RATEMYVSO NEXUS LETTER LIBRARY

10

DIRECT SERVICE CONNECTION NEXUS ROADMAP

Connect the current diagnosis to the documented in-service event.

DIRECT CLAIM

A direct claim generally needs a current disability, an in-service disease, injury, event, or exposure, and a medical connection between them. The opinion should explain the link using the veteran's chronology and medical evidence.

CURRENT DIAGNOSED DISABILITY → **IN-SERVICE EVENT, INJURY, DISEASE, OR EXPOSURE**

ELEMENT 1

CURRENT DISABILITY

Diagnosis, testing, symptoms, functional effects, and present treatment.

ELEMENT 2

SERVICE EVIDENCE

Service records, incident documentation, exposure evidence, MOS, deployment, and credible lay evidence.

ELEMENT 3

MEDICAL NEXUS

A reasoned explanation connecting the present condition to the qualifying service facts.

PROVIDER ANALYSIS

THE RATIONALE SHOULD ADDRESS

1 **ONSET AND CHRONOLOGY**

When symptoms began, how they progressed, and the timing of diagnosis and treatment.

2 **MEDICAL MECHANISM**

How the service event or exposure can medically produce the current condition.

3 **CONTINUITY AND LAY EVIDENCE**

Observable symptoms and gaps explained in the context of the full record.

4 **ALTERNATIVE CAUSES**

Post-service injuries, age, genetics, occupation, lifestyle, and other material risk factors.

5 **PRIOR NEGATIVE OPINIONS**

Identify errors, missing evidence, or unsupported assumptions when a rebuttal is needed.

6 **LITERATURE AND TESTING**

Use authoritative research and objective findings when they genuinely support the mechanism.

STRONG FOCUS

"Why does this veteran's documented service event medically explain this current diagnosis?"

WEAK FOCUS

"The veteran served, has the condition now, and therefore the two must be connected."

TWO FACTS DO NOT PROVE THE BRIDGE. Service and a current diagnosis establish endpoints. The nexus opinion must explain the medical connection between them.