1. Service connection for arthritis left knee, right ankle and left shoulder.
2. Service connection for residuals fracture left thumb.
3. Service connection for residuals nasal fracture.
4. Service connection for residuals fracture right little finger.
5. Service connection for cervical strain, back condition, hypertension, ingrown toenail, right otitis media, heart condition and lump on right neck.
6. Service connection for elevated cholesterol.

EVIDENCE:

Service medical records for the period 1986-1996
VA examination dated 3-4-96

DECISION:

1. Service connection for arthritis left knee, right ankle and left shoulder is granted with an evaluation of 10 percent effective February 2, 1996.
2. Service connection for residuals fracture left thumb is granted with an evaluation of 0 percent effective February 2, 1996.
3. Service connection for residuals nasal fracture is granted with an evaluation of 0 percent effective February 2, 1996.
4. Service connection for residuals fracture right little finger is granted with an evaluation of 0 percent effective February 2, 1996.
5. The claim for service connection of cervical strain, back condition, hypertension, ingrown toenail, right otitis media, heart condition and lump on right neck is denied as it is not well grounded.
6. The claim for service connection of elevated cholesterol is denied as it is not well grounded.

REASONS AND BASES:

1. Service connection for arthritis left knee, right ankle and left shoulder has been established as directly related to military service. This condition is evaluated as 10 percent disabling from February 2, 1996. A 10 percent evaluation is assigned for painful or limited motion of a major joint or group of minor joints, and may also be applied once to multiple joints if there is no limited or painful motion. A 20 percent evaluation is not warranted unless X-ray evidence shows involvement of two or more major joints or two or more minor joint groups with occasional incapacitating exacerbations.

The service medical records were reviewed. The records show the veteran was treated for pain in the left knee, right ankle and left shoulder while in service. In 2-88 the veteran underwent arthroscopy of the left knee. In 12-95 the veteran underwent surgical debridement of the right ankle. The records were negative for findings of limitation of motion or function of these joints.

The VA examination was reviewed. Examination of the left knee revealed punctuate scars of the knee. There was full range of motion and the ligaments were taut. X-rays revealed degenerative joint disease. Examination of the right ankle revealed surgical scars and slight swelling. There was some limitation of

motion with some restriction of inversion and eversion. There was x-ray evidence of degenerative joint disease. Examination of the shoulder revealed some pain with motion and some crepitus. X-rays revealed degenerative joint disease.

It is noted that the veteran filed a separate claim for scarring, however, without evidence of tender surgical scars a separate evaluation is not warranted.

2. Service connection for residuals fracture left thumb has been established as directly related to military service. This condition is evaluated as 0 percent disabling from February 2, 1996. A noncompensable evaluation is assigned unless motion of a joint is significantly limited.

The service medical records were reviewed. The records show the veteran sustained a fracture of the left thumb in 12-89. The thumb was casted. The remaining records were negative for any further treatment of this injury or residuals thereof.

The VA examination was reviewed. The examination was negative for findings of a disability of the left thumb.

3. Service connection for residuals nasal fracture has been established as directly related to military service. This condition is evaluated as 0 percent disabling from February 2, 1996. A noncompensable evaluation is granted whenever there are only slight symptoms. A higher evaluation of 10 percent is not warranted unless evidence demonstrates marked interference with breathing space.

The service medical records were reviewed. The records show the veteran sustained a nasal fracture in 10-87. The remaining records were negative for any further treatment of this injury or residuals thereof.

The VA examination was reviewed. The examination was negative for findings of residuals of the nasal fracture.

4. Service connection for residuals fracture right little finger has been established as directly related to military service. This condition is evaluated as 0 percent disabling from February 2, 1996. A noncompensable evaluation is assigned for ankylosis of the ring or little finger.

The service medical records were reviewed. The records show the veteran fractured the right little finger in 2-93. The remaining records were negative for any further treatment of this condition or residuals thereof.

The VA examination was reviewed. The examination was negative for residuals of the right little finger injury.

5. The law provides that a person who submits a claim for VA benefits must submit evidence sufficient to justify a belief that the claim is well grounded. A well-grounded claim is a plausible claim, one which has merit on its own, or is capable of substantiation. Such a claim need not be conclusive, but it must be accompanied by evidence which shows that the claimed condition exists and is possibly related to service.

A well grounded claim for service connection requires evidence of a current disability, evidence of incurrence or aggravation of a disease or injury in the service, and evidence of a nexus, or link, between the in-service injury or disease and the current disability. Although there is a record of treatment in service for cervical strain, back condition, hypertension, ingrown toenail, right otitis media, heart condition and lump on right neck, no permanent residual or chronic disability subject to service connection is shown by service medical records or demonstrated by evidence following service. In order to establish a well-grounded claim, it is necessary to provide evidence which demonstrates a permanent residual or chronic disability. Unless evidence to make the claim well grounded is received within one year from the date of this notification, benefits, if entitlement is established, may not be paid prior to the date of receipt of the evidence.

The service medical records were reviewed. In 9-90 the veteran was treated for a cervical strain secondary to a car accident. The remaining records were negative for any further treatment of this condition. The records show the veteran was treated several times for low back pain due to strains but this was not shown to be chronic in nature. In 4-95 the veteran was found to have hypertension during an pre-operative evaluation. The remaining records were negative for any further findings of hypertension. In 6-95 and 9-95 the veteran was treated for ingrown toenails. The remaining records were negative for any further treatment of this condition. In 2-87 the veteran was treated for right otitis media. The remaining records were negative for any further treatment of this condition. In 4-95 the veteran was noted to have slight cardiac enlargement on a chest x-ray. The remaining records were negative for any further findings concerning a heart condition. In 10-95 and 12-95 the veteran was treated for a tender lump on the neck diagnosed as an infected lymph node. The remaining records were negative for any further findings concerning this condition.

The VA examination was reviewed. Examination of the cervical spine revealed full range of motion and normal lordosis. The veteran's blood pressure was within normal limits and his prior hypertension was found to be situational. There were no findings of current otitis media, lump on the neck or ingrwn toenails. There were also no findings of a heart condition. There were also no findings of a disability of the back.

6. The law provides that a person who submits a claim for VA benefits must submit evidence sufficient to justify a belief that the claim is well grounded. A well-grounded claim is a plausible claim, one which has merit on its own, or is capable of substantiation. Such a claim need not be conclusive, but it must be accompanied by evidence which shows that the claimed condition exists and is possibly related to service.

Compensation is payable for a disease or injury which causes a disabling physical or mental limitation. The evidence regarding elevated cholesterol fails to show a disability for which compensation may be established. It is therefore not a well-grounded claim which can be resolved. In order to establish a well-grounded claim, it is necessary to provide evidence which demonstrates an actually disabling condition. Unless evidence to make the claim well grounded is received within one year from the date of this notification, benefits, if entitlement is established, may not be paid prior to the date of receipt of the evidence.

Elevated cholesterol is considered to be an abnormal laboratory finding and not a disability for which service connection is warranted.