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§4.78 Computing aggravation.

In determining the effect of aggravation of visual disability, even though the visual impairment of only one eye is service connected, evaluate the vision of both eyes, before and after suffering the aggravation, and subtract the former evaluation from the latter except when the bilateral vision amounts to total disability. In the event of subsequent increase in the disability of either eye, due to intercurrent disease or injury not associated with the service, the condition of the eves before suffering the subsequent increase will be taken as the basis of compensation subject to the provisions of §3.383(a) of this chapter.

[29 FR 6718, May 22, 1964, as amended at 43 FR 45354, Oct. 2, 1978]

§4.79 Loss of use of one eye, having only light perception.

Loss of use or blindness of one eye, having only light perception, will be held to exist when there is inability to recognize test letters at 1 foot (.30m.) and when further examination of the eyes reveals that perception of objects, hand movements or counting fingers cannot be accomplished at 3 feet (.91m.), lesser extents of visions, particularly perception of objects, hand movements, or counting fingers at distances less than 3 feet (.91 m.), being considered of negligible utility. With visual acuity 5/200 (1.5/60) or less or the visual field reduced to 5° concentric contraction, in either event in both eyes, the question of entitlement on account of regular aid and attendance will be determined on the facts in the individual case.

[43 FR 45354, Oct. 2, 1978]

§4.80 Rating of one eye.

Combined ratings for disabilities of the same eye should not exceed the amount for total loss of vision of that eye unless there is an enucleation or a serious cosmetic defect added to the total loss of vision.

§§4.81-4.82 [Reserved]

§4.83 Ratings at scheduled steps and distances.

In applying the ratings for impairment of visual acuity, a person not having the ability to read at any one of the scheduled steps or distances, but reading at the next scheduled step or distance, is to be rated as reading at this latter step or distance. That is, a person who can read at 20/100 (6/30) but who cannot at 20/70 (6/21), should be rated as seeing at 20/100 (6/30).

[41 FR 34257, Aug. 13, 1976, as amended at 43 FR 45354, Oct. 2, 1978]

§4.83a Impairment of central visual acuity.

The percentage evaluation will be found from table V by intersecting the horizontal row appropriate for the Snellen index for one eye and the vertical column appropriate to the Snellen index of the other eye. For example, if one eye has a Snellen index of 5/200 (1.5/60) and the other eye has a Snellen index of 20/70 (6/21), the percentage evaluation is found in the third horizontal row from the bottom and the fourth vertical column from the left. The evaluation is 50 percent and the diagnostic code 6073.

[41 FR 11297, Mar. 18, 1976, as amended at 43 FR 45354, Oct. 2, 1978]

§4.84 Differences between distant and near visual acuity.

Where there is a substantial difference between the near and distant corrected vision, the case should be referred to the Director, Compensation and Pension Service.

[40 FR 42537, Sept. 15, 1975]

§4.84a Schedule of ratings-eye.

DISEASES OF THE EYE

		Rat- ing
6000	Uveitis	
6001	Keratitis	
6002	Scleritis	
6003	Iritis	
6004	Cyclitis	
6005	Choroiditis	
6006	Retinitis	
6007	Hemorrhage, intra-ocular, recent	
6008	Retina, detachment of	
6009	Eye, injury of, unhealed:	

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DISEASES OF THE EYE-Continued

DISEASES OF THE EYE-Continued

	Rat- ing		Rat- ing
The above disabilities, in chronic form, are to be rated from 10 percent to 100 percent for im- pairment of visual acuity or field loss, pain, rest-requirements, or episodic incapacity, com- bining an additional rating of 10 percent during continuance of active pathology. Minimum rat- ing during active pathology discontered during continuance of active pathology. Minimum rat- ing turing active pathology. Minimum rat- ing turing active pathology. Minimum rat- ing during active pathology. Minimum rat- ing turing, localized scars, atrophy, or irregular- ities of, centrally located, with irregular, duplicated enlarged or diinteral 0011 Retina, localized scars, atrophy, or irregular- ities of, centrally located, with irregular, duplicated enlarged or diinteral 0012 Glaucoma, congestive or inflammatory: Frequent attacks of considerable duration, during continuance of actual total disability	10 100 100 100 100 100 100 100 100 100	 Unilateral	1

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		Vision other eye			Plus ser	Plus service-connected Hearing loss	ig loss	
Vision one eye	5/200 (1.5/60) or less	Light perception only	No light percep- tion or anatomical loss	Total deafness one ear	10% or 20% at least one ear SC	30% at least one ear SC	40% at least one ear SC	60% or more at least one ear SC
5/200 (1.5/60) or less.	L ¹ Code LB–1 38 CFR 3.350(b)(2).	Code LB-1 38 L+½ 1 Code LB-2 M Code MB-2 a DFR 3.350(b)(2). 38 CFR or b 38 CFR 3.350(j)(2). 3.350(j)(2)(j). 3.350(j)(2)(j).	M Code MB-2 a or b 38 CFR 3.350(f)(2)(ii).	Add 1/2 step Code No additional PB-1 38 CFR SMC. 3.350(f)(2)(iv).	No additional SMC.	Add a full step Code PB-3 38 CFR	Add a full step Code PB–3 38 CFR	O Code OB-1 38 CFR 3.350(e)(1)(iii)
Light perception only.		M Code MB-1 a 38 CFR 3.350(c)(1)((iv).	M+1/2 Code MB-3 O Code OB-2 38 a or b 38 CFR CFR 3.350(e)(1)(iv).	O Code OB-2 38 CFR 3.350(e)(1)(iv).	Add ^{1/} 2 step Code PB–2 38 CFR 3.350(f)(2)(v).	3.350(f)(2)(vi). Add a full step Code PB-3 38 CFR	3.350(1)(2)(VI). O Code OB–2 38 CFR 3.350(e)(1)(iv).	O Code OB-1 38 CFR 3.350(e)(1)(iii)
No light perception or anatomical loss.			N Code NB-1 a-b O Code OB-2 38 or c 38 CFR CFR 3.350(e)(1)(iv).	O Code OB-2 38 CFR 3.350(e)(1)(iv).	Add ¹ / ₂ step Code PB–2 38 CFR 3.350(f)(2)(v).	3.350(f)(2)(iv). Add full step Code PB-3 38 CFR 3.350(f)(2)(vi).	O Code OB-2 38 CFR 3.350(e)(1)(iv).	O Code OB–1 38 CFR 3.350(e)(1)(iii)

¹ With need for aid and attendance qualifies for Subpar. m. code MB-1, b; 38 CFR 3:350(c)(1)(v). NOTE. (1) Any of the additional SMC payable under Dictator's Codes PB-1, PB-2, or PB-3 is not to exceed the rate payable under Subpar. O. (2) If in addition to any of the above the veteran has the service-connected loss or loss of use of an extremity, additional SMC is payable, not to exceed the rate payable under Subpar. O. See Dictator's Codes PB-4, PB-5, PB-6, and 38 CFR 3:350(f)(2)(vii) (A), (B), (C).

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(Authority: 38 U.S.C. 1115)

IMPAIRMENT OF CENTRAL VISUAL ACUITY

IMPAIRMENT OF CENTRAL VISUAL ACUITY-Continued

INFAINMENT OF CENTRAL VISUAL ACUT			
	Rat-		Rat- ing
	ing	6076 In the other eye 20/100 (6/30)	60
6061 Anatomical loss both eyes	⁵ 100	6076 In the other eye 20/70 (6/21)	50
6062 Blindness in both eyes having only light per-		6076 In the other eye 20/50 (6/15)	40
ception	5100	6077 In the other eye 20/40 (6/12)	30
Anatomical loss of 1 eye:		Vision in 1 eye 15/200 (4.5/60):	
6063 In the other eye 5/200 (1.5/60)	⁵ 100	6075 In the other eye 15/200 (4.5/60)	80
6064 In the other eye 10/200 (3/60)	6 90	6075 In the other eye 20/200 (6/60)	70
6064 In the other eye 15/200 (4.5/60)	⁶ 80	6076 In the other eye 20/100 (6/30)	60
6064 In the other eye 20/200 (6/60)	6 70	6076 In the other eye 20/70 (6/21)	40
6065 In the other eye 20/100 (6/30)	⁶ 60	6076 In the other eye 20/50 (6/15)	30
6065 In the other eye 20/70 (6/21)	⁶ 60	6077 In the other eye 20/40 (6/12)	20
6065 In the other eye 20/50 (6/15)	⁶ 50	Vision in 1 eye 20/200 (6/60):	20
6066 In the other eye 20/40 (6/12)	⁶ 40	6075 In the other eye 20/200 (6/60)	70
Blindness in 1 eye, having only light perception:		6076 In the other eye 20/100 (6/30)	60
6067 In the other eye 5/200 (1.5/60)	⁵ 100	6076 In the other eye 20/70 (6/21)	40
6068 In the other eye 10/200 (3/60)	5 90	6076 In the other eye 20/50 (6/15)	30
6068 In the other eye 15/200 (4.5/60)	5 80	6077 In the other eye 20/40 (6/12)	20
6068 In the other eye 20/200 (6/60)	5 70	Vision in 1 eye 20/100 (6/30):	20
6069 In the other eye 20/100 (6/30)	5 60	6078 In the other eye 20/100 (6/30)	50
6069 In the other eye 20/70 (6/21)	⁵ 50	6078 In the other eye 20/70 (6/21)	30
6069 In the other eye 20/50 (6/15)	⁵ 40	6078 In the other eye 20/50 (6/15)	20
6070 In the other eye 20/40 (6/12)	5 30	6079 In the other eye 20/40 (6/12)	10
Vision in 1 eye 5/200 (1.5/60):		Vision in 1 eye 20/70 (6/21):	10
6071 In the other eye 5/200 (1.5/60)	5100	6078 In the other eye 20/70 (6/21)	30
6072 In the other eye 10/200 (3/60)	90	6078 In the other eye 20/50 (6/15)	20
6072 In the other eye 15/200 (4.5/60)	80	6079 In the other eye 20/40 (6/12)	10
6072 In the other eye 20/200 (6/60)	70	Vision in 1 eye 20/50 (6/15):	
6073 In the other eye 20/100 (6/30)	60	6078 In the other eye 20/50 (6/15)	10
6073 In the other eye 20/70 (6/21)	50	6079 In the other eye 20/40 (6/12)	10
6073 In the other eye 20/50 (6/15)	40	Vision in 1 eye 20/40 (6/12):	10
6074 In the other eye 20/40 (6/12)	30	In the other eve 20/40 (6/12)	0
Vision in 1 eye 10/200 (3/60):			0
6075 In the other eye 10/200 (3/60)	90	⁵ Also entitled to special monthly compensation.	
6075 In the other eye 15/200 (4.5/60)	80	⁶ Add 10% if artificial eye cannot be worn; also en	titled to
6075 In the other eye 20/200 (6/60)	70	special monthly compensation.	

TABLE V-RATINGS FOR CENTRAL VISUAL ACUITY IMPAIRMENT

[With Diagnostic Code]

				V	ision in othe	r eye			
Vision in one eye	20/40 (6/ 12)	20/50 (6/ 15)	20/70 (6/ 21)	20/100 (6/30)	20/200 (6/60)	15/200 (4.5/60)	10/200 (3/60)	5/200 (1.5/60)	Light percep- tion only/ana- tomical loss
20/40 (6/12)	0								
20/50 (6/15)	10 (6079)	10 (6078)							
20/70 (6/21)	10 (6079)	20 (6078)	30 (6078)						
20/100 (6/30)	10 (6079)	20 (6078)	30 (6078)	50 (6078)					
20/200 (6/60)	20 (6077)	30 (6076)	40 (6076)	60 (6076)	70 (6075)				
15/200 (4.5/60)	20 (6077)	30 (6076)	40 (6076)	60 (6076)	70 (6075)	80 (6075)			
10/200 (3/60)	30 (6077)	40 (6076)	50 (6076)	60 (6076)	70 (6075)	80 (6075)	90 (6075)		
5/200 (1.5/60)	30 (6074)	40 (6073)	50 (6073)	60 (6073)	70 (6072)	80 (6072)	90 (6072)	⁵ 100 (6071)	

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TABLE V—RATINGS FOR CENTRAL VISUAL ACUITY IMPAIRMENT—Continued
[With Diagnostic Code]

	Vision in other eye									
Vision in one eye	20/40 (6/ 12)	20/50 (6/ 15)	20/70 (6/ 21)	20/100 (6/30)	20/200 (6/60)	15/200 (4.5/60)	10/200 (3/60)	5/200 (1.5/60)	Light percep- tion only/ana- tomical loss	
Light per- ception only	⁵ 30 (6070)	⁵ 40 (6069)	⁵ 50 (6069)	⁵ 60 (6069)	⁵ 70 (6068)	⁵ 80 (6068)	⁵ 90 (6068)	⁵ 100 (6067)	⁵ 100 (6062)	
Anatomical loss of one eye	⁶ 40 (6066)	⁶ 50 (6065)	⁶ 60 (6065)	⁶ 60 (6065)	⁶ 70 (6064)	⁶ 80 (6064)	⁶ 90 (6064)	⁵ 100 (6063)	⁵ 100 (6061)	

⁵ Also entitled to special monthly compensation.
 ⁶Add 10 percent if artificial eye cannot be worn; also entitled to special monthly compensation.

RATINGS FOR IMPAIRMENT OF FIELD VISION

RATINGS FOR IMPAIRMENT OF FIELD VISION-Continued

	Rat- ing
6080 Field vision, impairment of:	
Homonymous hemianopsia	30
Field, visual, loss of temporal half:	
Bilateral	30
Unilateral	10
Or rate as 20/70 (6/21).	
Field, visual, loss of nasal half:	
Bilateral	20
Unilateral	10
Or rate as 20/50 (6/15).	
Field, visual, concentric contraction of:	
To 5°:	
Bilateral	100
Unilateral	30
Or rate as 5/200 (1.5/60).	
To 15° but not to 5°:	
Bilateral	70
Unilateral	20
Or rate as 20/200 (6/60).	
To 30° but not to 15°:	
Bilateral	50
Unilateral	10
Or rate as 20/100 (6/30).	
To 45° but not to 30°:	
Bilateral	30
Unilateral	10
Or rate as 20/70 (6/21):	
To 60° but not to 45°:	
Bilateral	20
Unilateral	10
Or rate as 20/50 (6/15).	
Note (1): Correct diagnosis reflecting disease or injury should be cited	

	Rat- ing
 Note (2): Demonstrable pathology commensurate with the functional loss will be required. The concentric contraction ratings require contraction within the stated degrees, temporally; the nasal contraction may be less. The alternative ratings are to be employed when there is ratable defect of visual acuity, or a different impairment of the visual field in the other eye. Concentric contraction resulting from demonstrable pathology to 5 degrees or less will be considered on a parity with reduction of central visual acuity to 5/200 (1.5/60) or less for all purposes including entitlement under §3.350(b)(2) of this chapter; not however, for the purpose of §3.350(a) of this chapter. Entitlement on account of blindness requiring regular aid and attendance, §3.350(c) of this chapter, will continue to be determined on the facts in the individual case 6081 Scotoma, pathological, unilateral: 	
Large or centrally located, minimum NOTE: Rate on loss of central visual acuity or im- pairment of field vision. Do not combine with any other rating for visual impairment.	10

RATINGS FOR IMPAIRMENT OF MUSCLE FUNCTION [6090 Diplopia (double vision)]

Degree of diplopia	Equiva- lent visual acuity
(a) Central 20° (b) 21° to 30°:	5/200
(1) Down	15/200
(2) Lateral	20/100
(3) Up	20/70
(c) 31° to 40°:	
(1) Down	20/200
(2) Lateral	20/70
(3) Up	20/40
Note: (1) Correct diagnosis reflecting disease or injury should be cited	

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RATINGS FOR IMPAIRMENT OF MUSCLE FUNCTION—Continued

[6090 Diplopia (double vision)]

Degree of diplopia	Equiva- lent visual acuity
 Note: (2) The above ratings will be applied to only one eye. Ratings will not be applied for both diplopia and decreased visual acuity or field of vision in the same eye. When diplopia is present and there is also ratable impairment of visual acuity or field of vision of both eyes the above diplopia ratings will be applied to the poorer eye while the better eye is rated according to the best corrected visual acuity or visual field Note: (3) When the diplopia field extends beyond more than one quadrant or more than one range of degrees, the evaluation for diplopia will be based on the quadrant and degree range that provide the highest evaluation Note: (4) When diplopia exists in two individual and separate areas of the same eye, the equivalent visual acuity will be taken one step worse, but no worse than 5/200 6091 Symbleoharon 	
 Symblepharon Rate as limited muscle function, diagnostic code 6090 Diplopia, due to limited muscle function Rate as diagnostic code 6090 	

[29 FR 6718, May 22, 1964, as amended at 34 FR 5062, Mar. 11, 1969; 40 FR 42537, Sept. 15, 1975; 41 FR 11297, Mar. 18, 1976; 43 FR 45354, Oct. 2, 1978; 51 FR 6411, Feb. 24, 1986; 53 FR 30264, Aug. 11, 1988; 53 FR 50955, Dec. 19, 1988; 57 FR 24364, June 9, 1992]

IMPAIRMENT OF AUDITORY ACUITY

§4.85 Evaluation of hearing impairment.

(a) An examination for hearing impairment for VA purposes must be conducted by a state-licensed audiologist and must include a controlled speech discrimination test (Maryland CNC) and a puretone audiometry test. Examinations will be conducted without the use of hearing aids.

(b) Table VI, "Numeric Designation of Hearing Impairment Based on Puretone Threshold Average and Speech Discrimination," is used to determine a Roman numeral designation (I through XI) for hearing impairment based on a combination of the percent of speech discrimination (horizontal rows) and the puretone threshold average (vertical columns). The Roman numeral designation is located at the point where the percentage of speech discrimination and puretone threshold average intersect.

(c) Table VIa, "Numeric Designation of Hearing Impairment Based Only on Puretone Threshold Average," is used to determine a Roman numeral designation (I through XI) for hearing impairment based only on the puretone threshold average. Table VIa will be used when the examiner certifies that use of the speech discrimination test is not appropriate because of language difficulties, inconsistent speech discrimination scores, etc., or when indicated under the provisions of §4.86.

(d) "Puretone threshold average," as used in Tables VI and VIa, is the sum of the puretone thresholds at 1000, 2000, 3000 and 4000 Hertz, divided by four. This average is used in all cases (including those in §4.86) to determine the Roman numeral designation for hearing impairment from Table VI or VIa.

(e) Table VII, "Percentage Evaluations for Hearing Impairment," is used to determine the percentage evaluation by combining the Roman numeral designations for hearing impairment of each ear. The horizontal rows represent the ear having the better hearing and the vertical columns the ear having the poorer hearing. The percentage evaluation is located at the point where the row and column intersect.

(f) If impaired hearing is service-connected in only one ear, in order to determine the percentage evaluation from Table VII, the non-service-connected ear will be assigned a Roman Numeral designation for hearing impairment of I, subject to the provisions of §3.383 of this chapter.

(g) When evaluating any claim for impaired hearing, refer to §3.350 of this chapter to determine whether the veteran may be entitled to special monthly compensation due either to deafness, or to deafness in combination with other specified disabilities.

(h) Numeric tables VI, VIA*, and VII.