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Title 38, Part 4

*Schedule for Rating Disabilities*

**Veterans Benefits Administration**

Supplement No. 45

Covering period of *Federal Register* issues  
through October 2, 2008

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Custom Federal Regulations Service™

## Supplemental Materials for *Book C*

Code of Federal Regulations

Title 38, Part 4

*Schedule for Rating Disabilities*

## Veterans Benefits Administration

Supplement No. 45

5 October 2008

Covering the period of Federal Register issues  
through October 2, 2008

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## FILING INSTRUCTIONS

**Book C, Supplement No. 45  
October 5, 2008**

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## HIGHLIGHTS

Book C, Supplement No. 45  
October 5, 2008

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**Supplement frequency:** This Book C (*Schedule for Rating Disabilities*) was originally supplemented four times a year, in February, May, August, and November. Beginning 1 August 1995, supplements will be issued *every month* during which a final rule addition or modification is made to the parts of Title 38 covered by this book. Supplements will be numbered consecutively as issued.

### Modifications in this supplement include the following:

1. On 23 September 2008, the VA published a final rule, effective 23 October 2008, to amend the *Schedule for Rating Disabilities* by revising the portion of the *Schedule* that addresses neurological conditions and convulsive disorders in order to provide detailed and updated criteria for evaluating residuals of traumatic brain injury. Changes:

- In §4.124a, revised diagnostic code 8045 in its entirety, and added a new table entitled *Evaluation of Cognitive Impairment and Other Residuals of TBI not Otherwise Classified*; and

- Revised Appendices A, B, and C to Part 4 to reflect these changes.

2. On September 23, 2008, the VA published a final rule, effective 23 October 2008, to amend the *Schedule for Rating Disabilities* by revising that portion of the *Schedule* that addresses the Skin, so that it more clearly reflects policies concerning the evaluation of scars. Changes:

- In §4.118, added an introductory paragraph; revised the heading to diagnostic code 7800, and added new notes (4)–(5); revised diagnostic codes 7801, 7801, 7804, and 7805; and removed diagnostic code 7803; and

- Revised Appendices A, B, and C to Part 4 to reflect these changes.

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**The Skin**

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**§4.118 Schedule of ratings—skin.**

A veteran who VA rated under diagnostic codes 7800, 7801, 7802, 7803, 7804, or 7805 before October 23, 2008 can request review under diagnostic codes 7800, 7801, 7802, 7804, and 7805, irrespective of whether the veteran’s disability has increased since the last review. VA will review that veteran’s disability rating to determine whether the veteran may be entitled to a higher disability rating under diagnostic codes 7800, 7801, 7802, 7804, and 7805. A request for review pursuant to this rulemaking will be treated as a claim for an increased rating for purposes of determining the effective date of an increased rating awarded as a result of such review; however, in no case will the award be effective before October 23, 2008.

	Rating
<b>7800</b> Burn scar(s) of the head, face, or neck; scar(s) of the head, face, or neck due to other causes; or other disfigurement of the head, face, or neck:	
With visible or palpable tissue loss and either gross distortion or asymmetry of three or more features or paired sets of features (nose, chin, forehead, eyes (including eyelids), ears (auricles), cheeks, lips), or; with six or more characteristics of disfigurement .....	80
With visible or palpable tissue loss and either gross distortion or asymmetry of two features or paired sets of features (nose, chin, forehead, eyes (including eyelids), ears (auricles), cheeks, lips), or; with four or five characteristics of disfigurement.....	50
With visible or palpable tissue loss and either gross distortion or asymmetry of one feature or paired set of features (nose, chin, forehead, eyes (including eyelids), ears (auricles), cheeks, lips), or; with two or three characteristics of disfigurement.....	30
With one characteristic of disfigurement .....	10

**Note (1):** The 8 characteristics of disfigurement, for purposes of evaluation under §4.118, are:

- Scar 5 or more inches (13 or more cm.) in length.
- Scar at least one-quarter inch (0.6 cm.) wide at widest part.
- Surface contour of scar elevated or depressed on palpation.
- Scar adherent to underlying tissue.
- Skin hypo- or hyper-pigmented in an area exceeding six square inches (39 sq. cm.).
- Skin texture abnormal (irregular, atrophic, shiny, scaly, etc.) in

an area exceeding six square inches (39 sq. cm.).  
 Underlying soft tissue missing in an area exceeding six square inches (39 sq. cm.).  
 Skin indurated and inflexible in an area exceeding six square inches (39 sq. cm.).

**Note (2):** Rate tissue loss of the auricle under DC 6207 (loss of auricle) and anatomical loss of the eye under DC 6061 (anatomical loss of both eyes) or DC 6063 (anatomical loss of one eye), as appropriate.

**Note (3):** Take into consideration unretouched color photographs when evaluating under these criteria.

**Note (4):** Separately evaluate disabling effects other than disfigurement that are associated with individual scar(s) of the head, face, or neck, such as pain, instability, and residuals of associated muscle or nerve injury, under the appropriate diagnostic code(s) and apply § 4.25 to combine the evaluation(s) with the evaluation assigned under this diagnostic code.

**Note (5):** The characteristic(s) of disfigurement may be caused by one scar or by multiple scars; the characteristic(s) required to assign a particular evaluation need not be caused by a single scar in order to assign that evaluation.

With visible or palpable tissue loss and either gross distortion or asymmetry of three or more features or paired sets of features (nose, chin, forehead, eyes (including eyelids), ears (auricles), cheeks, lips), or; with six or more characteristics of disfigurement ..... 80

**7801** Burn scar(s) or scar(s) due to other causes, not of the head, face, or neck, that are deep and nonlinear:

- Area or areas of 144 square inches (929 sq. cm.) or greater ..... 40
- Area or areas of at least 72 square inches (465 sq. cm.) but less than 144 square inches (929 sq. cm.) ..... 30
- Area or areas of at least 12 square inches (77 sq. cm.) but less than 72 square inches (465 sq. cm.) ..... 20
- Area or areas of at least 6 square inches (39 sq. cm.) but less than 12 square inches (77 sq. cm.) ..... 10

**Note (1):** A deep scar is one associated with underlying soft tissue damage.

**Note (2):** If multiple qualifying scars are present, or if a single qualifying scar affects more than one extremity, or a single qualifying scar affects one or more extremities and either the anterior portion or posterior portion of the trunk, or both, or a single qualifying scar affects both the anterior portion and the posterior portion of the trunk, assign a separate evaluation for each affected extremity based on the total area of the qualifying scars that affect that extremity, assign a separate evaluation based on the total area of the qualifying scars that affect the anterior portion of the trunk, and

assign a separate evaluation based on the total area of the qualifying scars that affect the posterior portion of the trunk. The midaxillary line on each side separates the anterior and posterior portions of the trunk. Combine the separate evaluations under § 4.25. Qualifying scars are scars that are nonlinear, deep, and are not located on the head, face, or neck.

**7802** Burn scar(s) or scar(s) due to other causes, not of the head, face, or neck, that are superficial and nonlinear:

Area or areas of 144 square inches (929 sq. cm.) or greater ..... 10

**Note (1):** A superficial scar is one not associated with underlying soft tissue damage.

**Note (2):** If multiple qualifying scars are present, or if a single qualifying scar affects more than one extremity, or a single qualifying scar affects one or more extremities and either the anterior portion or posterior portion of the trunk, or both, or a single qualifying scar affects both the anterior portion and the posterior portion of the trunk, assign a separate evaluation for each affected extremity based on the total area of the qualifying scars that affect that extremity, assign a separate evaluation based on the total area of the qualifying scars that affect the anterior portion of the trunk, and assign a separate evaluation based on the total area of the qualifying scars that affect the posterior portion of the trunk. The midaxillary line on each side separates the anterior and posterior portions of the trunk. Combine the separate evaluations under § 4.25. Qualifying scars are scars that are nonlinear, superficial, and are not located on the head, face, or neck.

**7804** Scar(s), unstable or painful:

Five or more scars that are unstable or painful ..... 30

Three or four scars that are unstable or painful..... 20

One or two scars that are unstable or painful..... 10

**Note (1):** An unstable scar is one where, for any reason, there is frequent loss of covering of skin over the scar.

**Note (2):** If one or more scars are both unstable and painful, add 10 percent to the evaluation that is based on the total number of unstable or painful scars.

**Note (3):** Scars evaluated under diagnostic codes 7800, 7801, 7802, or 7805 may also receive an evaluation under this diagnostic code, when applicable.

**7805** Scars, other (including linear scars) and other effects of scars evaluated under diagnostic codes 7800, 7801, 7802, and 7804:

Evaluate any disabling effect(s) not considered in a rating provided under diagnostic codes 7800-04 under an appropriate diagnostic code.

## 7806 Dermatitis or eczema.

More than 40 percent of the entire body or more than 40 percent of exposed areas affected, or; constant or near-constant systemic therapy such as corticosteroids or other immunosuppressive drugs required during the past 12-month period.....	60
20 to 40 percent of the entire body or 20 to 40 percent of exposed areas affected, or; systemic therapy such as corticosteroids or other immunosuppressive drugs required for a total duration of six weeks or more, but not constantly, during the past 12-month period.....	30
At least 5 percent, but less than 20 percent, of the entire body, or at least 5 percent, but less than 20 percent, of exposed areas affected, or; intermittent systemic therapy such as corticosteroids or other immunosuppressive drugs required for a total duration of less than six weeks during the past 12-month period.....	10
Less than 5 percent of the entire body or less than 5 percent of exposed areas affected, and; no more than topical therapy required during the past 12-month period.....	0
Or rate as disfigurement of the head, face, or neck (DC 7800) or scars (DC's 7801, 7802, 7803, 7804, or 7805), depending upon the predominant disability.	

## 7807 American (New World) leishmaniasis (mucocutaneous, espundia):

Rate as disfigurement of the head, face, or neck (DC 7800), scars (DC's 7801, 7802, 7803, 7804, or 7805), or dermatitis (DC 7806), depending upon the predominant disability.

**Note:** Evaluate non-cutaneous (visceral) leishmaniasis under DC 6301 (visceral leishmaniasis).

## 7808 Old World leishmaniasis (cutaneous, Oriental sore):

Rate as disfigurement of the head, face, or neck (DC 7800), scars (DC's 7801, 7802, 7803, 7804, or 7805), or dermatitis (DC 7806), depending upon the predominant disability.

**Note:** Evaluate non-cutaneous (visceral) leishmaniasis under DC 6301 (visceral leishmaniasis).

## 7809 Discoid lupus erythematosus or subacute cutaneous lupus erythematosus:

Rate as disfigurement of the head, face, or neck (DC 7800), scars (DC's 7801, 7802, 7803, 7804, or 7805), or dermatitis (DC 7806), depending upon the predominant disability. Do not combine with ratings under DC 6350.

## 7811 Tuberculosis luposa (lupus vulgaris), active or inactive:

Rate under §§4.88c or 4.89, whichever is appropriate.



- 7813** Dermatophytosis (ringworm: of body, tinea corporis; of head, tinea capitis; of feet, tinea pedis; of beard area, tinea barbae; of nails, tinea unguium; of inguinal area (jock itch), tinea cruris):  
Rate as disfigurement of the head, face, or neck (DC 7800), scars (DC's 7801, 7802, 7803, 7804, or 7805), or dermatitis (DC 7806), depending upon the predominant disability.
- 7815** Bullous disorders (including pemphigus vulgaris, pemphigus foliaceus, bullous pemphigoid, dermatitis herpetiformis, epidermolysis bullosa acquisita, benign chronic familial pemphigus (Hailey-Hailey), and porphyri cutanea tarda):
- More than 40 percent of the entire body or more than 40 percent of exposed areas affected, or; constant or near-constant systemic therapy such as corticosteroids or other immunosuppressive drugs required during the past 12-month period ..... 60
  - 20 to 40 percent of the entire body or 20 to 40 percent of exposed areas affected, or; systemic therapy such as corticosteroids or other immunosuppressive drugs required for a total duration of six weeks or more, but not constantly, during the past 12-month period ..... 30
  - At least 5 percent, but less than 20 percent, of the entire body, or at least 5 percent, but less than 20 percent, of exposed areas affected, or; intermittent systemic therapy such as corticosteroids or other immunosuppressive drugs required for a total duration of less than six weeks during the past 12-month period ..... 10
  - Less than 5 percent of the entire body or exposed areas affected, and; no more than topical therapy required during the past 12-month period ..... 0
  - Or rate as disfigurement of the head, face, or neck (DC 7800) or scars (DC's 7801, 7802, 7803, 7804, or 7805), depending upon the predominant disability.
- 7816** Psoriasis:
- More than 40 percent of the entire body or more than 40 percent of exposed areas affected, or; constant or near-constant systemic therapy such as corticosteroids or other immunosuppressive drugs required during the past 12-month period..... 60
  - 20 to 40 percent of the entire body or 20 to 40 percent of exposed areas affected, or; systemic therapy such as corticosteroids or other immunosuppressive drugs required for a total duration of six weeks or more, but not constantly, during the past 12-month period..... 30
  - At least 5 percent, but less than 20 percent, of the entire body, or at least 5 percent, but less than 20 percent, of exposed areas affected, or; intermittent systemic therapy such as corticosteroids or other immunosuppressive drugs required for a total duration of less than

- six weeks during the past 12-month period ..... 10
- Less than 5 percent of the entire body or exposed areas affected, and;  
no more than topical therapy required during the past 12-month  
period 0
- Or rate as disfigurement of the head, face, or neck (DC 7800) or scars  
(DC's 7801, 7802, 7803, 7804, or 7805), depending upon the predominant  
disability.
- 7817 Exfoliative dermatitis (erythroderma):**
- Generalized involvement of the skin, plus systemic manifestations  
(such as fever, weight loss, and hypoproteinemia), and; constant or  
near-constant systemic therapy such as therapeutic doses of  
corticosteroids, immunosuppressive retinoids, PUVA (psoralen  
with long-wave ultraviolet-A light) or UVB (ultraviolet-B light)  
treatments, or electron beam therapy required during the past  
12-month period..... 100
- Generalized involvement of the skin without systemic manifestations,  
and; constant or near-constant systemic therapy such as therapeutic  
doses of corticosteroids, immunosuppressive retinoids, PUVA (psoralen  
with long-wave ultraviolet-A light) or UVB (ultraviolet-B light)  
treatments, or electron beam therapy required during the past  
12-month period..... 60
- Any extent of involvement of the skin, and; systemic therapy such  
as therapeutic doses of corticosteroids, immunosuppressive retinoids,  
PUVA (psoralen with long-wave ultraviolet-A light) or UVB  
(ultraviolet-B light) treatments, or electron beam therapy required  
for a total duration of six weeks or more, but not constantly, during  
the past 12-month period ..... 30
- Any extent of involvement of the skin, and; systemic therapy such  
as therapeutic doses of corticosteroids, immunosuppressive retinoids,  
PUVA (psoralen with long-wave ultraviolet-A light) or UVB  
(ultraviolet-B light) treatments, or electron beam therapy required  
for a total duration of less than six weeks during the past 12-month  
period 10
- Any extent of involvement of the skin, and; no more than topical  
therapy required during the past 12-month period..... 0
- 7818 Malignant skin neoplasms (other than malignant melanoma):**  
Rate as disfigurement of the head, face, or neck (DC 7800), scars (DC's 7801, 7802,  
7803, 7804, or 7805), or impairment of function.
- Note:** If a skin malignancy requires therapy that is comparable to that used for  
systemic malignancies, i.e., systemic chemotherapy, X-ray therapy more  
extensive than to the skin, or surgery more extensive than wide local excision,

a 100-percent evaluation will be assigned from the date of onset of treatment, and will continue, with a mandatory VA examination six months following the completion of such antineoplastic treatment, and any change in evaluation based upon that or any subsequent examination will be subject to the provisions of §3.105(e) of this chapter. If there has been no local recurrence or metastasis, evaluation will then be made on residuals. If treatment is confined to the skin, the provisions for a 100-percent evaluation do not apply.

**7819** Benign skin neoplasms:

Rate as disfigurement of the head, face, or neck (DC 7800), scars (DC's 7801, 7802, 7803, 7804, or 7805), or impairment of function.

**7820** Infections of the skin not listed elsewhere (including bacterial, fungal, viral, treponemal and parasitic diseases):

Rate as disfigurement of the head, face, or neck (DC 7800), scars (DC's 7801, 7802, 7803, 7804, or 7805), or dermatitis (DC 7806), depending upon the predominant disability.

**7821** Cutaneous manifestations of collagen-vascular diseases not listed elsewhere (including scleroderma, calcinosis cutis, and dermatomyositis):

More than 40 percent of the entire body or more than 40 percent of exposed areas affected, or; constant or near-constant systemic therapy such as corticosteroids or other immunosuppressive drugs required during the past 12-month period ..... 60

20 to 40 percent of the entire body or 20 to 40 percent of exposed areas affected, or; systemic therapy such as corticosteroids or other immunosuppressive drugs required for a total duration of six weeks or more, but not constantly, during the past 12-month period ..... 30

At least 5 percent, but less than 20 percent, of the entire body, or at least 5 percent, but less than 20 percent, of exposed areas affected, or; intermittent systemic therapy such as corticosteroids or other immunosuppressive drugs required for a total duration of less than six weeks during the past 12-month period ..... 10

Less than 5 percent of the entire body or exposed areas affected, and; no more than topical therapy required during the past 12-month period ..... 0

Or rate as disfigurement of the head, face, or neck (DC 7800) or scars (DC's 7801, 7802, 7803, 7804, or 7805), depending upon the predominant disability.

**7822** Papulosquamous disorders not listed elsewhere (including lichen planus, large or small plaque parapsoriasis, pityriasis lichenoides et varioliformis acuta

(PLEVA), lymphomatoid papulosus, and pityriasis rubra pilaris (PRP)):

More than 40 percent of the entire body or more than 40 percent of exposed areas affected, and; constant or near-constant systemic medications or intensive light therapy required during the past 12-month period.....	60
20 to 40 percent of the entire body or 20 to 40 percent of exposed areas affected, or; systemic therapy or intensive light therapy required for a total duration of six weeks or more, but not constantly, during the past 12-month period.....	30
At least 5 percent, but less than 20 percent, of the entire body, or at least 5 percent, but less than 20 percent, of exposed areas affected, or; systemic therapy or intensive light therapy required for a total duration of less than six weeks during the past 12-month period.....	10
Less than 5 percent of the entire body or exposed areas affected, and; no more than topical therapy required during the past 12-month period.....	0
Or rate as disfigurement of the head, face, or neck (DC 7800) or scars (DC's 7801, 7802, 7803, 7804, or 7805), depending upon the predominant disability.	

**7823 Vitiligo:**

With exposed areas affected.....	10
With no exposed areas affected.....	0

**7824 Diseases of keratinization (including ichthyoses, Darier's disease, and palmoplantar keratoderma):**

With either generalized cutaneous involvement or systemic manifestations, and; constant or near-constant systemic medication, such as immunosuppressive retinoids, required during the past 12-month period.....	60
With either generalized cutaneous involvement or systemic manifestations, and; intermittent systemic medication, such as immunosuppressive retinoids, required for a total duration of six weeks or more, but not constantly, during the past 12-month period.....	30
With localized or episodic cutaneous involvement and intermittent systemic medication, such as immunosuppressive retinoids, required for a total duration of less than six weeks during the past 12-month period.....	10
No more than topical therapy required during the past 12-month period.....	0

**7825 Urticaria:**

Recurrent debilitating episodes occurring at least four times during the past 12-month period despite continuous immunosuppressive therapy .....	60
Recurrent debilitating episodes occurring at least four times during the past 12-month period, and; requiring intermittent systemic immunosuppressive therapy for control .....	30
Recurrent episodes occurring at least four times during the past 12-month period, and; responding to treatment with antihistamines or sympathomimetics .....	10

**7826 Vasculitis, primary cutaneous:**

Recurrent debilitating episodes occurring at least four times during the past 12-month period despite continuous immunosuppressive therapy .....	60
Recurrent debilitating episodes occurring at least four times during the past 12-month period, and; requiring intermittent systemic immunosuppressive therapy for control .....	30
Recurrent episodes occurring one to three times during the past 12-month period, and; requiring intermittent systemic immunosuppressive therapy for control .....	10
Or rate as disfigurement of the head, face, or neck (DC 7800) or scars (DC's 7801, 7802, 7803, 7804, or 7805), depending upon the predominant disability.	

**7827 Erythema multiforme; Toxic epidermal necrolysis:**

Recurrent debilitating episodes occurring at least four times during the past 12-month period despite ongoing immunosuppressive therapy .....	60
Recurrent episodes occurring at least four times during the past 12-month period, and; requiring intermittent systemic immunosuppressive therapy .....	30
Recurrent episodes occurring during the past 12-month period that respond to treatment with antihistamines or sympathomimetics, or; one to three episodes occurring during the past 12-month period requiring intermittent systemic immunosuppressive therapy .....	10
Or rate as disfigurement of the head, face, or neck (DC 7800) or scars (DC's 7801, 7802, 7803, 7804, or 7805), depending upon the predominant disability.	

**7828 Acne:**

Deep acne (deep inflamed nodules and pus-filled cysts) affecting 40 percent or more of the face and neck .....	30
Deep acne (deep inflamed nodules and pus-filled cysts) affecting less than 40 percent of the face and neck, or; deep acne other than on the	

- face and neck ..... 10
- Superficial acne (comedones, papules, pustules, superficial cysts) of any extent..... 0
- Or rate as disfigurement of the head, face, or neck (DC 7800) or scars (DC's 7801, 7802, 7803, 7804, or 7805), depending upon the predominant disability.
- 7829 Chloracne:**
- Deep acne (deep inflamed nodules and pus-filled cysts) affecting 40 percent or more of the face and neck..... 30
- Deep acne (deep inflamed nodules and pus-filled cysts) affecting less than 40 percent of the face and neck, or; deep acne other than on the face and neck ..... 10
- Superficial acne (comedones, papules, pustules, superficial cysts) of any extent..... 0
- Or rate as disfigurement of the head, face, or neck (DC 7800) or scars (DC's 7801, 7802, 7803, 7804, or 7805), depending upon the predominant disability.
- 7830 Scarring alopecia:**
- Affecting more than 40 percent of the scalp ..... 20
- Affecting 20 to 40 percent of the scalp ..... 10
- Affecting less than 20 percent of the scalp ..... 0
- 7831 Alopecia areata:**
- With loss of all body hair ..... 10
- With loss of hair limited to scalp and face..... 0
- 7832 Hyperhidrosis:**
- Unable to handle paper or tools because of moisture, and unresponsive to therapy ..... 30
- Able to handle paper or tools after therapy ..... 0
- 7833 Malignant melanoma:**
- Rate as scars (DC's 7801, 7802, 7803, 7804, or 7805), disfigurement of the head, face, or neck (DC 7800), or impairment of function (under the appropriate body system).
- Note:** If a skin malignancy requires therapy that is comparable to that used for systemic malignancies, i.e., systemic chemotherapy, X-ray therapy more extensive than to the skin, or surgery more extensive than wide local excision, a 100-percent evaluation will be assigned from the date of onset of treatment, and will continue, with a mandatory VA examination six months following

the completion of such antineoplastic treatment, and any change in evaluation based upon that or any subsequent examination will be subject to the provisions of §3.105(e). If there has been no local recurrence or metastasis, evaluation will then be made on residuals. If treatment is confined to the skin, the provisions for a 100-percent evaluation do not apply.

(Authority: 38 U.S.C. 1155)

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[29 FR 6718, May 22, 1964, as amended at 34 FR 5063, Mar. 11, 1969; 40 FR 42540, Sept. 15, 1975; 43 FR 45262, Oct. 2, 1978; 67 FR 49596, July 31, 2002; 67 FR 58448, Sept. 16, 2002; 68 FR 62889, Oct. 9, 2002; 73 FR 54710, Sept. 23, 2008]

**Supplement *Highlights* references:** 30(2), 31(2), 45(2).

Reserved



<b>8011</b>	Poliomyelitis, anterior:	
	As active febrile disease.....	100
	Rate residuals, minimum .....	10
<b>8012</b>	Hematomyelia:	
	For 6 months .....	100
	Rate residuals, minimum .....	10
<b>8013</b>	Syphilis, cerebrospinal.	
<b>8014</b>	Syphilis, meningovascular.	
<b>8015</b>	Tabes dorsalis.	
	Note: Rate upon the severity of convulsions, paralysis, visual impairment or psychotic involvement, etc.	
<b>8017</b>	Amyotrophic lateral sclerosis:	
	Minimum rating .....	30
<b>8018</b>	Multiple sclerosis:	
	Minimum rating .....	30
<b>8019</b>	Meningitis, cerebrospinal, epidemic:	
	As active febrile disease.....	100
	Rate residuals, minimum .....	10
<b>8020</b>	Brain, abscess of:	
	As active disease .....	100
	Rate residuals, minimum .....	10
	Spinal cord, new growths of:	
<b>8021</b>	Malignant	100
	Note: The rating in code 8021 will be continued for 2 years following cessation of surgical, chemotherapeutic or other treatment modality. At this point, if the residuals have stabilized, the rating will be made on neurological residuals according to symptomatology.	
	Minimum rating .....	30
<b>8022</b>	Benign, minimum rating .....	60
	Rate residuals, minimum .....	10
<b>8023</b>	Progressive muscular atrophy:	
	Minimum rating .....	30

<b>8024</b>	Syringomyelia:	
	Minimum rating .....	30
<b>8025</b>	Myasthenia gravis:	
	Minimum rating .....	30

Note: It is required for the minimum ratings for residuals under diagnostic codes 8000-8025, that there be ascertainable residuals. Determinations as to the presence of residuals not capable of objective verification, i.e., headaches, dizziness, fatigability, must be approached on the basis of the diagnosis recorded; subjective residuals will be accepted when consistent with the disease and not more likely attributable to other disease or no disease. It is of exceptional importance that when ratings in excess of the prescribed minimum ratings are assigned, the diagnostic codes utilized as bases of evaluation be cited, in addition to the codes identifying the diagnoses.

**8045** Residuals of traumatic brain injury (TBI):

There are three main areas of dysfunction that may result from TBI and have profound effects on functioning: cognitive (which is common in varying degrees after TBI), emotional/behavioral, and physical. Each of these areas of dysfunction may require evaluation.

Cognitive impairment is defined as decreased memory, concentration, attention, and executive functions of the brain. Executive functions are goal setting, speed of information processing, planning, organizing, prioritizing, self-monitoring, problem solving, judgment, decision making, spontaneity, and flexibility in changing actions when they are not productive. Not all of these brain functions may be affected in a given individual with cognitive impairment, and some functions may be affected more severely than others. In a given individual, symptoms may fluctuate in severity from day to day. Evaluate cognitive impairment under the table titled "Evaluation of Cognitive Impairment and Other Residuals of TBI Not Otherwise Classified."

Subjective symptoms may be the only residual of TBI or may be associated with cognitive impairment or other areas of dysfunction. Evaluate subjective symptoms that are residuals of TBI, whether or not they are part of cognitive impairment, under the subjective symptoms facet in the table titled "Evaluation of Cognitive Impairment and Other Residuals of TBI Not Otherwise Classified." However, separately evaluate any residual with a distinct diagnosis that may be evaluated under another diagnostic code, such as migraine headache or Meniere's disease, even if that diagnosis is based on subjective symptoms, rather than under the "Evaluation of Cognitive Impairment and Other Residuals of TBI Not Otherwise Classified" table.

Evaluate emotional/behavioral dysfunction under §4.130 (Schedule of ratings—mental disorders) when there is a diagnosis of a mental disorder. When there is no diagnosis of a mental disorder, evaluate emotional/behavioral symptoms under the criteria in the table titled "Evaluation of Cognitive Impairment and Other Residuals of TBI Not Otherwise Classified."

Evaluate physical (including neurological) dysfunction based on the following list, under an appropriate diagnostic code: Motor and sensory dysfunction, including pain, of the extremities and face; visual impairment; hearing loss and tinnitus; loss of sense of smell and taste; seizures; gait, coordination, and balance problems; speech and other communication difficulties, including

aphasia and related disorders, and dysarthria; neurogenic bladder; neurogenic bowel; cranial nerve dysfunctions; autonomic nerve dysfunctions; and endocrine dysfunctions.

The preceding list of types of physical dysfunction does not encompass all possible residuals of TBI. For residuals not listed here that are reported on an examination, evaluate under the most appropriate diagnostic code. Evaluate each condition separately, as long as the same signs and symptoms are not used to support more than one evaluation, and combine under §4.25 the evaluations for each separately rated condition. The evaluation assigned based on the “Evaluation of Cognitive Impairment and Other Residuals of TBI Not Otherwise Classified” table will be considered the evaluation for a single condition for purposes of combining with other disability evaluations.

Consider the need for special monthly compensation for such problems as loss of use of an extremity, certain sensory impairments, erectile dysfunction, the need for aid and attendance (including for protection from hazards or dangers incident to the daily environment due to cognitive impairment), being housebound, etc.

### **Evaluation of Cognitive Impairment and Subjective Symptoms**

The table titled “Evaluation of Cognitive Impairment and Other Residuals of TBI Not Otherwise Classified” contains 10 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 “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. Assign a 100-percent evaluation if “total” is the level of evaluation for one or more facets. If no facet is evaluated as “total,” assign the overall percentage evaluation based on the level of the highest facet as follows: 0 = 0 percent; 1 = 10 percent; 2 = 40 percent; and 3 = 70 percent. For example, assign a 70 percent evaluation if 3 is the highest level of evaluation for any facet.

**Note (1):** There may be an overlap of manifestations of conditions evaluated under the table titled “Evaluation Of Cognitive Impairment And Other Residuals Of TBI Not Otherwise Classified” with manifestations of a comorbid mental or neurologic or other physical disorder that can be separately evaluated under another diagnostic code. In such cases, do not assign more than one evaluation based on the same manifestations. If the manifestations of two or more conditions cannot be clearly separated, assign a single evaluation under whichever set of diagnostic criteria allows the better assessment of overall impaired functioning due to both conditions. However, if the manifestations are clearly separable, assign a separate evaluation for each condition.

**Note (2):** Symptoms listed as examples at certain evaluation levels in the table are only examples and are not symptoms that must be present in order to assign a particular evaluation.

**Note (3):** “Instrumental activities of daily living” refers to activities other than self-care that are needed for independent living, such as meal preparation, doing housework and other chores, shopping, traveling, doing laundry, being responsible for one’s own medications, and using a telephone. These activities are distinguished from “Activities of daily living,” which refers to basic self-care and includes bathing or showering, dressing, eating, getting in or out of bed or a chair, and using the toilet.

**Note (4):** The terms “mild,” “moderate,” and “severe” TBI, which may appear in medical records, refer to a classification of TBI made at, or close to, the time of injury rather than to the current level of functioning. This classification does not affect the rating assigned under diagnostic code 8045

**Note (5):** A veteran whose residuals of TBI are rated under a version of § 4.124a, diagnostic code 8045, in effect before October 23, 2008 may request review under diagnostic code 8045, irrespective of whether his or her disability has worsened since the last review. VA will review that veteran’s disability rating to determine whether the veteran may be entitled to a higher disability rating under diagnostic code 8045. A request for review pursuant to this note will be treated as a claim for an increased rating for purposes of determining the effective date of an increased rating awarded as a result of such review; however, in no case will the award be effective before October 23, 2008. For the purposes of determining the effective date of an increased rating awarded as a result of such review, VA will apply 38 CFR 3.114, if applicable.

**8046 Cerebral arteriosclerosis:**

Purely neurological disabilities, such as hemiplegia, cranial nerve paralysis, etc., due to cerebral arteriosclerosis will be rated under the diagnostic codes dealing with such specific disabilities, with citation of a hyphenated diagnostic code (e.g., 8046-8207).

Purely subjective complaints such as headache, dizziness, tinnitus, insomnia and irritability, recognized as symptomatic of a properly diagnosed cerebral arteriosclerosis, will be rated 10 percent and no more under diagnostic code 9305. This 10 percent rating will not be combined with any other rating for a disability due to cerebral or generalized arteriosclerosis. Ratings in excess of 10 percent for cerebral arteriosclerosis under diagnostic code 9305 are not assignable in the absence of a diagnosis of multi-infarct dementia with cerebral arteriosclerosis.

Note: The ratings under code 8046 apply only when the diagnosis of cerebral arteriosclerosis is substantiated by the entire clinical picture and not solely on findings of retinal arteriosclerosis.

**EVALUATION OF COGNITIVE IMPAIRMENT AND OTHER RESIDUALS OF TBI  
NOT OTHERWISE CLASSIFIED**

Facets of cognitive impairment and other residuals of TBI not otherwise classified	Level of impairment	Criteria
Memory, attention, concentration, executive functions.	0	No complaints of impairment of memory, attention, concentration, or executive functions.
	1	A complaint of mild loss of memory (such as having difficult 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.
	2	Objective evidence on testing of mild impairment of memory, attention, concentration, or executive functions resulting in mild functional impairment.
	3	Objective evidence on testing of moderate impairment of memory, attention, concentration, or executive functions resulting in moderate functional impairment.
	Total	Objective evidence on testing of severe impairment of memory, attention, concentration, or executive functions resulting in severe functional impairment.
Judgment	0	Normal.
	1	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.
	2	Moderately impaired judgment. For complex or unfamiliar decisions, usually unable to identify, understand, and weigh the alternatives, understand the consequences of choices, and make a reasonable decision, although has little difficulty with simple decisions.
	3	Moderately severely impaired judgment. For even routine and familiar decisions, occasionally unable to identify, understand, and weigh the alternatives, understand the consequences of choices, and make a reasonable decision.
	Total	Severely impaired judgment. For even routine and familiar decisions, usually unable to identify, understand, and weigh the alternatives, understand the consequences of choices, and make a reasonable decision. For example, unable to determine appropriate clothing for current weather conditions or judge when to avoid dangerous situations or activities.
Social interaction	0	Social interaction is routinely appropriate.
	1	Social interaction is occasionally inappropriate.
	2	Social interaction is frequently inappropriate.
	3	Social interaction is inappropriate most or all of the time.

Orientation	0	Always oriented to person, time, place, and situation.
	1	Occasionally disoriented to one of the four aspects (person, time, place, situation) of orientation.
	2	Occasionally disoriented to two of the four aspects (person, time, place, situation) of orientation or often disoriented to one aspect of orientation.
	3	Often disoriented to two or more of the four aspects (person, time, place, situation) of orientation.
	Total	Consistently disoriented to two or more of the four aspects (person, time, place, situation) of orientation.
Motor activity (with intact motor and sensory system).	0	Motor activity normal.
	1	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).
	2	Motor activity mildly decreased or with moderate slowing due to apraxia.
	3	Motor activity moderately decreased due to apraxia.
	Total	Motor activity severely decreased due to apraxia.
Visual spatial orientation	0	Normal.
	1	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).
	2	Moderately impaired. Usually gets lost in unfamiliar surroundings, has difficulty reading maps, following directions, and judging distance. Has difficulty using assistive devices such as GPS (global positioning system).
	3	Moderately severely impaired. Gets lost even in familiar surroundings, unable to use assistive devices such as GPS (global positioning system).
	Total	Severely impaired. May be unable to touch or name own body parts when asked by the examiner, identify the relative position in space of two different objects, or find the way from one room to another in a familiar environment.

Subjective symptoms	0	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.
	1	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.
	2	Three or more subjective symptoms that moderately 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: marked fatigability, blurred or double vision, headaches requiring rest periods during most days.
Neurobehavioral effects	0	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.
	1	One or more neurobehavioral effects that occasionally interfere with workplace interaction, social interaction, or both but do not preclude them.
	2	One or more neurobehavioral effects that frequently interfere with workplace interaction, social interaction, or both but do not preclude them.
	3	One or more neurobehavioral effects that interfere with or preclude workplace interaction, social interaction, or both on most days or that occasionally require supervision for safety of self or others.
Communication	0	Able to communicate by spoken and written language (expressive communication), and to comprehend spoken and written language.

	1	Comprehension or expression, or both, of either spoken language or written language is only occasionally impaired. Can communicate complex ideas.
	2	Inability to communicate either by spoken language, written language, or both, more than occasionally but less than half of the time, or to comprehend spoken language, written language, or both, more than occasionally but less than half of the time. Can generally communicate complex ideas.
	3	Inability to communicate either by spoken language, written language, or both, at least half of the time but not all of the time, or to comprehend spoken language, written language, or both, at least half of the time but not all of the time. May rely on gestures or other alternative modes of communication. Able to communicate basic needs.
	Total	Complete inability to communicate either by spoken language, written language, or both, or to comprehend spoken language, written language, or both. Unable to communicate basic needs.
Consciousness	Total	Persistently altered state of consciousness, such as vegetative state minimally responsive state, coma.

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MISCELLANEOUS DISEASES

Rating

- 8100** Migraine:
- With very frequent completely prostrating and prolonged attacks productive of severe economic inadaptability..... 50
  - With characteristic prostrating attacks occurring on an average once a month over last several months..... 30
  - With characteristic prostrating attacks averaging one in 2 months over last several months ..... 10
  - With less frequent attacks ..... 0

- 8103** Tic, convulsive:
- Severe 30
  - Moderate 10
  - Mild ..... 0

Note: Depending upon frequency, severity, muscle groups involved.

- 8104** Paramyoclonus multiplex (convulsive state, myoclonic type):
- Rate as tic; convulsive; severe cases..... 60

- 8105** Chorea, Sydenham's:
- Pronounced, progressive grave types..... 100
  - Severe 80
  - Moderately severe ..... 50
  - Moderate 30
  - Mild ..... 10

Note: Consider rheumatic etiology and complications.

- 8106** Chorea, Huntington's.
- Rate as Sydenham's chorea. This, though a familial disease, has its onset in late adult life, and is considered a ratable disability.

- 8107** Athetosis, acquired.
- Rate as chorea.

- 8108** Narcolepsy.
- Rate as for epilepsy, petit mal.

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**DISEASES OF THE CRANIAL NERVES**

Rating

Disability from lesions of peripheral portions of first, second, third, fourth, sixth, and eighth nerves will be rated under the Organs of Special Sense. The ratings for the cranial nerves are for unilateral involvement; when bilateral, combine but without the bilateral factor.

**Fifth (trigeminal) cranial nerve**

8205 Paralysis of:

Complete	50	
Incomplete, severe.....		30
Incomplete, moderate.....		10

Note: Dependent upon relative degree of sensory manifestation or motor loss.

8305 Neuritis.

8405 Neuralgia.

Note: Tic douloureux may be rated in accordance with severity, up to complete paralysis.

**Seventh (facial) cranial nerve**

8207 Paralysis of:

Complete	30	
Incomplete, severe.....		20
Incomplete, moderate.....		10

Note: Dependent upon relative loss of innervation of facial muscles.

8307 Neuritis.

8407 Neuralgia.

**Ninth (glossopharyngeal) cranial nerve**

8209 Paralysis of:

Complete	30	
Incomplete, severe.....		20
Incomplete, moderate.....		10

Note: Dependent upon relative loss of ordinary sensation in mucous membrane of the pharynx, fauces, and tonsils.

8309 Neuritis.

8409 Neuralgia.

**Tenth (pneumogastric, vagus) cranial nerve**

8210 Paralysis of:

Complete	50	
Incomplete, severe.....		30
Incomplete, moderate.....		10

Note: Dependent upon extent of sensory and motor loss to organs of voice, respiration, pharynx, stomach and heart.

8310 Neuritis.

8410 Neuralgia.

**Eleventh (spinal accessory, external branch) cranial nerve.**

8211 Paralysis of:

Complete	30	
Incomplete, severe.....		20
Incomplete, moderate.....		10

Note: Dependent upon loss of motor function of sternomastoid and trapezius muscles.

8311 Neuritis.

8411 Neuralgia.

**Twelfth (hypoglossal) cranial nerve.**

8212 Paralysis of:

Complete	50	
Incomplete, severe.....		30
Incomplete, moderate.....		10

Note: Dependent upon loss of motor function of tongue.

8312 Neuritis.

8412 Neuralgia.

### DISEASES OF THE PERIPHERAL NERVES

The term “incomplete paralysis” with this and other peripheral nerve injuries indicates a degree of lost or impaired function substantially less than the type pictured for complete paralysis given with each nerve, whether due to varied level of the nerve lesion or to partial regeneration. When the involvement is wholly sensory, the rating should be for the mild, or at most, the moderate degree. The following ratings for the peripheral nerves are for unilateral involvement; when bilateral, combine with application of the bilateral factor.

Rating  
*Major Minor*

#### Upper radicular group (fifth and sixth cervicals)

##### 8510 Paralysis of:

Complete; all shoulder and elbow movements lost or severely affected, hand and wrist movements not affected .....	70.....	60
Incomplete:		
Severe .....	50.....	40
Moderate .....	40.....	30
Mild .....	20.....	20

##### 8610 Neuritis

##### 8710 Neuralgia

#### Middle radicular group

##### 8511 Paralysis of:

Complete; adduction, abduction, and rotation of arm, flexion of elbow, and extension of wrist lost or severely affected .....	70.....	60
Incomplete:		
Severe .....	50.....	40
Moderate .....	40.....	30
Mild .....	20.....	20

##### 8611 Neuritis

##### 8711 Neuralgia

#### Lower radicular group

##### 8512 Paralysis of

Complete; all intrinsic muscles of hand, and some or all of flexors of wrist and fingers, paralyzed (substantial loss of use of hand) .....	70.....	60
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**8512** Paralysis of (cont.)

## Incomplete:

Severe 50 .....	40
Moderate .....	40..... 30
Mild .....	20..... 20

**8612** Neuritis**8712** Neuralgia**All radicular groups****8513** Paralysis of:

Complete 90 .....	80
Incomplete:	
Severe 70 .....	60
Moderate .....	40..... 30
Mild .....	20..... 20

**8613** Neuritis**8713** Neuralgia**The musculospiral nerve (radial nerve)****8514** Paralysis of:

Complete; drop of hand and fingers, wrist and fingers perpetually flexed, the thumb adducted falling within the line of the outer border of the index finger; can not extend hand at wrist, extend proximal phalanges of fingers, extend thumb, or make lateral movement of wrist; supination of hand, extension and flexion of elbow weakened, the loss of synergic motion of extensors impairs the hand grip seriously; total paralysis of the triceps occurs only as the greatest rarity .....	70..... 60
Incomplete:	
Severe 50 .....	40
Moderate .....	30..... 20
Mild .....	20..... 20

**8614** Neuritis**8714** Neuralgia

Note: Lesions involving only “dissociation of extensor communis digitorum” and “paralysis below the extensor communis digitorum,” will not exceed the moderate rating under code 8514.

**The median nerve****8515** Paralysis of:

Complete; the hand inclined to the ulnar side, the index and middle fingers more extended than normally, considerable atrophy of the muscles of the thenar eminence, the thumb in the plane of the hand (ape hand); pronation incomplete and defective, absence of flexion of index finger and feeble flexion of middle finger, cannot make a fist, index and middle fingers remain extended; cannot flex distal phalanx of thumb, defective opposition and abduction of the thumb at right angles to palm; flexion of wrist weakened; pain with trophic disturbances .....	70	60
Incomplete:		
Severe 50 .....	40	
Moderate .....	30	20
Mild .....	10	10

**8615** Neuritis**8715** Neuralgia**The ulnar nerve****8516** Paralysis of:

Complete; the “griffin claw” deformity, due to flexor contraction of ring and little fingers, atrophy very marked in dorsal interspace and thenar and hypothenar eminences; loss of extension of ring and little fingers, cannot spread the fingers (or reverse), cannot adduct the thumb; flexion of wrist weakened .....	60	50
Incomplete:		
Severe 40 .....	30	
Moderate .....	30	20
Mild .....	10	10

**8616** Neuritis**8716** Neuralgia**Musculocutaneous nerve****8517** Paralysis of:

Complete; weakness but not loss of flexion of elbow and supination of forearm .....	30	20
Incomplete:		
Severe .....	20	20
Moderate .....	10	10
Mild .....	0	0

8617 Neuritis

8717 Neuralgia

**Circumflex nerve**

8518 Paralysis of:

Complete; abduction of arm is impossible, outward rotation is weakened; muscles supplied are deltoid and teres minor ..... 50..... 40

Incomplete:

Severe 30..... 20

Moderate ..... 10..... 10

Mild ..... 0..... 0

8618 Neuritis

8718 Neuralgia

**Long thoracic nerve**

8519 Paralysis of:

Complete; inability to raise arm above shoulder level, winged scapula deformity ..... 30..... 20

Incomplete:

Severe 20..... 20

Moderate ..... 10..... 10

Mild ..... 0..... 0

Note: Not to be combined with lost motion above shoulder level.

8619 Neuritis

8719 Neuralgia

Note: Combined nerve injuries should be rated by reference to the major involvement, or if sufficient in extent, consider radicular group ratings.

**Sciatic nerve.**

8520 Paralysis of:

Complete; the foot dangles and drops, no active movement possible of muscles below the knee, flexion of knee weakened or (very rarely) lost ..... 80

Incomplete:

Severe, with marked muscular atrophy ..... 60

Moderately severe ..... 40

Moderate ..... 20

Mild ..... 10

8620 Neuritis.

8720 Neuralgia.

**External popliteal nerve (common peroneal).**

8521 Paralysis of:

- Complete; foot drop and slight droop of first phalanges of all toes, cannot dorsiflex the foot, extension (dorsal flexion) of proximal phalanges of toes lost; abduction of foot lost, adduction weakened; anesthesia covers entire dorsum of foot and toes..... 40
- Incomplete:
  - Severe 30
  - Moderate ..... 20
  - Mild ..... 10

8621 Neuritis

8721 Neuralgia.

**Musculocutaneous nerve (superficial peroneal).**

8522 Paralysis of:

- Complete; eversion of foot weakened..... 30
- Incomplete:
  - Severe 20
  - Moderate ..... 10
  - Mild..... 0

8622 Neuritis.

8722 Neuralgia.

**Anterior tibial nerve (deep peroneal).**

8523 Paralysis of:

- Complete; dorsal flexion of foot lost ..... 30
- Incomplete:
  - Severe 20
  - Moderate ..... 10
  - Mild ..... 0

8623 Neuritis.

8723 Neuralgia.



**Internal popliteal nerve (tibial).**

8524 Paralysis of:

Complete; plantar flexion lost, frank adduction of foot impossible, flexion and separation of toes abolished; no muscle in sole can move; in lesions of the nerve high in popliteal fossa, plantar flexion of foot is lost ..... 40

Incomplete:

Severe 30 .....

Moderate 20 .....

Mild 10

8624 Neuritis.

8724 Neuralgia.

**Posterior tibial nerve.**

8525 Paralysis of:

Complete; paralysis of all muscles of sole of foot, frequently with painful paralysis of a causalgic nature; toes cannot be flexed; adduction is weakened; plantar flexion is impaired..... 30

Incomplete:

Severe 20

Moderate ..... 10

Mild ..... 10

8625 Neuritis.

8725 Neuralgia.

**Anterior crural nerve (femoral).**

8526 Paralysis of:

Complete; paralysis of quadriceps extensor muscles..... 40

Incomplete:

Severe 30

Moderate ..... 20

Mild..... 10

8626 Neuritis.

8726 Neuralgia.

**Internal saphenous nerve.**

- 8527 Paralysis of:
  - Severe to complete ..... 10
  - Mild to moderate..... 0

8627 Neuritis.

8727 Neuralgia.

**Obturator nerve.**

- 8528 Paralysis of:
  - Severe to complete... 10
  - Mild or moderate..... 0

8628 Neuritis.

8728 Neuralgia.

**External cutaneous nerve of thigh.**

- 8529 Paralysis of:
  - Severe to complete ..... 10
  - Mild or moderate..... 0

8629 Neuritis.

8729 Neuralgia.

**Ilio-inguinal nerve.**

- 8530 Paralysis of:
  - Severe to complete... 10
  - Mild or moderate..... 0

8630 Neuritis.

8730 Neuralgia.

8540 Soft-tissue sarcoma (of neurogenic origin) ..... 100

Note: The 100 percent rating will be continued for 6 months following the cessation of surgical, X-ray, antineoplastic chemotherapy or other therapeutic procedure. At this point, if there has been no local recurrence or metastases, the rating will be made on residuals.

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**THE EPILEPSIES**

Rating

A thorough study of all material in §§4.121 and 4.122 of the preface and under the ratings for epilepsy is necessary prior to any rating action.

**8910** Epilepsy, grand mal.

Rate under the general rating formula for major seizures.

**8911** Epilepsy, petit mal.

Rate under the general rating formula for minor seizures.

Note (1): A major seizure is characterized by the generalized tonic-clonic convulsion with unconsciousness.

Note (2): A minor seizure consists of a brief interruption in consciousness or conscious control associated with staring or rhythmic blinking of the eyes or nodding of the head ("pure" petit mal), or sudden jerking movements of the arms, trunk, or head (myoclonic type) or sudden loss of postural control (akinetic type).

**General Rating Formula for Major and Minor Epileptic Seizures:**

Averaging at least 1 major seizure per month over the last year .....	100
Averaging at least 1 major seizure in 3 months over the last year; or more than 10 minor seizures weekly .....	80
Averaging at least 1 major seizure in 4 months over the last year; or 9-10 minor seizures per week .....	60
At least 1 major seizure in the last 6 months or 2 in the last year; or averaging at least 5 to 8 minor seizures weekly .....	40
At least 1 major seizure in the last 2 years; or at least 2 minor seizures in the last 6 months .....	20
A confirmed diagnosis of epilepsy with a history of seizures .....	10

Note (1): When continuous medication is shown necessary for the control of epilepsy, the minimum evaluation will be 10 percent. This rating will not be combined with any other rating for epilepsy.

Note (2): In the presence of major and minor seizures, rate the predominating type.

Note (3): There will be no distinction between diurnal and nocturnal major seizures.

**8912** Epilepsy, Jacksonian and focal motor or sensory.**8913** Epilepsy, diencephalic.

Rate as minor seizures, except in the presence of major and minor seizures, rate the predominating type.

**8914** Epilepsy, psychomotor.

Major seizures:

Psychomotor seizures will be rated as major seizures under the general rating formula when characterized by automatic states and/or generalized convulsions with unconsciousness.

Minor seizures:

Psychomotor seizures will be rated as minor seizures under the general rating formula when characterized by brief transient episodes of random motor movements, hallucinations, perceptual illusions, abnormalities of thinking, memory or mood, or autonomic disturbances.

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*Mental Disorders in Epilepsies:* A nonpsychotic organic brain syndrome will be rated separately under the appropriate diagnostic code (e.g., 9304 or 9326). In the absence of a diagnosis of non-psychotic organic psychiatric disturbance (psychotic, psychoneurotic or personality disorder) if diagnosed and shown to be secondary to or directly associated with epilepsy will be rated separately. The psychotic or psychoneurotic disorder will be rated under the appropriate diagnostic code. The personality disorder will be rated as a dementia (e.g., diagnostic code 9304 or 9326).

*Epilepsy and Unemployability:*

(1) Rating specialists must bear in mind that the epileptic, although his or her seizures are controlled, may find employment and rehabilitation difficult of attainment due to employer reluctance to the hiring of the epileptic.

(2) Where a case is encountered with a definite history of unemployment, full and complete development should be undertaken to ascertain whether the epilepsy is the determining factor in his or her inability to obtain employment.

(3) The assent of the claimant should first be obtained for permission to conduct this economic and social survey. The purpose of this survey is to secure all the relevant facts and data necessary to permit of a true judgment as to the reason for his or her unemployment and should include information as to:

- (a) Education;
- (b) Occupations prior and subsequent to service;
- (c) Places of employment and reasons for termination;
- (d) Wages received;
- (e) Number of seizures.

(4) Upon completion of this survey and current examination, the case should have rating board consideration. Where in the judgment of the rating board the veteran's

unemployability is due to epilepsy and jurisdiction is not vested in that body by reason of schedular evaluations, the case should be submitted to the Director, Compensation and Pension Service.

(Authority: 38 U.S.C. 1155)

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[29 FR 6718, May 22, 1964, as amended at 40 FR 42540, Sept. 15, 1975; 41 FR 11302, Mar. 18, 1976; 43 FR 45362, Oct. 2, 1978; 54 FR 4282, Jan. 30, 1989; 54 FR 49755, Dec. 1, 1989; 55 FR 154, Jan. 3, 1990; 56 FR 51653, Oct. 15, 1991; 57 FR 24364, June 9, 1992; 70 FR 75399, Dec. 20, 2005; 73 FR 54705, Sept. 23, 2008]

**Supplement *Highlights* references:** 39(1), 45(1).

*Next Section is §4.125*

Reserved

	7525	Criterion March 11, 1969; evaluation February 17, 1994.
	7526	Removed February 17, 1994.
	7527	Criterion February 17, 1994.
	7528	Criterion March 10, 1976; criterion February 17, 1994.
	7529	Criterion February 17, 1994.
	7530	Added September 9, 1975; evaluation February 17, 1994.
	7531	Added September 9, 1975; criterion February 17, 1994.
	7532-7542	Added February 17, 1994.
4.116		§4.116 removed and §4.116a re-designated §4.116 “Schedule of ratings-gynecological conditions and disorders of the breasts” May 22, 1995.
	7610	Criterion May 22, 1995.
	7611	Criterion May 22, 1995.
	7612	Criterion May 22, 1995.
	7613	Criterion May 22, 1995.
	7614	Criterion May 22, 1995.
	7615	Criterion May 22, 1995.
	7617	Criterion May 22, 1995.
	7618	Criterion May 22, 1995.
	7619	Criterion May 22, 1995.
	7620	Criterion May 22, 1995.
	7621	Criterion May 22, 1995.
	7622	Evaluation May 22, 1995.
	7623	Evaluation May 22, 1995.
	7624	Criterion August 9, 1976; evaluation May 22, 1995.
	7625	Criterion August 9, 1976; evaluation May 22, 1995.
	7626	Criterion May 22, 1995; criterion March 18, 2002.
	7627	Criterion March 10, 1976; criterion May 22, 1995.
	7628	Added May 22, 1995.
	7629	Added May 22, 1995.
4.117	7700	Evaluation October 23, 1995.
	7701	Removed October 23, 1995.
	7702	Evaluation October 23, 1995.
	7703	Evaluation August 23, 1948; criterion October 23, 1995.
	7704	Evaluation October 23, 1995.
	7705	Evaluation October 23, 1995.
	7706	Evaluation October 23, 1995.
	7707	Criterion October 23, 1995.
	7709	Evaluation March 10, 1976; criterion October 23, 1995.
	7710	Criterion October 23, 1995.
	7711	Criterion October 23, 1995.
	7712	Criterion October 23, 1995.
	7713	Removed October 23, 1995.
	7714	Added September 9, 1975; criterion October 23, 1995.
	7715	Added October 26, 1990.

	7716	Added October 23, 1995.
4.118	7800	Evaluation August 30, 2002; criterion October 23, 2008.
	7801	Criterion July 6, 1950; criterion August 30, 2002; criterion October 23, 2008.
	7802	Criterion September 22, 1978; criterion August 30, 2002; criterion October 23, 2008.
	7803	Criterion August 30, 2002; removed October 23, 2008.
	7804	Criterion July 6, 1950; criterion September 22, 1978; criterion and evaluation October 23, 2008.
	7805	Criterion October 23, 2008.
	7806	Criterion September 9, 1975; evaluation August 30, 2002.
	7807	Criterion August 30, 2002.
	7808	Criterion August 30, 2002.
	7809	Criterion August 30, 2002.
	7810	Removed August 30, 2002.
	7811	Criterion March 11, 1969; evaluation August 30, 2002.
	7812	Removed August 30, 2002.
	7813	Criterion August 30, 2002.
	7814	Removed August 30, 2002.
	7815	Evaluation August 30, 2002.
	7816	Evaluation August 30, 2002.
	7817	Evaluation August 30, 2002.
	7818	Criterion August 30, 2002.
	7819	Criterion August 30, 2002.
	7820-7833	Added August 30, 2002.
4.119	7900	Criterion August 13, 1981; evaluation June 9, 1996.
	7901	Criterion August 13, 1981; evaluation June 9, 1996.
	7902	Evaluation August 13, 1981; criterion June 9, 1996.
	7903	Criterion August 13, 1981; evaluation June 9, 1996.
	7904	Criterion August 13, 1981; evaluation June 9, 1996.
	7905	Evaluation; August 13, 1981; evaluation June 9, 1996.
	7907	Evaluation August 13, 1981; evaluation June 9, 1996.
	7908	Criterion August 13, 1981; criterion June 9, 1996.
	7909	Evaluation August 13, 1981; criterion June 9, 1996.
	7910	Removed June 9, 1996.
	7911	Evaluation March 11, 1969; evaluation August 13, 1981; criterion June 9, 1996.
	7913	Criterion September 9, 1975; criterion August 13, 1981; criterion June 6, 1996.
	7914	Criterion March 10, 1976; criterion August 13, 1981; criterion June 9, 1996.
	7916	Added June 9, 1996.
	7917	Added June 9, 1996.
	7918	Added June 9, 1996.
	7919	Added June 9, 1996.



4.124a	8002	Criterion September 22, 1978.
	8021	Criterion September 22, 1978; criterion October 1, 1961; criterion March 10, 1976; criterion March 1, 1989.
	8045	Criterion and evaluation October 23, 2008.
	8046	Added October 1, 1961; criterion March 10, 1976; criterion March 1, 1989.
	8100	Evaluation June 9, 1953.
	8540	Added October 15, 1991.
	8910	Added October 1, 1961.
	8911	Added October 1, 1961; evaluation September 9, 1975.
	8912	Added October 1, 1961.
	8913	Added October 1, 1961.
	8914	Added October 1, 1961; criterion September 9, 1975; criterion March 10, 1976.
	8910-8914	Evaluations September 9, 1975.
4.125-4.132		All Diagnostic Codes under Mental Disorders October 1, 1961; except as to evaluation for Diagnostic Codes 9500 through 9511 September 9, 1975.
4.130		Re-designated from §4.132 November 7, 1996.
	9200	Removed February 3, 1988.
	9201	Criterion February 3, 1988.
	9202	Criterion February 3, 1988.
	9203	Criterion February 3, 1988.
	9204	Criterion February 3, 1988.
	9205	Criterion February 3, 1988; criterion November 7, 1996.
	9206	Criterion February 3, 1988; removed November 7, 1996.
	9207	Criterion February 3, 1988; removed November 7, 1996.
	9208	Criterion February 3, 1988; removed November 7, 1996.
	9209	Criterion March 10, 1976; criterion February 3, 1988; removed November 7, 1996.
	9210	Criterion March 10, 1976; criterion February 3, 1988; criterion November 7, 1996.
	9211	Added November 7, 1996.
	9300	Criterion March 10, 1976; criterion February 3, 1988; criterion November 7, 1996.
	9301	Criterion March 10, 1976; criterion February 3, 1988; criterion November 7, 1996.
	9302	Criterion March 10, 1976; criterion February 3, 1988; removed November 7, 1996.
	9303	Criterion March 10, 1976; criterion February 3, 1988; removed November 7, 1996.
	9304	Criterion March 10, 1976; criterion February 3, 1988; criterion November 7, 1996.
	9305	Criterion March 10, 1976; criterion February 3, 1988; criterion

	November 7, 1996.
9306	Criterion March 10, 1976; criterion February 3, 1988; removed November 7, 1996.
9307	Criterion March 10, 1976; criterion February 3, 1988; removed November 7, 1996.
9308	Criterion March 10, 1976; criterion February 3, 1988; removed November 7, 1996.
9309	Criterion March 10, 1976; criterion February 3, 1988; removed November 7, 1996.
9310	Criterion March 10, 1976; criterion February 3, 1988; criterion November 7, 1996.
9311	Criterion March 10, 1976; criterion February 3, 1988; removed November 7, 1996.
9312	Added March 10, 1976; criterion February 3, 1988; criterion November 7, 1996.
9313	Added March 10, 1976; removed February 3, 1988.
9314	Added March 10, 1976; removed February 3, 1988.
9315	Added March 10, 1976; criterion February 3, 1988; removed November 7, 1996.
9316-9321	Added March 10, 1976; removed February 3, 1988.
9322	Added March 10, 1976; criterion February 3, 1988; removed November 7, 1996.
9323	Added March 10, 1976; removed February 3, 1988.
9324	Added March 10, 1976; criterion February 3, 1988; removed November 7, 1996.
9325	Added March 10, 1976; criterion February 3, 1988; removed November 7, 1996.
9326	Added March 10, 1976; removed February 3, 1988; added November 7, 1996.
9327	Added November 7, 1996.
9400-9411	Evaluations February 3, 1988.
9400	Criterion March 10, 1976; criterion February 3, 1988.
9401	Criterion March 10, 1976; criterion February 3, 1988; removed November 7, 1996.
9402	Criterion March 10, 1976; criterion February 3, 1988; removed November 7, 1996.
9403	Criterion March 10, 1976; criterion February 3, 1988; criterion November 7, 1996.
9410	Added March 10, 1976; criterion February 3, 1988.
9411	Added February 3, 1988.
9412	Added November 7, 1996.
9413	Added November 7, 1996.
9416	Added November 7, 1996.
9417	Added November 7, 1996.
9421	Added November 7, 1996.
9422	Added November 7, 1996.
9423	Added November 7, 1996.

9424	Added November 7, 1996.
9425	Added November 7, 1996.
9431	Added November 7, 1996.
9432	Added November 7, 1996.
9433	Added November 7, 1996.
9434	Added November 7, 1996.
9435	Added November 7, 1996.
9440	Added November 7, 1996.
9500	Criterion March 10, 1976; criterion February 3, 1988.
9501	Criterion March 10, 1976; criterion February 3, 1988.
9502	Criterion March 10, 1976; criterion February 3, 1988.
9503	Removed March 10, 1976.
9504	Criterion September 9, 1975; removed March 10, 1976.
9505	Added March 10, 1976; criterion February 3, 1988.
9506	Added March 10, 1976; criterion February 3, 1988.
9507	Added March 10, 1976; criterion February 3, 1988.
9508	Added March 10, 1976; criterion February 3, 1988.
9509	Added March 10, 1976; criterion February 3, 1988.
9510	Added March 10, 1976; criterion February 3, 1988.
9511	Added March 10, 1976; criterion February 3, 1988.
9520	Added November 7, 1996.
9521	Added November 7, 1996.
4.132	Re-designated as §4.130 November 7, 1996.
4.150	9900 Criterion September 22, 1978; criterion February 17, 1994.
	9901 Criterion February 17, 1994.
	9902 Criterion February 17, 1994.
	9903 Criterion February 17, 1994.
	9905 Criterion September 22, 1978; evaluation February 17, 1994.
	9910 Removed February 17, 1994.
	9913 Criterion February 17, 1994.
	9914 Added February 17, 1994.
	9915 Added February 17, 1994.
	9916 Added February 17, 1994.

[29 FR 6718, May 22, 1964, as amended at 34 FR 5064, Mar. 11, 1969; 40 FR 42541, Sept. 15, 1975; 41 FR 11291, Mar. 18, 1976; 41 FR 34258, Aug. 13, 1976; 43 FR 45362, Oct. 2, 1978; 46 FR 43666, Aug. 31, 1981; 52 FR 44122, Nov. 18, 1987; 52 FR 46439, Dec. 7, 1987; 72 FR 12983, Mar. 20, 2007; 72 FR 16728, Apr. 5, 2007; 73 FR 54708, 54711, Sept. 23, 2008]

**Supplement *Highlights* references:** 42(1), 45(1,2).

*End of Appendix A*

Reserved

7519.....	Urethra, fistula.
7520.....	Penis, removal of half or more.
7521.....	Penis, removal of glans.
7522.....	Penis, deformity, with loss of erectile power.
7523.....	Testis, atrophy, complete.
7524.....	Testis, removal.
7525.....	Epididymo-orchitis, chronic only.
7527.....	Prostate gland.
7528.....	Malignant neoplasms.
7529.....	Benign neoplasms.
7530.....	Renal disease, chronic.
7531.....	Kidney transplant.
7532.....	Renal tubular disorders.
7533.....	Kidneys, cystic diseases.
7534.....	Atherosclerotic renal disease.
7535.....	Toxic nephropathy.
7536.....	Glomerulonephritis.
7537.....	Interstitial nephritis.
7538.....	Papillary necrosis.
7539.....	Renal amyloid disease.
7540.....	Disseminated intravascular coagulation.
7541.....	Renal involvement in systemic diseases.
7542.....	Neurogenic bladder.

#### GYNECOLOGICAL CONDITIONS AND DISORDERS OF THE BREAST

7610.....	Vulva, disease or injury.
7611.....	Vagina, disease or injury.
7612.....	Cervix, disease or injury.
7613.....	Uterus, disease or injury.
7614.....	Fallopian tube, disease or injury.
7615.....	Ovary, disease or injury.
7617.....	Uterus and both ovaries, removal.
7618.....	Uterus, removal.
7619.....	Ovary, removal.
7620.....	Ovaries, atrophy of both.
7621.....	Uterus, prolapse.
7622.....	Uterus, displacement.
7623.....	Pregnancy, surgical complications.
7624.....	Fistula, rectovaginal.
7625.....	Fistula, urethrovaginal.
7626.....	Breast, surgery.
7627.....	Malignant neoplasms.
7628.....	Benign neoplasms.
7629.....	Endometriosis.

**THE HEMIC AND LYMPHATIC SYSTEMS**

7700.....	Anemia.
7702.....	Agranulocytosis, acute.
7703.....	Leukemia.
7704.....	Polycythemia vera.
7705.....	Thrombocytopenia.
7706.....	Splenectomy.
7707.....	Spleen, injury of, healed.
7709.....	Hodgkin's disease.
7710.....	Adenitis, tuberculous.
7714.....	Sickle cell anemia.
7715.....	Non-Hodgkin's lymphoma.
7716.....	Aplastic anemia.

**THE SKIN**

7800.....	Burn scar(s) of the head, face, or neck; scar(s) of the head, face, or neck due to other causes; or other disfigurement of the head, face, or neck.
7801.....	Burn scar(s) or scar(s) due to other causes, not of the head, face, or neck, that are deep and nonlinear.
7802.....	Burn scar(s) or scar(s) due to other causes, not of the head, face, or neck, that are superficial and nonlinear.
7804.....	Scar(s), unstable or painful.
7805.....	Scars, other.
7806.....	Dermatitis or eczema.
7807.....	Leishmaniasis, American (New World).
7808.....	Leishmaniasis, Old World.
7809.....	Lupus erythematosus, discoid.
7811.....	Tuberculosis luposa (lupus vulgaris).
7813.....	Dermatophytosis.
7815.....	Bullous disorders.
7816.....	Psoriasis.
7817.....	Exfoliative dermatitis.
7818.....	Malignant skin neoplasms.
7819.....	Benign skin neoplasms.
7820.....	Infections of the skin.
7821.....	Cutaneous manifestations of collagen-vascular diseases.
7822.....	Papulosquamous disorders.
7823.....	Vitiligo.
7824.....	Keratinization, diseases.
7825.....	Urticaria.
7826.....	Vasculitis, primary cutaneous.
7827.....	Erythema multiforme.
7828.....	Acne.
7829.....	Chloracne.
7830.....	Scarring alopecia.

- 7831..... Alopecia areata.  
 7832..... Hyperhidrosis.  
 7833..... Malignant melanoma.

### THE ENDOCRINE SYSTEM

- 7900..... Hyperthyroidism.  
 7901..... Thyroid gland, toxic adenoma.  
 7902..... Thyroid gland, nontoxic adenoma.  
 7903..... Hypothyroidism.  
 7904..... Hyperparathyroidism.  
 7905..... Hypoparathyroidism.  
 7907..... Cushing's syndrome.  
 7908..... Acromegaly.  
 7909..... Diabetes insipidus.  
 7911..... Addison's disease.  
 7912..... Pluriglandular syndrome.  
 7913..... Diabetes mellitus.  
 7914..... Malignant neoplasm.  
 7915..... Benign neoplasm.  
 7916..... Hyperpituitarism.  
 7917..... Hyperaldosteronism.  
 7918..... Pheochromocytoma.  
 7919..... C-cell hyperplasia, thyroid.

### NEUROLOGICAL CONDITIONS AND CONVULSIVE DISORDERS

#### Organic Diseases of the Central Nervous System

- 8000..... Encephalitis, epidemic, chronic.

#### Brain, New Growth of

- 8002..... Malignant.  
 8003..... Benign.  
 8004..... Paralysis agitans.  
 8005..... Bulbar palsy.  
 8007..... Brain, vessels, embolism.  
 8008..... Brain, vessels, thrombosis.  
 8009..... Brain, vessels, hemorrhage.  
 8010..... Myelitis.  
 8011..... Poliomyelitis, anterior.  
 8012..... Hematomyelia.  
 8013..... Syphilis, cerebrospinal.  
 8014..... Syphilis, meningovascular.  
 8015..... Tabes dorsalis.  
 8017..... Amyotrophic lateral sclerosis.  
 8018..... Multiple sclerosis.

- 8019..... Meningitis, cerebrospinal, epidemic.  
 8020..... Brain, abscess.

### Spinal Cord, New Growths

- 8021..... Malignant.  
 8022..... Benign.  
 8023..... Progressive muscular atrophy.  
 8024..... Syringomyelia.  
 8025..... Myasthenia gravis.  
 8045..... Residuals of traumatic brain injury (TBI).  
 8046..... Cerebral arteriosclerosis.

### Miscellaneous Diseases

- 8100..... Migraine  
 8103..... Tic, convulsive.  
 8104..... Paramyoclonus multiplex.  
 8105..... Chorea, Sydenham's.  
 8106..... Chorea, Huntington's.  
 8107..... Athetosis, acquired.  
 8108..... Narcolepsy.

### The Cranial Nerves

- 8205..... Fifth (trigeminal), paralysis.  
 8207..... Seventh (facial), paralysis.  
 8209..... Ninth (glossopharyngeal), paralysis.  
 8210..... Tenth (pneumogastric, vagus), paralysis.  
 8211..... Eleventh (spinal accessory, external branch), paralysis.  
 8212..... Twelfth (hypoglossal), paralysis.  
 8305..... Neuritis, fifth cranial nerve.  
 8307..... Neuritis, seventh cranial nerve.  
 8309..... Neuritis, ninth cranial nerve.  
 8310..... Neuritis, tenth cranial nerve.  
 8311..... Neuritis, eleventh cranial nerve.  
 8312..... Neuritis, twelfth cranial nerve.  
 8405..... Neuralgia, fifth cranial nerve.  
 8407..... Neuralgia, seventh cranial nerve.  
 8409..... Neuralgia, ninth cranial nerve.  
 8410..... Neuralgia, tenth cranial nerve.  
 8411..... Neuralgia, eleventh cranial nerve.  
 8412..... Neuralgia, twelfth cranial nerve.

### Peripheral Nerves

- 8510..... Upper radicular group, paralysis.



- ..... Middle radicular group, paralysis.
- ..... Lower radicular group, paralysis.
- ..... All radicular groups, paralysis.
- ..... Musculospiral nerve (radial), paralysis.
- ..... Median nerve, paralysis.
- ..... Ulnar nerve, paralysis.
- ..... Musculocutaneous nerve, paralysis.
- ..... Circumflex nerve, paralysis.
- ..... Long thoracic nerve, paralysis.
- ..... Sciatic nerve, paralysis.
- ..... External popliteal nerve (common peroneal), paralysis.
- ..... Musculocutaneous nerve (superficial peroneal), paralysis.
- ..... Anterior tibial nerve (deep peroneal), paralysis.
- ..... Internal popliteal nerve (tibial), paralysis.
- ..... Posterior tibial nerve, paralysis.
- ..... Anterior crural nerve (femoral), paralysis.
- ..... Internal saphenous nerve, paralysis.
- ..... Obturator nerve, paralysis.
- ..... External cutaneous nerve of thigh, paralysis.
- ..... Ilio-inguinal nerve, paralysis.
- ..... Soft-tissue sarcoma (Neurogenic origin).
- ..... Neuritis, upper radicular group.
- ..... Neuritis, middle radicular group.
- ..... Neuritis, lower radicular group.
- ..... Neuritis, all radicular group.
- ..... Neuritis, musculospiral (radial) nerve.
- ..... Neuritis, median nerve.
- ..... Neuritis, ulnar nerve.
- ..... Neuritis, musculocutaneous nerve.
- ..... Neuritis, circumflex nerve.
- ..... Neuritis, long thoracic nerve.
- ..... Neuritis, sciatic nerve.
- ..... Neuritis, external popliteal (common peroneal) nerve.
- ..... Neuritis, musculocutaneous (superficial peroneal) nerve.
- ..... Neuritis, anterior tibial (deep peroneal) nerve.
- ..... Neuritis, internal popliteal (tibial) nerve.
- ..... Neuritis, posterior tibial nerve.
- ..... Neuritis, anterior crural (femoral) nerve.
- ..... Neuritis, internal saphenous nerve.
- ..... Neuritis, obturator nerve.
- ..... Neuritis, external cutaneous nerve of thigh.
- ..... Neuritis, ilio-inguinal nerve.
- ..... Neuralgia, upper radicular group.
- ..... Neuralgia, middle radicular group.
- ..... Neuralgia, lower radicular group.
- ..... Neuralgia, all radicular groups.
- ..... Neuralgia, musculospiral nerve (radial).

8715.....	Neuralgia, median nerve.
8716.....	Neuralgia, ulnar nerve.
8717.....	Neuralgia, musculocutaneous nerve.
8718.....	Neuralgia, circumflex nerve.
8719.....	Neuralgia, long thoracic nerve.
8720.....	Neuralgia, sciatic nerve.
8721.....	Neuralgia, external popliteal nerve (common peroneal).
8722.....	Neuralgia, musculocutaneous nerve (superficial peroneal).
8723.....	Neuralgia, anterior tibial nerve (deep peroneal).
8724.....	Neuralgia, internal popliteal nerve (tibial).
8725.....	Neuralgia, posterior tibial nerve.
8726.....	Neuralgia, anterior crural nerve (femoral).
8727.....	Neuralgia, internal saphenous nerve.
8728.....	Neuralgia, obturator nerve.
8729.....	Neuralgia, external cutaneous nerve of thigh.
8730.....	Neuralgia, ilio-inguinal nerve.

### The Epilepsies

8910.....	Grand mal.
8911.....	Petit mal.
8912.....	Jacksonian and focal motor or sensory.
8913.....	Diencephalic.
8914.....	Psychomotor.

### Mental Disorders

9201.....	Schizophrenia, disorganized type.
9202.....	Schizophrenia, catatonic type.
9203.....	Schizophrenia, paranoid type.
9204.....	Schizophrenia, undifferentiated type.
9205.....	Schizophrenia, residual type.
9208.....	Delusional disorder.
9210.....	Psychotic disorder.
9211.....	Schizoaffective disorder.

### Delirium, Dementia, Amnesic and Other Cognitive Disorders

9300.....	Delirium.
9301.....	Dementia due to infection.
9304.....	Dementia due to head trauma.
9305.....	Vascular dementia.
9310.....	Dementia of unknown etiology.
9312.....	Dementia of Alzheimer's type.
9326.....	Dementia due to other medical conditions.
9327.....	Organic mental disorder.

**Anxiety Disorders**

9400.....	Generalized anxiety disorder.
9403.....	Specific (simple) phobia.
9404.....	Obsessive compulsive disorder.
9410.....	Other and unspecified neurosis.
9411.....	Post-traumatic stress disorder.
9412.....	Panic disorder.
9413.....	Anxiety disorder, not otherwise specified.

**Dissociative Disorder**

9416.....	Amnesia, fugue, identity disorder.
9417.....	Depersonalization disorder.

**Somatoform Disorders**

9421.....	Somatization disorder.
9422.....	Pain disorder.
9423.....	Undifferentiated somatoform disorder.
9424.....	Conversion disorder.
9425.....	Hypochondriasis.

**Mood Disorders**

9431.....	Cyclothymic disorder.
9432.....	Bipolar disorder.
9433.....	Dysthymic disorder.
9434.....	Major depressive disorder.
9435.....	Mood disorder not otherwise specified.

**Chronic Adjustment Disorder**

9440.....	Chronic adjustment disorder.
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**Eating Disorders**

9520.....	Anorexia nervosa.
9521.....	Bulimia nervosa.

**DENTAL AND ORAL CONDITIONS**

9900.....	Maxilla or mandible, chronic.
9901.....	Mandible, loss of, complete.
9902.....	Mandible, loss of approximately one-half.

9903.....	Mandible, nonunion.
9904.....	Mandible, malunion.
9905.....	Temporomandibular articulation, limited motion.
9906.....	Ramus, loss of whole or part.
9907.....	Ramus, loss of less than one-half.
9908.....	Condylod process.
9909.....	Coronoid process.
9911.....	Hard palate, loss of half or more.
9912.....	Hard palate, loss of less than half.
9913.....	Teeth, loss of.
9914.....	Maxilla, loss of more than half.
9915.....	Maxilla, loss of half or less.
9916.....	Maxilla, malunion or nonunion of.

[29 FR 6718, May 22, 1964, as amended at 34 FR 5064, Mar. 11, 1969; 52 FR 44122, Nov. 18, 1987; 53 FR 24938, July 1, 1988; 59 FR 2528, 2530, Jan. 18, 1994; 72 FR 12990, Mar. 20, 2007; 73 FR 54708, 54711, Sept. 23, 2008]

**Supplement *Highlights* references:** 42(1), 45(1,2).

*End of Appendix B*

Long finger.....	5226	
Ring or little finger.....	5227	
Elbow .....	5205	
Hand		
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**Supplement *Highlights* references:** 42(1), 45(1,2).

*End of Appendix C*