RATEMYVSO FIELD GUIDE

COMPENSATION AND PENSION EXAM

# MENTAL HEALTH C&P EXAM GUIDE

What the examiner records, how to prepare, and what to do after the appointment

MH DBQ

**THE EXAM IS AN EVIDENCE-GATHERING APPOINTMENT**
The examiner documents diagnosis, history, symptoms, and occupational and social impairment. The examiner does not make the final rating decision.

THE EXAM FLOW

## WHAT USUALLY HAPPENS

**01 RECORD REVIEW**
The examiner may review service records, treatment, prior exams, statements, and other evidence in the claim file.

**02 CLINICAL INTERVIEW**
Questions cover history, current symptoms, treatment, functioning, and relevant events.

**03 MENTAL STATUS FINDINGS**
The examiner records observed behavior, communication, orientation, thought process, memory, mood, and related findings.

**04 DBQ AND OPINION**
The report identifies diagnoses, symptoms, impairment, and any requested medical opinion.

BEFORE THE APPOINTMENT

## ORGANIZE THE FACTS YOU ALREADY KNOW

**1 DIAGNOSTIC HISTORY**
Current and prior diagnoses, changed labels, hospitalizations, crisis care, and important dates.

**2 TREATMENT**
Therapy, medication, side effects, response, treatment gaps, and reasons for any gaps.

**3 SYMPTOM PATTERN**
Frequency, severity, duration, triggers, recovery time, and changes over time.

**4 WORK OR SCHOOL**
Attendance, reliability, concentration, conflict, accommodations, discipline, and job changes.

**5 RELATIONSHIPS**
Family, friends, isolation, communication, trust, conflict, and ability to participate socially.

**6 DAILY FUNCTIONING**
Sleep, hygiene, meals, finances, transportation, appointments, routines, and need for help.

**USE NOTES TO REMEMBER, NOT TO REHEARSE**
A short timeline can prevent forgotten dates. Describe your actual experience in your own words.

HOW TO DESCRIBE A PROBLEM

## CONNECT THE SYMPTOM TO FUNCTION

**F — FREQUENCY**
How often does it happen?
Daily, weekly, intermittently, or during particular situations

**S — SEVERITY**
How intense is it?
What can and cannot be done while it is happening

**D — DURATION**
How long does it last?
Minutes, hours, days, or a continuing pattern

**I — IMPACT**
What does it change?
Specific effects on work, relationships, judgment, thinking, mood, or daily life

**USE A CONCRETE EXAMPLE**
Instead of only naming a symptom, explain a recent episode, what triggered it, how long it lasted, what help was needed, and what consequence followed.

THE FUNCTIONAL PICTURE

## AREAS THE EXAM MAY EXPLORE

**WORK**
- Reliability and productivity
- Concentration and memory
- Stress and workplace interaction
- Attendance and task completion

**SOCIAL**
- Family and close relationships
- Friendships and isolation
- Conflict, trust, and communication
- Participation outside the home

**DAILY LIFE**
- Self-care and household tasks
- Appointments and medication
- Driving, shopping, and finances
- Sleep and daily routine

**CLINICAL**
- Treatment and medication response
- Hospitalization or crisis episodes
- Substance use and overlapping conditions
- Safety-related symptoms when present

DURING THE EXAM

## ACCURATE REPORTING MATTERS

**DO**
- ✔ Answer honestly and as specifically as you can
- ✔ Describe both typical functioning and serious episodes
- ✔ Explain legitimate changes or inconsistencies
- ✔ Say when you do not remember or do not understand
- ✔ Discuss treatment effects and remaining impairment
- ✔ Correct a misunderstanding respectfully

**DO NOT**
- ✖ Minimize because the day happens to be better
- ✖ Exaggerate or repeat memorized rating language
- ✖ Assume the examiner already knows every fact
- ✖ Guess at dates, frequency, or medical conclusions
- ✖ Describe symptoms without explaining their impact
- ✖ Stop treatment solely because an exam is scheduled

AFTER THE APPOINTMENT

## MAKE A RECORD WHILE DETAILS ARE FRESH

**1 WRITE DOWN WHAT HAPPENED**
Date, length, questions, testing, records discussed, and any important misunderstanding.

**2 KEEP ATTENDING TREATMENT**
The examination is not treatment and does not replace your regular care.

**3 REVIEW THE REPORT WHEN AVAILABLE**
Compare diagnoses, history, symptoms, findings, and conclusions with the evidence.

**4 RESPOND TO A MATERIAL ERROR**
Identify the exact factual or medical problem and submit relevant evidence through the proper claim lane.

**A SHORT OR DIFFICULT EXAM IS NOT AUTOMATICALLY INADEQUATE**
The useful question is whether the report is factually accurate, considers the relevant history, answers the requested question, and gives enough reasoning for VA to decide the claim.

RateMyVSO.net
TOOLS FOR VETERANS

**BE ACCURATE. BE SPECIFIC. EXPLAIN THE FUNCTIONAL IMPACT.**

References: 38 C.F.R. Sections 4.125, 4.126, and 4.130 | Mental Disorders DBQ. Educational use only. Not legal or medical advice.

C&P EXAM GUIDE