

A PTSD service-connection claim generally needs **all three elements** below. The evidence needed for the stressor depends on which legal pathway applies.

01 THE THREE THINGS YOU MUST PROVE

1



CURRENT PTSD DIAGNOSIS

A current diagnosis that meets DSM-5 requirements.

38 CFR § 4.125(a)

2



CREDIBLE IN-SERVICE STRESSOR

A qualifying traumatic event during military service.

38 CFR § 3.304(f)

3



MEDICAL NEXUS

A qualified medical link between the diagnosis and the stressor.

“At least as likely as not”



ALL THREE ELEMENTS MUST BE SUPPORTED.

A verified stressor alone is not a complete PTSD claim.

02 WHICH STRESSOR PATHWAY APPLIES?

Not every PTSD claim requires the same corroborating evidence.



COMBAT

Lay testimony may establish a consistent combat stressor.



FEAR OF HOSTILE ACTIVITY

Special rule requires VA psychiatrist or psychologist confirmation.



MST / PERSONAL ASSAULT

Alternative evidence and behavioral markers may corroborate the event.



OTHER NON-COMBAT EVENT

Usually needs records or other evidence corroborating the event.

Other regulatory paths also apply to PTSD diagnosed during service and former prisoners of war.

03 BUILD THE RECORD AROUND THE MISSING ELEMENT



DIAGNOSIS

Mental-health evaluation, treatment notes, and the PTSD DBQ/C&P examination.



STRESSOR

Personnel or unit records, official reports, buddy statements, or qualifying markers.



NEXUS

A reasoned medical opinion connecting current PTSD to the identified event.



IMPACT

Accurate examples of symptom frequency, severity, duration, and occupational and social impairment.

04 BEFORE YOU FILE

- ✓ Current DSM-5 PTSD diagnosis documented
- ✓ Specific in-service stressor identified
- ✓ Correct stressor evidence pathway selected
- ✓ Medical nexus supported

- ✓ Treatment and medical records gathered
- ✓ Personal and relevant lay statements prepared
- ✓ Symptoms and functional impact described accurately
- ✓ File reviewed for completeness and consistency

Do not shape your account around a chart. Be accurate, specific, and consistent about your own history and symptoms.