IMPORTANT: The Department of Veterans Affairs (VA) will not pay or reimburse any expenses or cost incurred in the process of completing and/or submitting this form. Please read the privacy act and respondent burden information before completing form.

NAME OF PATIENT/VETERAN:	SSN:	EXAMINATION DATE:
		5/30/2018

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

ACCEPTABLE CLINICAL EVIDENCE (ACE)

METHOD USED TO OBTAIN MEDICAL INFORMATION TO COMPLETE THIS DOCUMENT:

- [ ] Review of available records (without in-person or video telehealth examination) using the Acceptable Clinical Evidence (ACE) process because the existing medical evidence provided sufficient information on which to prepare the DBQ and such an examination will likely provide no additional relevant evidence.
- [ ] Review of available records in conjunction with a telephone interview with the Veteran (without in-person or telehealth examination) using the ACE process because the existing medical evidence supplemented with a telephone interview provided sufficient information on which to prepare the DBQ and such an examination would likely provide no additional relevant evidence.
- [ ] Examination via approved video telehealth
- [x] In-person examination

EVIDENCE REVIEW

- [ ] No records were reviewed
- [ ] Not requested
- [ ] VA claims file (hard copy paper C-file)
- [x] VA e-folder (VBMS or Virtual VA)
- [ ] CPRS
- [x] Other (Please identify other evidence reviewed):

N/A records veteran brought in were included in claims file.

EVIDENCE COMMENTS:

12/15/89, 12/1/89 knee STR. 12/14/88 left ankle STR. 11/1/90 and 11/3/90 STR for pneumonia.

SECTION I - DEFINITIONS

Aggravation of preexisting nonservice-connected disabilities. A preexisting injury or disease will be considered to have been aggravated by active military, naval, or air service, where there is an increase in disability during such service, unless there is a specific finding that the increase in disability is due to the natural progress of the disease.
Aggravation of nonservice-connected disabilities. Any increase in severity of a nonservice-connected disease or injury that is proximately due to or the result of a service-connected disease or injury, and not due to the natural progress of the nonservice-connected disease, will be service connected.

SECTION II - RESTATEMENT OF REQUESTED OPINION

2a. Insert requested opinion from general remarks:

Does the Veteran have a diagnosis of (a) bilateral knee condition that is at least as likely as not (50 percent or greater probability) incurred in or caused by (the) Knee Pain during service?

2b. Indicate type of exam for which opinion has been requested *(e.g. Skin Diseases)*:

Knee and lower leg conditions

SECTION III – MEDICAL OPINION FOR DIRECT SERVICE CONNECTION

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

- [x] 3a. The claimed condition was at least as likely as not *(50 percent or greater probability)* incurred in or caused by the claimed in-service injury, event, or illness.
- [ ] 3b. The claimed condition was less likely than not *(less than 50 percent probability)* incurred in or caused by the claimed in-service injury, event, or illness.

3c. Provide rationale:

Veteran had no issues related to the claimed CONDITION prior to military service. Onset of the condition was during service, documented in the Service Medical Records. There is evidence of current, chronic and continuous treatment and care. A nexus has been established.

© 2018 Logistics Health Incorporated. All Rights Reserved. Proprietary and Confidential.

COPY MADE BY VARMC, ST. LOUIS FROM A RECORD IN VA'S POSSESSION

There are multiple encounters for "multiple joint pain generalized " at VA after service. During service STRS indicate treatment for bilateral patellofemoral pain syndrome.

SECTION IV – MEDICAL OPINION FOR SECONDARY SERVICE CONNECTION

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

☐ 4a. The claimed condition is at least as likely as not *(50 percent or greater probability)* proximately due to or the result of the Veteran's service connected condition.

☐ 4b. The claimed condition is less likely than not *(less than 50 percent probability)* proximately due to or the result of Veteran's service connected condition.

4c. Provide rationale:

SECTION V – MEDICAL OPINION FOR AGGRAVATION OF A CONDITION THAT EXISTED PRIOR TO SERVICE

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

☐ 5a. The claimed condition, which clearly and unmistakably existed prior to service, was aggravated beyond its natural progression by an in-service injury, event, or illness.

☐ 5b. The claimed condition, which clearly and unmistakably existed prior to service, was clearly and unmistakably not aggravated beyond its natural progression by an in-service injury, event, or illness.

5c. Provide rationale:

SECTION VI - MEDICAL OPINION FOR AGGRAVATION OF A NONSERVICE CONNECTED CONDITION BY A SERVICE CONNECTED CONDITION

6a. Can you determine a baseline level of severity of *(claimed condition/diagnosis)* based upon medical evidence available prior to aggravation or the earliest medical evidence following aggravation by *(service connected condition)*?

☐ YES ☐ NO

If YES to question 6a, answer the following:

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

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

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

☐ YES ☐ NO

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

☐ YES *(provide rationale in section B)*

☐ NO *(provide rationale in section B)*

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

i. Provide rationale as to why a baseline cannot be established *(e.g. medical evidence is not sufficient to support a determination of a baseline level of severity)*:

ii. Regardless of an established baseline, was the Veteran's *(claimed condition/diagnosis)* at least as likely as not aggravated beyond its natural progression by service connected condition?

☐ YES *(provide rationale in section B)*

☐ NO *(provide rationale in section B)*

6b. Provide rationale:

SECTION VII - OPINION REGARDING CONFLICTING MEDICAL EVIDENCE

© 2018 Logistics Health Incorporated. All Rights Reserved. Proprietary and Confidential.

COPY MADE BY VARMC, ST. LOUIS FROM A RECORD IN VA'S POSSESSION

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

SECTION VIII - REMARKS

MEDICAL OPINION SUMMARY

Veteran was instructed to send all personal medical records to the VA Evidence Intake Center if applicable, for proper submission into VBMS.

SECTION IX – PHYSICIAN'S CERTIFICATION AND SIGNATURE

CERTIFICATION: To the best of my knowledge, the information contained herein accurate, complete, and current.

10a. PHYSICIAN SIGNATURE:	10b. PHYSICIAN PRINTED NAME:	10c. DATE:
	NP Nurse Practitioner	6/8/2018

10d. PHYSICIAN PHONE AND FAX NUMBERS:	10e. PHYSICIAN NATIONAL PROVIDER IDENTIFIER (NPI) NUMBER:	10f. PHYSICIAN ADDRESS:

© 2018 Logistics Health Incorporated. All Rights Reserved. Proprietary and Confidential.

COPY MADE BY VARMC, ST. LOUIS FROM A RECORD IN VA'S POSSESSION