

# CELIAC CLAIM IN ONE PAGE

CELIAC DISEASE

MALABSORPTION FILE

Confirm the autoimmune diagnosis, connect it to service, document the prescribed diet, and measure malabsorption and systemic effects.

## 01 Four parts of the celiac file

### 01 CONFIRM CELIAC DISEASE

Use an appropriate serum antibody test or endoscopy with biopsy.

### 02 CONNECT IT TO SERVICE

Document in-service onset, symptoms, exposure theory, continuity, and medical nexus as applicable.

### 03 SHOW TREATMENT

Record the medically prescribed gluten-free diet, adherence, response, and persistent symptoms.

### 04 MEASURE MALABSORPTION

Use diarrhea history, nutritional labs, biopsy, weight change, weakness, and systemic effects.

## 02 Evidence architecture

### DIAGNOSIS

Preserve serology, endoscopy, biopsy, gastroenterology assessment, and differential diagnosis.

### DIET

Document when a clinician prescribed the gluten-free diet and what changed after treatment.

### DEFICIENCIES

Track iron, folate, B12, vitamin D, anemia, bone effects, and other nutritional findings.

### SYSTEMIC EFFECTS

Connect weakness, fatigue, dermatitis, neurologic effects, weight loss, or other manifestations to celiac disease.

## 03 Build one connected evidence record

### 1 SERVICE HISTORY

Identify gastrointestinal complaints, weight changes, anemia, rashes, and relevant exposures or events.

### 2 DIAGNOSTIC TESTING

Include the qualifying antibody test or biopsy and the clinician's interpretation.

### 3 DIET EVIDENCE

Use prescriptions, dietitian notes, adherence history, response, and accidental-exposure effects.

### 4 MALABSORPTION EVIDENCE

Include laboratory trends, weight history, nutritional treatment, and villous atrophy findings.

### 5 MEDICAL OPINION

Address onset, mechanism, alternative diagnoses, and the relationship to service.

#### THE RECORD SHOULD EXPLAIN

### Why these facts support this veteran's claim

- What evidence was reviewed
- When the condition and limitations began
- Which legal or medical pathway applies
- How competing explanations were addressed

Diet preference alone does not confirm celiac disease. Separate celiac disease from non-celiac gluten sensitivity and other causes of gastrointestinal symptoms.

## 04 Current DC 7355 rating ladder

80%

Malabsorption with wasting, nutritional deficiencies, systemic manifestations, anemia, and specified abdominal symptoms.

50%

Diet-managed chronic diarrhea with nutritional deficiencies and systemic manifestations or villous atrophy.

30%

Chronic diarrhea managed by a medically prescribed diet without nutritional deficiencies.

COMPARE

Consider DC 7328 when malabsorption is the predominant disability, as directed by the schedule.

## 05 Before you file

✓ Diagnosis confirmed correctly

✓ Service path documented

✓ Diarrhea pattern described

✓ Systemic effects medically linked

✓ Biopsy or antibody evidence included

✓ Prescribed diet established

✓ Nutritional labs assembled

✓ Current rating criteria applied

