one-way street. This is a community. You are not alone. Thousands of veterans are fighting the same fight. And I'm fighting right alongside you.



This image shows a full page of a document template. It features a light gray background with horizontal blue lines spaced evenly down the page. A single vertical red line runs along the left edge, creating a margin. The bottom right corner contains the text "PAGE 139 OF 140" in a bold, black font.



## Note from Sarge

**If you've made it to this page, I want you to hear this loud and clear:**

**You did not imagine it.** You did not exaggerate it. You did not “just get over it.”

**You served,** and you are allowed to ask for what you've earned. Working through this workbook is not light reading. You've dug up memories, sorted through paperwork, stared down fear, anger, grief, and maybe a whole lot of “I wish I'd known this sooner.” That takes guts. Most people never get this far.

**Here's what I want you to remember as you close these pages:**

- You are not a burden for filing a claim.
- You are not taking from someone else's pot.
- You are not weak for needing help.
- 

**You are a veteran** using the system that was built—however imperfectly—for you.

**If you're still in the fight,** tired and frustrated, that's okay. Take a knee. Breathe. Then take the next small step. It might be one form, one phone call, one sentence in a statement. That still counts as forward motion.

**Keep this workbook messy.** Highlight it. Dog-ear it. Write in the margins. Use it as evidence that you showed up for yourself when it would've been easier to quit.

**And if you ever start to doubt yourself, come back to this:**

**You are not alone in this. I've Got Your Six, Too.**

