



MIGRAINE CLAIMS

MIGRAINES SECONDARY TO TBI OR CERVICAL DISABILITY

A calibrated guide to service connection, attack documentation, and the DC 8100 rating criteria.



CLINICAL FIELD REFERENCE

FOUR POINTS TO UNDERSTAND

TBI

POST-TRAUMATIC HEADACHE

Document the injury, headache onset, neurological history, and whether the headache phenotype is rated under DC 8100.

NECK

CERVICOGENIC MECHANISM

Identify cervical pathology, referred-pain pattern, examination findings, and the relationship to migraine attacks.

PYRAMID

AVOID DUPLICATE COMPENSATION

VA cannot compensate the same manifestation twice under different diagnostic codes.

OPINION

DIFFERENTIATE THE SYMPTOMS

The medical record should distinguish migraine manifestations from overlapping TBI, neck, or vestibular symptoms when possible.

Apply the current regulation and case law to the individual record. Attack frequency, severity, duration, and functional impact should be documented accurately and consistently.

