

your finger was received and VAMC treatment records printed in support of that claim showed a diagnosis of coronary artery disease, therefore inferring a claim of service connection for your heart condition.

A continuous evaluation of 10 percent is warranted based on your VA Compensation and Pension General Medicine examination, dated September 4, 2008, which showed a METs level of 10, your VA Heart Exam dated October 24, 2009 which showed a METs of 11.2 and ejection fraction of 62%. An evaluation of 10 percent is assigned if there is workload greater than 7 METs but not greater than 10 METs resulting in dyspnea, fatigue, angina, dizziness, or syncope, or continuous medication is required.

A higher evaluation of 30 percent is not warranted because the evidence did not show a workload greater than 5 METs but not greater than 7 METs resulting in dyspnea, fatigue, angina, dizziness, or syncope; or evidence of cardiac hypertrophy or dilatation on electrocardiogram, echocardiogram, or X-ray. One MET (metabolic equivalent) is the energy cost of standing quietly at rest and represents an oxygen uptake of 3.5 milliliters per kilogram of body weight per minute.

We have assigned an evaluation of 100 percent effective January 7, 2011, the date of your VA heart examination which documents a METs level of 3-5 and diagnosis of coronary artery disease with myocardial infarction and CABG x5. Your heart condition does not affect usual daily activities or usual occupation. An evaluation of 100 percent is assigned if there is chronic congestive heart failure; or workload of 3 METs or less resulting in dyspnea, fatigue, angina, dizziness, or syncope; or left ventricular dysfunction with an ejection fraction of less than 30 percent.

This is the maximum schedular evaluation for this disability.

A separate compensable evaluation for the scars is not warranted because the VA exam does not show area or areas of at least 6 square inches (39 sq. cm.) but less than 12 square inches (77 sq. cm.), area or areas of 144 square inches (929 sq. cm.) or greater, evidence of tenderness, limited function, or repeated ulcerations.

2. Entitlement to special monthly compensation based on housebound.

Entitled to special monthly compensation is warranted on account of coronary artery disease, status post coronary artery bypass graft with residual scar, abdominal aortic pain or aortic aneurysm rated 100 percent and additional service-connected disability of posttraumatic stress disorder now claimed as depression and a sleep disorder, independently ratable at 60 percent or more from 01/07/2011; date you met the criteria.