



DEPARTMENT OF VETERANS AFFAIRS
Portland Regional Office
100 SW Main St Fl 2
Portland, OR 97204-2998

SHANE M. KOHFIELD

VA File Number

Rating Decision
September 30, 2013

INTRODUCTION

The records reflect that you are a veteran of the Gulf War Era. You served in the Marine Corps from February 14, 2005 to July 30, 2012. You filed a new claim for benefits that was received on October 17, 2012. Based on a review of the evidence listed below, we have made the following decisions on your claim.

DECISION

1. Service connection for bipolar disorder (previously rated as post traumatic stress disorder) is granted with an evaluation of 50 percent effective September 13, 2013.
2. Evaluation of history of kidney stone (claimed as chronic kidney stones), which is currently 30 percent disabling, is continued.
3. Evaluation of traumatic brain injury with dizziness (claimed as TBI and tremors), which is currently evaluated 40 percent disabling, is proposed to be decreased to 0 percent.
4. Evaluation of chronic fatigue syndrome (claimed as chronic fatigue), which is currently evaluated 20 percent disabling, is proposed to be decreased to 0 percent.
5. Service connection for adrenal deficiency is denied.

DEPARTMENT OF VETERANS AFFAIRS



August 21, 2014

SHANE M KOHFIELD

In Reply Refer To: 348/S02/MS

KOHFIELD, Shane Michael

Dear Mr. Kohfield:

We made a decision on your claim for service connected compensation received on November 12, 2013. We have also made a determination on our proposal to reduce benefits dated October 08, 2013 to include your request for a hearing received on November 12, 2013.

This letter tells you about your entitlement amount and payment start date and what we decided. It includes a copy of our rating decision that gives the evidence used and reasons for our decision. We have also included information about additional benefits, what to do if you disagree with our decision, and who to contact if you have questions or need assistance.

Your Award Amount and Payment Start Date

Your monthly entitlement amount is shown below:

Monthly Entitlement Amount	Payment Start Date	Reason For Change
\$2,858.24	Dec 1, 2013	Cost of Living Adjustment, Individual Unemployability Adjustment
2,858.24	Jul 1, 2014	Individual Unemployability Adjustment, Compensation Rating Adjustment

We are paying you as a single veteran with no dependents.

You Can Expect Payment

Your payment begins the first day of the month following your effective date. You will receive a payment covering the initial amount due under this award, minus any withholdings. Thereafter, payment will be made at the beginning of each month for the prior month. For example, benefits due for May are paid on or about June 1.

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4. Evaluation of lumbar strain (PEB referred as kyphosis)(claimed as kyphosis), which is currently evaluated 20 percent disabling, is decreased to 10 percent effective June 13, 2014.
5. Evaluation of traumatic brain injury with dizziness (claimed as TBI and tremors), which is currently evaluated 40 percent disabling, is decreased to 0 percent effective June 12, 2014.
6. Evaluation of tension/migraine headaches, which is currently 0 percent disabling, is continued.
7. A decision on entitlement to compensation for adrenal deficiency/hypothalamus dysfunction/ growth hormone deficiency is deferred.

EVIDENCE

- All the evidence listed and considered in the rating decision, Dated September 30, 2013
- VA Examination, dated June 12, 2014
- VA Examination, dated June 13, 2014
- Notes from hearing held May 15, 2014
- VA Form 21-526EZ Veteran's Fully Developed Claim, received August 29, 2013
- VA Form 21-4138, Statement in Support of Claim, received November 12, 2013
- VA Form 21-8940, Application for Individual Unemployability, Received November 12, 2013
- Private Treatment Records, OHSU, dated November 11, 2013
- Statement from David Wegner MD dated November 15, 2013
- Service treatment records for the period of service listed above
- VA Form 21-4138, Statement in Support of Claim, received March 6, 2014
- VA Form 21-4138, Statement in Support of Claim, received November 26, 2013
- Notification to veteran dated January 21, 2014, of discontinued vocational rehabilitation program
- Private Treatment Records, Huey Meeker MD submitted by veteran March 6, 2014
- VA Form 21-4138, Statement in Support of Claim, received March 31, 2014
- Naval Hospital Bremerton periodic evaluation dated December 26, 2013
- Treatment records, OHSU, submitted by veteran on April 1, 2014
- VA Form 21-4138, Statement in Support of Claim, received April 1, 2014
- VA Form 21-4138, Statement in Support of Claim, received April 2, 2014
- Treatment records, OHSU, submitted by veteran on April 11, 2014
- VA Form 21-4138, Statement in Support of Claim, received June 20, 2014

Kohfield, Shane Michael

We determined that the following service connected conditions have improved, so we decreased your assigned percentages:

Medical Description	Old Percent (%) Assigned	New Percent (%) Assigned	Effective Date
Lumbar strain(PEB referred as kyphosis)	20%	10%	Jun 13, 2014
Traumatic brain injury	40%	0%	Jun 12, 2014

We determined that the following service connected conditions haven't changed:

Medical Description	Percent (%) Assigned
Tension/migraine headaches	0%

We have deferred a decision on the following issues because we need additional information or evidence:

- Adrenal deficiency/hyophthalmus dysfunction/ growth hormone deficiency

Entitlement to individual unemployability is granted effective November 12, 2013.

We enclosed a VA Form 21-8764, "Disability Compensation Award Attachment-Important Information," which explains certain factors concerning your benefits.

Your overall or combined rating was 90% with individual unemployability effective November 12, 2013. Your overall or combined rating increased to 100% on June 13, 2014 in which individual unemployability became a moot point. We do not add the individual percentages of each condition to determine your combined rating. We use a combined rating table that considers the effect from the most serious to the least serious conditions.

REASONS FOR DECISION

1. Entitlement to individual unemployability.

Entitlement to individual unemployability is granted because the claimant is unable to secure or follow a substantially gainful occupation as a result of service-connected disabilities.

The evidence shows symptoms associated with your service connected disabilities render you unable to obtain and maintain substantially gainful employment. The effective date is November 13, 2013, the date of your claim. As of June 13, 2014, your combined evaluation for compensation is 100 percent. Therefore as of that date IU is a moot issue.

2. Evaluation of post traumatic stress disorder with bipolar disorder (PEB referred as anxiety disorder)(claimed as night sweats, cognitive impairment, short-term memory loss, insomnia, and PTSD) currently evaluated as 50 percent disabling.

The evaluation of post traumatic stress disorder with bipolar disorder (PEB referred as anxiety disorder)(claimed as night sweats, cognitive impairment, short-term memory loss, insomnia, and PTSD) is increased to 70 percent disabling effective June 13, 2014, the day your VA examination showed you meet the criteria for a 70 percent. Please note the examiner noted chronic sleep impairment. However, that is a symptoms used to support your 60 percent evaluation for chronic fatigue syndrome.

We have assigned a 70 percent evaluation for your post traumatic stress disorder (PEB referred as anxiety disorder)(claimed as night sweats, cognitive impairment, short-term memory loss, insomnia, and PTSD) based on:

- Speech intermittently obscure
- Speech intermittently illogical
- Speech intermittently irrelevant
- Difficulty in adapting to a worklike setting
- Difficulty in adapting to stressful circumstances
- Occupational and social impairment, with deficiencies in most areas, such as work, school, family relations, judgment, thinking, or mood
- Disturbances of motivation and mood
- Difficulty in establishing and maintaining effective work and social relationships
- Anxiety
- Depressed mood
- Mild memory loss .

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"total." However, not every facet has every level of severity. The Consciousness facet, for example, does not provide for an impairment level other than "total" since any level of impaired consciousness would be totally disabling. A 100 percent evaluation will be assigned if "total" is the level of evaluation for one or more facets. If no facet is evaluated as "total," the overall percentage evaluation will be assigned based on the level of the highest facet as follows: 0 = noncompensable; 1 = 10 percent; 2 = 40 percent; and 3 = 70 percent. For example, a 70 percent evaluation will be assigned if 3 is the highest level of evaluation for any facet.

A level of severity of "0" has been assigned for your Memory, Attention, Concentration, Executive Functions Facet based on:

- No complaints of impairment of memory, attention, concentration, or executive functions

what?

A level of severity of "0" has been assigned for your Judgment Facet based on:

- Normal

what?

A level of severity of "0" has been assigned for your Social Interaction based on:

- Social interaction is routinely appropriate

what?

A level of severity of "0" has been assigned for your Orientation Facet based on:

- Always oriented to person, time, place, and situation

A level of severity of "0" has been assigned for your Visual Spatial Orientation based on:

- Normal

A level of severity of "0" has been assigned for your Subjective Symptoms based on:

- Subjective symptoms that do not interfere with work; instrumental activities of daily living; or work, family, or other close relationships. Examples are: mild or occasional headaches, mild anxiety

what?

A level of severity of "0" has been assigned for your Neurobehavioral Effects based on:

- One or more neurobehavioral effects that do not interfere with workplace interaction or social interaction. Examples of neurobehavioral effects are: Irritability, impulsivity, unpredictability, lack of motivation, verbal aggression, physical aggression, belligerence, apathy, lack of empathy, moodiness, lack of cooperation, inflexibility, and impaired awareness of disability. Any of these effects may range from slight to severe, although verbal and physical aggression are likely to have a more serious impact on workplace interaction and social interaction than some of the other effects

what?

A level of severity of "0" has been assigned for your Communication based on:

- Able to communicate by spoken and written language (expressive communication), and to comprehend spoken and written language

An overall noncompensable evaluation is assigned for your traumatic brain injury with dizziness (claimed as TBI and tremors) based on the highest level of severity of "0".

A higher evaluation of 10 percent is not warranted unless the evidence shows:

- Comprehension or expression, or both, of either spoken language or written language is only occasionally impaired. Can communicate complex ideas; or,
- Mildly impaired judgment. For complex or unfamiliar decisions, occasionally unable to identify, understand, and weigh the alternatives, understand the consequences of choices, and make a reasonable decision; or,
- A complaint of mild loss of memory (such as having difficulty following a conversation, recalling recent conversations, remembering names of new acquaintances, or finding words, or often misplacing items), attention, concentration, or executive functions, but without objective evidence on testing; or,
- Motor activity normal most of the time, but mildly slowed at times due to apraxia (inability to perform previously learned motor activities, despite normal motor function); or,
- One or more neurobehavioral effects that occasionally interfere with workplace interaction, social interaction, or both but do not preclude them; or,
- Occasionally disoriented to one of the four aspects (person, time, place, situation) of orientation; or,
- Social interaction is occasionally inappropriate; or,
- Three or more subjective symptoms that mildly interfere with work; instrumental activities of daily living; or work, family, or other close relationships. Examples of findings that might be seen at this level of impairment are: intermittent dizziness, daily mild to moderate headaches, tinnitus, frequent insomnia, hypersensitivity to sound, hypersensitivity to light; or,
- Mildly impaired. Occasionally gets lost in unfamiliar surroundings, has difficulty reading maps or following directions. Is able to use assistive devices such as GPS (global positioning system).

6. Evaluation of tension/migraine headaches currently evaluated as 0 percent disabling.

The evaluation of tension/migraine headaches is continued as 0 percent disabling. {38 CFR §3.321(a); 38 CFR §3.321(b)(1)}

We have assigned a noncompensable evaluation for your migraine headaches based on:

- Less frequent attacks

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Kohfield, Shane Michael

Your payment will be directed to the financial institution and account number that you specified. To confirm when your payment was deposited, please contact that financial institution.

*If this account is no longer open,
please notify us immediately.*

What We Decided

We determined that the following service connected conditions have worsened, so we granted an increase in your assigned percentage:

Medical Description	Old Percent (%) Assigned	New Percent (%) Assigned	Effective Date
Post traumatic stress disorder with bipolar disorder (PEB referred as anxiety disorder)(claimed as night sweats, cognitive impairment, short-term memory loss, insomnia, and PTSD)	50%	70%	Jun 13, 2014
Chronic fatigue syndrome (claimed as chronic fatigue)	20%	60%	Jun 12, 2014

An exam will be scheduled in the future to evaluate the severity of your service connected PTSD and Chronic Fatigue.

Kohfield, Shane Michael

We have enclosed a copy of your Rating Decision for your review. It provides a detailed explanation of our decision, the evidence considered, and the reasons for our decision. Your Rating Decision and this letter constitute our decision based on your claim received on November 12, 2013.

Are You Entitled to Additional Benefits?

The Department of Education provides a program for Veterans to discharge their student loans. To be eligible, the Veteran must have a service-connected disability(ies) that is 100% disabling, or be totally disabled based on an Individual Unemployability determination. For more information concerning this benefit, please contact the U.S. Department of Education, Disability Discharge Loan Servicing Center P.O. Box 5200 Greenville, TX 75403-5200 or toll free at 1-800-433-7327. Visit their website at <http://ifap.ed.gov/disabilitydischarge/va.html>.

You may be eligible for medical care by the VA health care system for any service connected disability. You may apply for medical care or treatment at the nearest medical facility. If you apply in person, present a copy of this letter to the Patient Registration/Eligibility Section. If you apply by writing a letter, include your VA file number and a copy of this letter.

REDUCE OR ELIMINATE YOUR MEDICAL CO-PAYMENTS

If you receive care at a VA medical facility, **please call our Health Benefits Call Center at 1-877-222-VETS (8387) or notify your local VA medical center** of this change in your compensation benefits. This rating decision may reduce or eliminate your co-payments for your VA-provided medical care. You may also be eligible for a refund based on this rating decision. Information regarding VA health care eligibility and co-payments is available at our website **www.va.gov/healtheligibility**.

You should contact your State office of veteran's affairs for information on any tax, license, or fee-related benefits for which you may be eligible as a veteran (or surviving dependent of a veteran). State offices of veteran's affairs are available at <http://www.va.gov/statedva.htm>.

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The overall evidentiary record shows that the severity of your disability most closely approximates the criteria for a 70 percent disability evaluation.

A higher evaluation of 100 percent is not warranted unless the evidence shows total occupational and social impairment, due to such symptoms as:

- gross impairment in thought processes or communication
- persistent delusions or hallucinations
- grossly inappropriate behavior
- persistent danger of hurting self or others
- intermittent inability to perform activities of daily living (including maintenance of minimal personal hygiene)
- disorientation to time or place
- memory loss for names of close relatives, own occupation, or own name.

Since there is a likelihood of improvement, the assigned evaluation is not considered permanent and is subject to a future review examination.

3. Evaluation of chronic fatigue syndrome (claimed as chronic fatigue) currently evaluated as 20 percent disabling.

The evaluation of chronic fatigue syndrome (claimed as chronic fatigue) is increased to 60 percent disabling effective June 12, 2014, effective June 12, 2014, the date of the VA exam showing you meet the criteria for a 60 percent evaluation..

We have assigned a 60 percent evaluation for your chronic fatigue syndrome (CFS) based on:

- Symptoms, which are nearly constant and restrict routine daily activities to less than 50 percent of the pre-illness level

A higher evaluation of 100 percent is not warranted unless there are debilitating fatigue, cognitive impairments (such as inability to concentrate, forgetfulness, confusion), or a combination of other signs and symptoms, which are nearly constant and so severe as to restrict routine daily activities almost completely and which may occasionally preclude self-care.

Since there is a likelihood of improvement, the assigned evaluation is not considered permanent and is subject to a future review examination.

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4. Evaluation of lumbar strain (PEB referred as kyphosis)(claimed as kyphosis) currently evaluated as 20 percent disabling.

The evaluation of lumbar strain (PEB referred as kyphosis)(claimed as kyphosis) is decreased to 10 percent effective June 13, 2014, the date of the VA exam showing you meet evaluation criteria for a 10 percent evaluation.

We have assigned a 10 percent evaluation for your lumbar strain (PEB referred as kyphosis) (claimed as kyphosis) based on:

- 38 CFR §4.59 allows consideration of functional loss due to painful motion to be rated to at least the minimum compensable rating for a particular joint. Since you demonstrate painful motion of the thoracolumbar spine, the minimum compensable evaluation of 10 percent is assigned

Additional symptom(s) include:

- Combined range of motion of the thoracolumbar spine within normal range
- Forward flexion of the thoracolumbar spine within normal range.

The provisions of 38 CFR §4.40 and §4.45 concerning functional loss due to pain, fatigue, weakness, or lack of endurance, incoordination, and flare-ups, as cited in DeLuca v. Brown and Mitchell v. Shinseki, have been considered and applied under 38 CFR §4.59.

A higher evaluation of 20 percent is not warranted unless the evidence shows forward flexion of the thoracolumbar spine greater than 30 degrees but not greater than 60 degrees; or, the combined range of motion of the thoracolumbar spine not greater than 120 degrees; or, muscle spasm or guarding severe enough to result in an abnormal gait or abnormal spinal contour such as scoliosis, reversed lordosis, or abnormal kyphosis.

5. Evaluation of traumatic brain injury with dizziness (claimed as TBI and tremors) currently evaluated as 40 percent disabling.

The evaluation of traumatic brain injury with dizziness (claimed as TBI and tremors) is decreased to 0 percent effective June 12, 2014. The evidence from the September 2013 and June 2014 VA exams show you no longer meet the evaluation criteria for a 40 percent evaluation for TBI. The VA examiners stated that symptoms you report are more than likely related to mental health disorders than TBI.

The rating schedule contains ten important facets of TBI related to cognitive impairment and subjective symptoms. It provides criteria for levels of impairment for each facet, as appropriate, ranging from 0 to 3, and a 5th level, the highest level of impairment, labeled

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Traumatic brain injury	40%	0%	Jun 12, 2014

We determined that the following service connected conditions haven't changed:

Medical Description	Percent (%) Assigned
Tension/migraine headaches	0%

We have deferred a decision on the following issues because we need additional information or evidence:

- Adrenal deficiency/hypothalamic dysfunction/ growth hormone deficiency

Entitlement to individual unemployability is granted effective November 12, 2013.

We enclosed a VA Form 21-8764, "Disability Compensation Award Attachment-Important Information," which explains certain factors concerning your benefits.

Your overall or combined rating was 90% with individual unemployability effective November 12, 2013. Your overall or combined rating increased to 100% on June 13, 2014 in which individual unemployability became a moot point. We do not add the individual percentages of each condition to determine your combined rating. We use a combined rating table that considers the effect from the most serious to the least serious conditions.

REASONS FOR DECISION

1. Entitlement to individual unemployability.

Entitlement to individual unemployability is granted because the claimant is unable to secure or follow a substantially gainful occupation as a result of service-connected disabilities.

The evidence shows symptoms associated with your service connected disabilities render you unable to obtain and maintain substantially gainful employment. The effective date is November 13, 2013, the date of your claim. As of June 13, 2014, your combined evaluation for compensation is 100 percent. Therefore as of that date IU is a moot issue.

2. Evaluation of post traumatic stress disorder with bipolar disorder (PEB referred as anxiety disorder)(claimed as night sweats, cognitive impairment, short-term memory loss, insomnia, and PTSD) currently evaluated as 50 percent disabling.

The evaluation of post traumatic stress disorder with bipolar disorder (PEB referred as anxiety disorder)(claimed as night sweats, cognitive impairment, short-term memory loss, insomnia, and PTSD) is increased to 70 percent disabling effective June 13, 2014, the day your VA examination showed you meet the criteria for a 70 percent. Please note the examiner noted chronic sleep impairment. However, that is a symptoms used to support your 60 percent evaluation for chronic fatigue syndrome.

We have assigned a 70 percent evaluation for your post traumatic stress disorder (PEB referred as anxiety disorder)(claimed as night sweats, cognitive impairment, short-term memory loss, insomnia, and PTSD) based on:

- Speech intermittently obscure
- Speech intermittently illogical
- Speech intermittently irrelevant
- Difficulty in adapting to a worklike setting
- Difficulty in adapting to stressful circumstances
- Occupational and social impairment, with deficiencies in most areas, such as work, school, family relations, judgment, thinking, or mood
- Disturbances of motivation and mood
- Difficulty in establishing and maintaining effective work and social relationships
- Anxiety
- Depressed mood
- Mild memory loss .

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"total." However, not every facet has every level of severity. The Consciousness facet, for example, does not provide for an impairment level other than "total" since any level of impaired consciousness would be totally disabling. A 100 percent evaluation will be assigned if "total" is the level of evaluation for one or more facets. If no facet is evaluated as "total," the overall percentage evaluation will be assigned based on the level of the highest facet as follows: 0 = noncompensable; 1 = 10 percent; 2 = 40 percent; and 3 = 70 percent. For example, a 70 percent evaluation will be assigned if 3 is the highest level of evaluation for any facet.

A level of severity of "0" has been assigned for your Memory, Attention, Concentration, Executive Functions Facet based on:

- No complaints of impairment of memory, attention, concentration, or executive functions

A level of severity of "0" has been assigned for your Judgment Facet based on:

- Normal

A level of severity of "0" has been assigned for your Social Interaction based on:

- Social interaction is routinely appropriate

A level of severity of "0" has been assigned for your Orientation Facet based on:

- Always oriented to person, time, place, and situation

A level of severity of "0" has been assigned for your Visual Spatial Orientation based on:

- Normal

A level of severity of "0" has been assigned for your Subjective Symptoms based on:

- Subjective symptoms that do not interfere with work; instrumental activities of daily living; or work, family, or other close relationships. Examples are: mild or occasional headaches, mild anxiety

A level of severity of "0" has been assigned for your Neurobehavioral Effects based on:

- One or more neurobehavioral effects that do not interfere with workplace interaction or social interaction. Examples of neurobehavioral effects are: Irritability, impulsivity, unpredictability, lack of motivation, verbal aggression, physical aggression, belligerence, apathy, lack of empathy, moodiness, lack of cooperation, inflexibility, and impaired awareness of disability. Any of these effects may range from slight to severe, although verbal and physical aggression are likely to have a more serious impact on workplace interaction and social interaction than some of the other effects

A level of severity of "0" has been assigned for your Communication based on:

- Able to communicate by spoken and written language (expressive communication), and to comprehend spoken and written language

An overall noncompensable evaluation is assigned for your traumatic brain injury with dizziness (claimed as TBI and tremors) based on the highest level of severity of "0".

A higher evaluation of 10 percent is not warranted unless the evidence shows:

- Comprehension or expression, or both, of either spoken language or written language is only occasionally impaired. Can communicate complex ideas; or,
- Mildly impaired judgment. For complex or unfamiliar decisions, occasionally unable to identify, understand, and weigh the alternatives, understand the consequences of choices, and make a reasonable decision; or,
- A complaint of mild loss of memory (such as having difficulty following a conversation, recalling recent conversations, remembering names of new acquaintances, or finding words, or often misplacing items), attention, concentration, or executive functions, but without objective evidence on testing; or,
- Motor activity normal most of the time, but mildly slowed at times due to apraxia (inability to perform previously learned motor activities, despite normal motor function); or,
- One or more neurobehavioral effects that occasionally interfere with workplace interaction, social interaction, or both but do not preclude them; or,
- Occasionally disoriented to one of the four aspects (person, time, place, situation) of orientation; or,
- Social interaction is occasionally inappropriate; or,
- Three or more subjective symptoms that mildly interfere with work; instrumental activities of daily living; or work, family, or other close relationships. Examples of findings that might be seen at this level of impairment are: intermittent dizziness, daily mild to moderate headaches, tinnitus, frequent insomnia, hypersensitivity to sound, hypersensitivity to light; or,
- Mildly impaired. Occasionally gets lost in unfamiliar surroundings, has difficulty reading maps or following directions. Is able to use assistive devices such as GPS (global positioning system).

6. Evaluation of tension/migraine headaches currently evaluated as 0 percent disabling.

The evaluation of tension/migraine headaches is continued as 0 percent disabling. {38 CFR §3.321(a); 38 CFR §3.321(b)(1)}

We have assigned a noncompensable evaluation for your migraine headaches based on:

- Less frequent attacks