



Infectious, Immune, and Nutritional Conditions Rating 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 Start with the confirmed diagnosis and monitoring**
Record the diagnosis, laboratory or clinical monitoring, treatment, and dates from the records you have.
- 2 Separate the main condition from complications**
List symptoms and functional effects, then identify separately diagnosed complications or residuals without assuming they are automatically connected.
- 3 Keep the timeline complete**
Organize service history, exposures, onset, treatment, and changes over time, and mark missing or unverified records honestly.

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/immune-nutritional-guide>



WORKSHEET 1 OF 5

Diagnosis, monitoring, and treatment

Optional working notes for Infectious, Immune, and Nutritional Conditions. Write only what you know. Leave anything blank that does not apply.

Diagnosis, clinician, facility, and date

Laboratory, imaging, examination, or other monitoring results and dates

Medicines, diet, devices, procedures, and response

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WORKSHEET 2 OF 5

Symptoms, function, and complications

Optional working notes for Infectious, Immune, and Nutritional Conditions. Write only what you know. Leave anything blank that does not apply.

Symptoms, frequency, duration, and changes over time

Effects on work, endurance, routines, and ordinary activities

Separately diagnosed complications or residuals and where they are documented

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WORKSHEET 3 OF 5

Connection and examination questions

Optional working notes for Infectious, Immune, and Nutritional Conditions. Write only what you know. Leave anything blank that does not apply.

In-service onset, exposure, continuity, or secondary-condition history

Service, monitoring, treatment, and complication records that may apply

Questions about diagnosis, cause, worsening, treatment, or separate complications

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WORKSHEET 4 OF 5

Records and unanswered questions

Optional working notes for Infectious, Immune, and Nutritional Conditions. 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 Infectious, Immune, and Nutritional Conditions. 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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