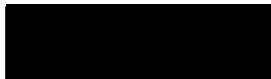




**DEPARTMENT OF VETERANS AFFAIRS**  
**Veterans Benefit Administration**  
**Regional Office**



**VA File Number**



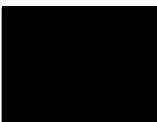
**Represented By:**  
**GORDON A GRAHAM**  
**Rating Decision**  
**07/16/2024**

**INTRODUCTION**

The records reflect that you are a Veteran of the Vietnam Era. You served in the Army from September 28, 1965 to September 27, 1967. You filed a new claim for benefits that was received on March 2, 2024. Based on a review of the evidence listed below, we have made the following decisions on your claim.

**DECISION**

1. Service connection for loss of use of both lower extremities (previously rated as bradykinesia with tremors, muscle rigidity, and stiffness of the left and right lower extremities) (claimed as loss of use of both lower extremities DC 5110) is granted with an evaluation of 100 percent effective March 2, 2024.
2. Evaluation of bradykinesia, tremors, and muscle rigidity of the right upper extremity (claimed as loss of use of upper extremities DC 5109), which is currently 50 percent disabling, is continued.
3. Evaluation of bradykinesia, tremors, and muscle rigidity of the left upper extremity (claimed



as loss of use of upper extremities DC 5109), which is currently 40 percent disabling, is continued.

4. The level of special monthly compensation is confirmed and continued at its current rate.

### EVIDENCE

- VA Form 27-0820, Report of General Information, received on April 17, 2024
- VA Form 27-0820, Report of General Information, received on April 15, 2024
- VA Form 27-0820, Report of General Information, received on April 15, 2024
- Subsequent Development Letter, received on April 12, 2024
- VA Form 27-0820, Report of General Information, received on April 04, 2024
- Correspondence, received on April 04, 2024
- VA Form 27-0820, Report of General Information, received on March 14, 2024
- VA 21-526EZ, Fully Developed Claim (Compensation), received on March 02, 2024
- C&P Exam, LHI, DBQ A&A Worksheet - VA Form 21-2680, conducted May 02, 2024
- C&P Exam, LHI, DBQ NEURO Parkinson's disease, conducted May 02, 2024
- C&P Exam, received on May 23, 2024
- VAMC (Veterans Affairs Medical Center) treatment records, Loma Linda VAMC, received April 11, 2024, for the period May 20, 2022 to April 23, 2024

### REASONS FOR DECISION

**1. Service connection for loss of use of both lower extremities (previously rated as bradykinesia with tremors, muscle rigidity, and stiffness of the left and right lower extremities) (claimed as loss of use of both lower extremities DC 5110) as secondary to the service-connected disability of Parkinson's disease with balance impairment.**

Service connection for loss of use of both lower extremities (previously rated as bradykinesia with tremors, muscle rigidity, and stiffness of the left and right lower extremities) (claimed as loss of use of both lower extremities DC 5110) has been established as related to the service-connected disability of Parkinson's disease with balance impairment. (38 CFR 3.303, 38 CFR 3.310)

The effective date of this grant is March 2, 2024. Service connection has been established from the day VA received your claim. When a claim of service connection is received more than one year after discharge from active duty, the effective date is the date VA received the claim. (38 CFR 3.400)\

The evaluation of the same disability under various diagnoses is to be avoided. Disability from injuries to the muscles, nerves, and joints of an extremity may overlap to a great extent, so that special rules are included in the appropriate body system for their evaluation. Dyspnea, tachycardia, nervousness, fatigability, etc., may result from many causes. Some may be service-connected; others, not. Both the use of manifestations not resulting from service-connected

disease or injury in establishing the service-connected evaluation and the evaluation of the same manifestation under different diagnoses are to be avoided. (38 CFR 4.14)

We have combined your previously rated as bradykinesia with tremors, muscle rigidity, and stiffness of the left and right lower extremities due to your most recent VA examination annotating you are bedridden and are no longer able to walk with severely limited range of motion and strength in your lower extremities, requiring assistance with all your daily living activities.

An evaluation of 100 percent is assigned from March 2, 2024.

We have assigned a 100 percent evaluation for your loss of use of both lower extremities based on:

- Loss of use of both feet

This is the highest schedular evaluation allowed under the law for loss of use of both feet. (38 CFR 4.63, 38 CFR 4.71a)

**2. Evaluation of bradykinesia, tremors, and muscle rigidity of the right upper extremity (claimed as loss of use of upper extremities DC 5109) currently evaluated as 50 percent disabling.**

The evaluation of bradykinesia, tremors, and muscle rigidity of the right upper extremity (claimed as loss of use of upper extremities DC 5109) is continued as 50 percent disabling.

We reviewed the evidence received and determined your service-connected condition(s) hasn't/haven't increased in severity sufficiently to warrant a higher evaluation.

Your VA examination conducted May 2, 2024, annotated severe right upper extremity due to your Parkinson's disease with the ability to feed yourself finger foods but unable to utilize a utensil, with severely limited motor skills and grip strength. Your examination annotated decreased muscle strength with muscle atrophy. Therefore, we have continued the evaluation for your right upper extremity as severe incomplete paralysis.

We have assigned a 50 percent evaluation for your bradykinesia, tremors, and muscle rigidity of the right upper extremity based on:

- Severe incomplete paralysis of the major extremity (38 CFR 4.124a)

A higher evaluation of 70 percent is not warranted for paralysis of the musculospiral nerve (radial nerve) unless the evidence shows:

- Nerve damage is complete. (38 CFR 4.120, 38 CFR 4.124a)

**3. Evaluation of bradykinesia, tremors, and muscle rigidity of the left upper extremity (claimed as loss of use of upper extremities DC 5109) currently evaluated as 40 percent disabling.**

The evaluation of bradykinesia, tremors, and muscle rigidity of the left upper extremity (claimed as loss of use of upper extremities DC 5109) is continued as 40 percent disabling.

We reviewed the evidence received and determined your service-connected condition(s) hasn't/haven't increased in severity sufficiently to warrant a higher evaluation.

Your VA examination conducted May 2, 2024, annotated severe left upper extremity due to your Parkinson's disease with the ability to feed yourself finger foods but unable to utilize a utensil, with severely limited motor skills and grip strength. Your examination annotated decreased muscle strength with muscle atrophy. Therefore, we have continued the evaluation for your left upper extremity as severe incomplete paralysis.

We have assigned a 40 percent evaluation for your bradykinesia, tremors, and muscle rigidity of the left upper extremity based on:

- Severe incomplete paralysis of the minor extremity (38 CFR 4.124a)

A higher evaluation of 60 percent is not warranted for paralysis of the musculospiral nerve (radial nerve) unless the evidence shows:

- Nerve damage is complete. (38 CFR 4.120, 38 CFR 4.124a)

#### **4. Entitlement to special monthly compensation based on aid and attendance.**

Entitlement to an additional payment of compensation is established when service-connected impairment imposes a special level of disability. The current level of entitlement to special monthly compensation is confirmed and continued based on the evidence reviewed. (38 CFR 3.350)

The routine activities of daily living are basic self-care tasks which include such things as the ability to dress or undress one's self, to keep one's self ordinarily clean and presentable, to feed one's self, to attend to the needs of nature, or to protect one's self from the hazards or dangers incident to his or her daily environment.

The evidence of record shows that you are in need of assistance in performing routine activities of daily life. Medical records show that you have been diagnosed with Parkinson's disease. You require the assistance of another person in order to feed yourself, bathe and tend to hygiene needs, dress, take medication, and attend to the needs of nature.

You are currently receiving special monthly compensation L and do not meet the criteria for special monthly compensation at the next higher level because you do not show:

anatomical L/LOU of both hands  
anatomical L/LOU of both legs at a level, or with complications, preventing natural knee action with prostheses in place  
anatomical L/LOU of one arm and one leg preventing natural elbow and knee action with prostheses in place, due to the level of involvement or with complications

blindness in both eyes having LPO, or  
blindness in both eyes leaving the Veteran so significantly disabled as to be in need of regular  
A&A.

Based on those finding entitlement to aid and attendance was established with an effective date  
of October 6, 2021, your VA examination conducted May 2, 2024, confirmed the continued need  
for aid and attendance. (38 CFR 3.351, 38 CFR 3.352)

**REFERENCES:**

Title 38 of the Code of Federal Regulations, Pensions, Bonuses and Veterans' Relief contains the  
regulations of the Department of Veterans Affairs which govern entitlement to all Veteran  
benefits. For additional information regarding applicable laws and regulations, please consult  
your local library, or visit us at our website, [www.va.gov](http://www.va.gov).