

Your payment will be directed to the financial institution and account number that you specified. To confirm when your payment was deposited, please contact your financial institution.

If this account is no longer open, please notify us immediately.

What We Decided

We made the following decision(s) regarding your claimed issue(s):

Issue/Contention	Percent (%) Assigned	Effective Date
total abdominal hysterectomy with history of menorrhagia, uterine fibroids, and endometriosis	30%	May 22, 2014
	Explanation	
history of menorrhagia, uteri following removal of the ute A higher evaluation of 50 pe unless the evidence shows: A higher evaluation of 50 pe shows: Complete prolapse, A higher evaluation of 100 p evidence shows: Rate Temporal Service connection for total affibroids, and endometriosis and benefits for this condition had did not show your condition service. You have submitted specifically diagnosed during evidence from Dr. on active duty as well as prothat after reviewing your service toxic chemicals used at Georat least as likely as not cause service at George Air Force objective medical evidence is	Complete removal of the uterus and recent is not warranted for prolapse through introitus; or, • Complete percent is not warranted for removal porary Evaluation for Three Month abdominal hysterectomy with historias been established as directly related previously been denied as the even was incurred during or was otherword and material evidence to reoperative military service, we have removed the medical records and substantiated by your military service. Your see the service of the process of the provious of the process of th	ed on: • Minimum evaluation of uterus and both ovaries d both ovaries. of uterus unless the evidence rolapse, through vagina. I of uterus unless the s for removal of uterus. ry of menorrhagia, uterine ted to military service. idence available at that time ise caused by your military en this claim. While not eccived objective medical symptoms treated while Dr. provided ating documents regarding on that your condition was ervice records confirm your military service. There is no of caused by your military

File Number: CROOKS, TERRINE K

compensation benefits.

Issue/Contention	Percent (%) Assigned	Effective Date
bilateral mastectomy, residual of breast cancer	50%	May 22, 2014
	Explanation	
 cancer based on: • Following A higher evaluation of 60 per shows: • Following modified A higher evaluation of 80 per shows: • Entire removal of boundes up to the coracoclavicument of superioristic connection for bilater as directly related formilitary military service, we have received inking your condition to symmetry exposure to toxic chemicals. In medical records and substantial Air Force Base, it was his opinion. 	al mastectomy, residual of breast of service. While not specifically diagnostive dividence find the specifically diagnostive dividence from the service dividence of the se	f breast unless the evidence is. f breast unless the evidence scles and regional lymph sancer has been established gnosed during active rom Dr. as well as probable eviewing your service hemicals used at George last as likely as not caused
by your military service. You Base during your period of ac	r service records confirm your service military service. There is no owas not caused by your military ser	vice at George Air Force objective medical evidence

Issue/Contention	Percent (%) Assigned	Effective Date
post-operative breast scarring	0%	May 22, 2014
	Explanation	STATE OF THE REAL PROPERTY.

percent is assigned from May 22, 2014, the date you initiated your electronic application for

- Service connection for post-operative breast scarring has been established as related to the service-connected disability of bilateral mastectomy, residual of breast cancer.
- We have assigned a noncompensable evaluation for your post-operative breast scarring based on: One or more scars with no compensable characteristics
- Note: In every instance where the schedule does not provide a zero percent evaluation for a diagnostic code, a zero percent evaluation shall be assigned when the requirements for a compensable evaluation are not met. {38 CFR §4.31}
- An additional, separate compensable evaluation under Diagnostic Code 7804 is not warranted unless there is at least one scar that is painful or unstable.
- This is the highest schedular evaluation allowed under the law for scars, general.
- A noncompensable evaluation is assigned from May 22, 2014, the date you initiated your electronic application for service connection of breast cancer.