



VA Fibromyalgia Claims Guide: Summary and Worksheets

Your own working pages. These are your notes in your own words. They are not a VA form, they are not sent to the VA, and nothing here is a medical finding or a prediction about your claim.

Start with the essentials

- 1 Describe the affected area and each side separately**
Record the diagnosis, location, side, onset, and changes over time. Keep different joints, muscles, or body regions separate.
- 2 Document function during ordinary use and flares**
Note pain, motion, weakness, endurance, stability, assistive devices, and what repeated use or a flare stops you doing.
- 3 Use measured findings and your own history together**
Keep examination measurements and imaging distinct from your description of daily effects. Do not assign yourself a percentage.

How to use this packet

Complete only what helps you prepare. Use approximate dates when exact dates are unavailable. Mark records as missing or unverified instead of guessing.

The full guide, research, charts, rating discussion, sources, and current information remain online at:

<https://ratemyvso.net/dc/fibromyalgia-claims-guide>



WORKSHEET 1 OF 5

Condition and treatment timeline

Optional working notes for Fibromyalgia. Write only what you know. Leave anything blank that does not apply.

Diagnosis, affected area, side, and date

In-service event, onset, or secondary-condition history, with approximate dates

Treatment, surgery, therapy, devices, and response

Your notes stay yours. This blank PDF is not submitted to the VA. Saving answers through the website requires your RateMyVSO account.



WORKSHEET 2 OF 5

Motion, flares, and daily function

Optional working notes for Fibromyalgia. Write only what you know. Leave anything blank that does not apply.

Pain, motion, strength, endurance, stability, and ordinary-use limits

Flare frequency, duration, triggers, recovery, and additional limits

Effects on walking, standing, lifting, sleep, work, and daily activities

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WORKSHEET 3 OF 5

Examination and objective findings

Optional working notes for Fibromyalgia. Write only what you know. Leave anything blank that does not apply.

Range-of-motion, strength, stability, gait, or other examination findings

Imaging, testing, and dates, if available

Questions about each side, repeated use, flares, cause, worsening, or separate residuals

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WORKSHEET 4 OF 5

Records and unanswered questions

Optional working notes for Fibromyalgia. Write only what you know. Leave anything blank that does not apply.

Record, date, source, and page if known

Do I have my own copy?

- | | |
|---|---|
| ☐ Not sure | ☐ I have a copy |
| ☐ Requested, still waiting | ☐ I do not have a copy |

Do I know whether the VA has it?

- | | |
|---|---|
| ☐ Unknown or not verified | ☐ Submission receipt available |
| ☐ Listed in my decision letter | ☐ Not submitted by me |

Missing records, request dates, and questions to follow up

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WORKSHEET 5 OF 5

Decision-letter reading sheet

Optional working notes for Fibromyalgia. Write only what you know. Leave anything blank that does not apply.

Letter date, condition, and what the VA decided

Reasons and evidence listed, with page numbers

Dates and instructions in the letter; questions for a representative

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