

PTSD EVIDENCE

BUILD THE RIGHT RECORD



More evidence is not automatically better. The useful question is: **what fact does this item help establish?**

01 MATCH EACH ITEM TO A CLAIM ELEMENT

D

CURRENT DIAGNOSIS

Useful records: Mental health evaluation, DSM-5 diagnosis, treatment notes, PTSD DBQ, and C&P examination.

Answers: Is PTSD currently diagnosed?

S

IN-SERVICE STRESSOR

Useful records: Service and personnel records, unit history, official reports, qualifying markers, and relevant lay statements.

Answers: Did the claimed event occur?

N

MEDICAL NEXUS

Useful records: A reasoned medical opinion connecting current PTSD and symptoms to the identified in-service stressor.

Answers: Is the current condition linked to service?

I

CURRENT IMPACT

Useful records: Treatment history and accurate examples of symptom frequency, severity, duration, and occupational and social impairment.

Answers: How does PTSD affect functioning now?

02 COMMON EVIDENCE SOURCES AND WHAT THEY CAN SHOW

SR

SERVICE TREATMENT RECORDS

In-service complaints, treatment, injuries, behavioral observations, or a diagnosis made during service.

DIAGNOSIS · STRESSOR

PR

PERSONNEL RECORDS

Assignments, locations, awards, performance changes, disciplinary actions, and requests for transfer.

STRESSOR · MARKERS

UR

UNIT AND OFFICIAL RECORDS

Unit histories, deck logs, morning reports, incident investigations, casualty information, and police reports.

STRESSOR

MR

MEDICAL AND COUNSELING RECORDS

Diagnosis, symptom history, treatment, continuity, functional impact, and possible personal assault markers.

DIAGNOSIS · IMPACT

LS

LAY STATEMENTS

Firsthand observations from the veteran, family, friends, roommates, clergy, or fellow service members.

STRESSOR · IMPACT

MO

MEDICAL OPINION

Explains the clinical reasoning that connects the diagnosis and symptoms to the claimed stressor.

NEXUS

03 · RATEMYVSO RESEARCH SNAPSHOT

EVIDENCE TOPICS DISCUSSED IN PTSD STRESSOR DECISIONS

172,640
BVA DECISIONS SCANNED

Decision-level text matches. Categories can overlap. A mention does not mean the evidence caused the outcome.

Causation theory discussed		56,089
Combat decorations or combat rule		17,511
Fear of hostile activity rule		13,265
Unit records, morning reports, or deck logs		9,542
JSRRC records research		7,290
Stressor described as conceded or corroborated		6,142

WHAT THIS DATA CAN TELL YOU It describes recurring topics in published Board decisions. It is not an evidence checklist, grant-rate prediction, or instruction to shape testimony.

04 QUALITY CHECKS BEFORE FILING

- ☒ Each item supports a specific disputed fact
- ☒ Names, units, locations, and dates are as accurate as possible
- ☒ Statements explain firsthand knowledge
- ☒ Medical opinions include reasoning, not only a conclusion
- ☒ Conflicts in the record are identified and explained honestly
- ☒ Originals are preserved and submissions are readable

Do not collect records at random. Identify the missing element, then gather the evidence most capable of proving it.