

Hernia

VA Claim Guide

Repairability, recurrence, size, and painful activity are the rating facts.

Static Reference

Hernia // DC 7338

Repairability, recurrence, size, and painful activity are the rating facts.

01

WHAT THE CURRENT RATING FRAMEWORK ASKS FOR

Identify the hernia type before applying the code

Current DC 7338 addresses inguinal and femoral hernias. Hiatal hernia follows a different code. For DC 7338, the key facts include repairability, duration, size, recurrence, and pain with ordinary movement.

Status

Is it repaired, repairable, recurrent, or medically irreparable?

Measurement

Document whether the hernia has persisted at least 12 months and its measured size.

Activity

Record pain with bending, daily activities, walking, stairs, and other movement.

02

Service-connection paths

Direct

A hernia beginning in service or medically linked to lifting, injury, surgery, or another in-service event.

Secondary

A service-connected condition or its treatment caused or aggravated the hernia.

Residuals

After repair, separately identify recurrence, painful or unstable scars, nerve symptoms, or other residuals without duplicating the same symptom.

03

Symptoms

Medically recognized symptoms. A diagnosis still requires appropriate medical evaluation.



Groin bulge



Groin discomfort or pain



Heaviness or burning



Symptoms worse with straining



Symptoms worse with lifting, coughing, or standing



Symptoms that improve with rest

04

Build the record

1

Diagnosis

Physical examination and imaging when the diagnosis is unclear.

2

Type and side

Inguinal, femoral, hiatal, incisional, or another hernia.

3

Size and duration

Measurements and proof that the condition persisted over time.

4

Repairability

Surgical opinion, support device, and reasons repair is not feasible.

5

Surgery

Operative report, recurrence, post-op follow-up, and scar findings.

6

Activity pain

Bending, walking, stairs, lifting, work, and daily-living limits.

05

Why claims break down

Recurring problems in the reviewed service-connection record, plus condition-specific rating gaps.

A

Wrong code

A hiatal or other hernia was evaluated as though every hernia used DC 7338.

B

No persuasive nexus

The current hernia was not medically linked to service.

C

Repair facts missing

The record did not establish recurrence, repairability, or medical irreparability.

D

Size and pain vague

Measurements, 12-month duration, and activity-specific pain were not documented.

06

Secondary relationships appearing in board appeals

These are claim patterns, not proof that one condition medically causes another.

This condition claimed as secondary to

Spine conditions // Abdominal or GU surgery // Knee limitations // PTSD // GERD or ulcer disease

Other conditions claimed secondary to this

Erectile dysfunction // Surgical scars // GERD // Depressive disorders

07

Do this, not that

Do

- Name the exact hernia type.
- Get a current measurement and repair opinion.
- Describe pain by activity.

Do not

- Apply DC 7338 to a hiatal hernia.
- Use only a photo of the bulge.
- Ignore recurrence or scar residuals.

