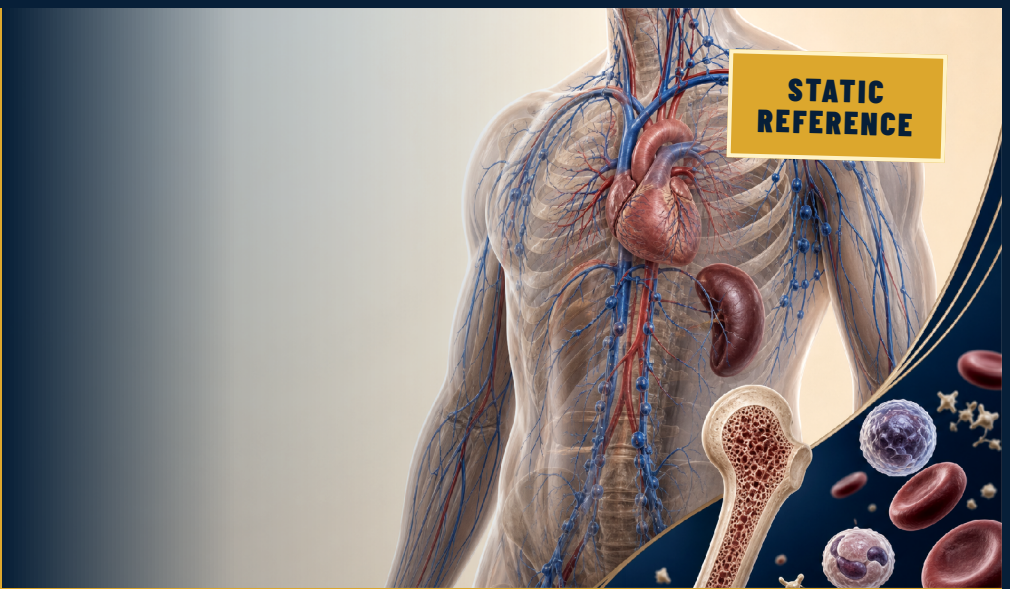


BLOOD AND LYMPHATIC

VA RATING GUIDE

Name the exact blood or lymphatic disorder, establish its current phase, and preserve the labs, treatment, and residuals its code requires.



EXACT DIAGNOSIS // LABS // TREATMENT // RESIDUALS

Name the exact blood or lymphatic disorder, establish its current phase, and preserve the labs, treatment, and residuals its code requires.

01

WHAT THE CURRENT RATING FRAMEWORK ASKS FOR

THERE IS NO SINGLE BLOOD-DISORDER FORMULA

The controlling code may use active disease or treatment, transfusions, infection frequency, laboratory thresholds, symptom crises, or separately rated residuals. Anemia, leukemia, lymphoma, myeloma, platelet disorders, and immune-cell disorders require diagnosis-specific evidence.

EXACT DIAGNOSIS

Identify the disease, subtype, affected cell line, pathology, and controlling diagnostic code.

CURRENT PHASE

Document active disease, treatment, remission, watchful waiting, relapse, or post-treatment status.

RESIDUALS

Separate lasting organ, nerve, bone, infection, fatigue, or treatment effects under the proper code.

02

SERVICE-CONNECTION PATHS

DIRECT

The diagnosed disease is medically linked to an in-service illness, event, exposure, treatment, or onset.

NAMED PRESUMPTION

The exact disease and qualifying service meet a current toxic-exposure, herbicide, Camp Lejeune, or other named presumption.

SECONDARY OR TREATMENT

A service-connected disease, blood loss, organ disorder, medication, or cancer treatment caused or aggravated the blood condition.

04

BUILD THE RECORD

1

EXACT DIAGNOSIS

Hematology notes, pathology, marrow testing, flow cytometry, genetics, and disease subtype when applicable.

2

SERIAL LABORATORIES

CBC trends, differential, platelets, iron studies, immune studies, or other code-specific values.

3

TREATMENT TIMELINE

Medication, infusion, transfusion, radiation, transplant, surgery, and start and stop dates.

4

DISEASE PHASE

Active disease, treatment, remission, relapse, surveillance, and mandatory follow-up examinations.

5

RESIDUALS

Infection, bleeding, bone, nerve, kidney, heart, lung, fatigue, or treatment effects diagnosed and measured separately.

6

SERVICE ROUTE

Exposure and service facts, exact presumption eligibility, onset, or a reasoned direct or secondary nexus.

06

BLOOD AND LYMPHATIC CAUSES AND EFFECTS TO EVALUATE

These disorders have many causes. A hematology diagnosis and veteran-specific medical reasoning are essential.

CONDITIONS OR TREATMENTS THAT MAY AFFECT BLOOD

Blood loss or malabsorption // kidney or immune disease // infection // medication or therapy // toxic exposure // marrow or lymphatic cancer

DISTINCT EFFECTS TO DIAGNOSE AND DOCUMENT

Fatigue or shortness of breath // bleeding or clotting // repeated infection // bone or organ damage // neuropathy // treatment residuals

07

DO THIS, NOT THAT

DO

- Use the exact hematology diagnosis.
- Preserve serial labs and treatment dates.
- Separate active disease from residuals.

DO NOT

- Assume all anemia uses one rating method.
- Use one old CBC as the whole record.
- Assume every exposure creates a presumption.

