RATE MY VSO // VISUAL FIELD GUIDE

SKIN CONDITIONS

DERMATITIS AND ECZEMA CLAIMS GUIDE

Identify the skin disease, measure it during an active period, and document every treatment route and duration.

DIAGNOSIS // AREA // THERAPY // FLARES

Identify the skin disease, measure it during an active period, and document every treatment route and duration.

01

WHAT THE CURRENT RATING FRAMEWORK ASKS FOR

AREA AND TREATMENT DRIVE THE GENERAL FORMULA

Dermatitis and eczema may be evaluated by total body area, exposed area, or the duration of required systemic therapy. Treatment applied through the skin is topical, not systemic. Some diagnoses use a specific code, and scar or disfigurement criteria may control when those are the predominant disability.

AREA
Record total body area and exposed body area affected during a representative flare.

THERAPY
Name each medication, route, purpose, start and stop date, and cumulative duration.

FLARES
Show frequency, duration, spread, infection, sleep loss, and function when the disease is active.

02 SERVICE-CONNECTION PATHS

DIRECT	The diagnosed skin disease began in service or is medically linked to an in-service exposure, infection, injury, or event.
NAMED PRESUMPTION	Use a presumption only when the exact diagnosis and timing or service requirements are met, such as chloracne or qualifying Gulf War signs.
SECONDARY OR TREATMENT	A service-connected immune disease, medication, treatment, scar, or other condition caused or aggravated the diagnosed skin disability.

03 SYMPTOMS

Medically recognized symptoms. A diagnosis still requires appropriate medical evaluation.

- Itching
- Red, inflamed, or discolored patches
- Dry, cracked, or scaly skin
- Oozing, weeping, or bleeding
- Thickened or hardened skin
- Pain, burning, infection, or sleep disruption

04 BUILD THE RECORD

1. **EXACT DIAGNOSIS**
   Dermatology findings, biopsy or testing when needed, and the body sites involved.
2. **BODY AREA**
   Total and exposed area estimates during an active period, with a body map and dated photographs.
3. **TREATMENT ROUTE**
   Topical, oral, injected, phototherapy, or other therapy, including purpose and duration.
4. **FLARE HISTORY**
   Dates, triggers, spread, pain, itch, drainage, infection, missed activity, and recovery.
5. **FUNCTIONAL EFFECTS**
   Sleep, hand use, clothing, walking, work, social activity, and treatment side effects.
6. **SERVICE ROUTE**
   Onset, exposure, continuity, qualifying presumption, or a reasoned direct or secondary medical link.

05 WHY CLAIMS BREAK DOWN

Recurring problems in the reviewed service-connection record, plus condition-specific rating gaps.

A — EXAM BETWEEN FLARES
The examination did not capture the body area, appearance, or function present during active disease.

B — THERAPY NOT DEFINED
The medication route, medical purpose, or cumulative duration was missing or a topical treatment was called systemic.

C — SERVICE LINK MISSING
The diagnosis was shown, but exposure, onset, continuity, presumption requirements, or nexus evidence was incomplete.

D — OVERLAP COUNTED TWICE
The same affected area or manifestation was evaluated under more than one skin code.

06 SKIN TRIGGERS, CAUSES, AND EFFECTS TO EVALUATE

Similar rashes can have different causes. Diagnosis and medical direction must be established for the individual veteran.

CONDITIONS OR EXPOSURES THAT MAY AFFECT SKIN

Irritants or allergens // infection // immune disease // medication or treatment // heat, moisture, or friction // sun or toxic exposure

EFFECTS SKIN DISEASE MAY PRODUCE

Skin infection // scars or pigment change // sleep loss // hand or work limits // treatment effects // social or emotional effects

07 DO THIS, NOT THAT

DO

- Photograph representative flares.
- Record body area and exposed area.
- List treatment route and duration.

DO NOT

- Rely only on a clear-skin exam.
- Call every medication systemic therapy.
- Assume an exposure proves the nexus.

Medical and symptom source: NIH/NIAMS atopic dermatitis guidance and VA skin diseases DBQ. Rating rules: 38 CFR 4.118, including DC 7806. Claim-pattern research checked against the frozen RateMyVSO data snapshot dated Aug. 10, 2026; no counts or outcome predictions shown. Educational only, not legal or medical advice.