

NEXUS LETTER
RED FLAGS



QUALITY CHECK

Problems that can reduce the weight of an otherwise favorable opinion.

A favorable conclusion is not automatically persuasive. Review the finished opinion for factual, medical, and authenticity problems before submitting it.

WRONG FACTS

Incorrect service dates, diagnosis, event, medication, symptom onset, or treatment history.

NO RATIONALE

A conclusion with no visible medical explanation connecting the evidence to the result.

SPECULATIVE WORDING

“Could be,” “possibly,” or “cannot rule out” without a sufficiently definite opinion.

WRONG DIRECTION

The letter discusses A causing B when the actual claim alleges B caused or aggravated A.

IGNORED CONTRARY EVIDENCE

Major risk factors, long gaps, prior injuries, or negative testing are left unaddressed.

GENERIC LITERATURE

Articles are quoted without explaining how the research applies to this veteran’s medical history.

CREDENTIAL MISMATCH

The provider’s expertise does not reasonably fit a specialized medical question.

BOILERPLATE LANGUAGE

The analysis reads like a form and contains little condition-specific or veteran-specific reasoning.

GUARANTEED OUTCOME

A provider or company promises a particular rating, effective date, or favorable decision.

BEFORE FILING

FINAL AUTHENTICITY AND SCOPE CHECK

1 SIGNED AND DATED

Confirm provider name, credentials, signature, date, and contact information.

2 CORRECT VETERAN AND CONDITION

Check names, claim direction, diagnosis, and relevant dates.

3 INDEPENDENT CONCLUSION

The letter should reflect the provider’s own judgment, not words the veteran demanded.

4 COMPLETE THEORY

Confirm causation and aggravation are separately addressed when both are raised.

5 NO HIDDEN LIMITATIONS

Read qualifications, uncertainty, exclusions, and assumptions in the entire document.

DO NOT SUBMIT A KNOWN FACTUAL ERROR

Ask the provider to correct objective mistakes. Do not ask the provider to change an unfavorable medical conclusion merely because it does not help the claim.

FAVORABLE IS NOT THE SAME AS PROBATIVE. A letter must be medically competent, factually accurate, and reasoned before its conclusion can carry meaningful weight.

