

AGENT ORANGE



Locations and Timeframes associated with Herbicide Exposure	
Location	Dates
Vietnam in-country	January 9, 1962, to May 7, 1975
C-123 Aircraft	There is a presumption of herbicide exposure associated with certain C-123 aircraft activities, but these claims generally fall under the jurisdiction of the St. Paul RO as discussed in M21-1, Part VIII, Subpart i, 1.A.2
Blue Water Navy	January 9, 1962, to May 7, 1975
Korean DMZ	September 1, 1967, to August 31, 1971
* Thailand at any United States or Royal Thai base, without regard to where on the base the Veteran was located or what military occupational specialty (MOS) the Veteran performed	January 9, 1962, to June 30, 1976
* Laos	December 1, 1965, to September 30, 1969
* Cambodia at Mimot or Krek, Kampong Cham Province	April 16, 1969, to April 30, 1969
* Guam or American Samoa, or in the territorial waters thereof	January 9, 1962, to July 31, 1980
* Served on Johnston Atoll or on a ship that called at Johnston Atoll	January 1, 1972, to September 30, 1977

AGENT ORANGE PRESUMPTIVE CONDITIONS

Disability	Effective Date
<ul style="list-style-type: none"> ♦ Chloracne or other acne-form disease consistent with chloracne, and ♦ soft-tissue sarcoma, other than <ul style="list-style-type: none"> • osteosarcoma • chondrosarcoma • Kaposi's sarcoma, or • mesothelioma 	<p>February 6, 1991</p> <p><i>Note: Originally, September 25, 1985, under 38 CFR 3.311a.</i></p>
♦ Non-Hodgkin's lymphoma (NHL)	<p>February 6, 1991</p> <p><i>Note: Originally, August 5, 1964, under 38 CFR 3.313.</i></p>
<ul style="list-style-type: none"> ♦ porphyria cutanea tarda (PCT), and ♦ Hodgkin's disease 	February 3, 1994
<ul style="list-style-type: none"> ♦ Respiratory cancers of the <ul style="list-style-type: none"> • lung • bronchus • larynx, or • trachea, and ♦ multiple myeloma 	June 9, 1994
<ul style="list-style-type: none"> ♦ Prostate cancer, and ♦ acute and subacute peripheral neuropathy 	November 7, 1996
♦ Type 2 diabetes mellitus	May 8, 2001
♦ chronic lymphocytic leukemia (CLL)	October 16, 2003
♦ AL amyloidosis	May 7, 2009
<ul style="list-style-type: none"> ♦ Ischemic heart disease (IHD) ♦ chronic B-cell leukemia, and ♦ Parkinson's disease 	August 31, 2010
♦ Early-onset peripheral neuropathy	September 6, 2013
<ul style="list-style-type: none"> ♦ Parkinsonism ♦ bladder cancer, and ♦ hypothyroidism 	January 1, 2021
<ul style="list-style-type: none"> ♦ * Monoclonal gammopathy of undetermined significance (MGUS) ♦ * Hypertension 	August 10, 2022

Toxic Exposure Risk Activity (TERA) Exception

Job Aid

[38 U.S.C. § 1168\(b\)](#) provides that the examination requirements for TERA-related claims do *not* apply if the Secretary determines there is no indication of an association between the disability claimed by the Veteran and participation in the TERA. At this time, claims processors should *not* order an examination based upon a TERA if one of the following exceptions applies.

Reminder: The TERA threshold, in the same manner as with all claims for service connection, requires lay or other evidence of a current disability before determining whether an examination is necessary. See M21-1.IV.i.1.A.1.b.

1. **Non-presumptive claims based on physical trauma.** The Veteran claims service connection for a non-presumptive disability that is based on physical trauma (e.g., blunt force trauma, trauma due to repetitive use, penetrating trauma). **Note:** Hearing loss is *not* considered a physical trauma under this exception.

Conditions determined to result from physical trauma include but are not limited to the following:

- | | | |
|--|--------------------------------------|------------------------------------|
| • Fracture of any bone or joint | • Spinal fusion | • Metatarsalgia |
| • Any muscle or ligament tear, sprain, or strain | • Spinal stenosis | • Pes planus |
| • Meniscal tear | • Spondylolisthesis | • Plantar fasciitis |
| • Dislocation of any joint | • Degenerative disc disease | • Traumatic brain injury |
| • Osteoarthritis or traumatic arthritis of any joint | • Cold, electrical, or thermal burns | • Heterotopic ossification |
| | • Osteitis deformans | • Lower extremity bones shortening |

Important: If the claim is for a joint condition and the evidence is unclear as to whether the joint condition is related to physical trauma, claims processors should assume the "joint condition" is related to physical trauma UNLESS there is competent medical or scientific evidence of record to the contrary. The Veteran does not need to state the claimed joint condition is due to physical trauma in order for VA to apply the TERA exclusion.

Note: If the claim for joint or muscle pain is from a Veteran who served in a 38 U.S.C. 1117 location, review the claim for evidence of trauma to the joint and either

- apply the TERA exception if trauma to the joint is shown, or
- apply the hybrid undiagnosed illness and MUCMI/TERA procedures outlined in the PACT SOP content titled *Undiagnosed Illness and MUCMI Development Requirements* if the claim of joint pain is potentially a sign or symptom of an undiagnosed illness or MUCMI.

Reference: For more information on when an undiagnosed illness or MUCMI examination is not warranted for joint trauma, see M21-1, Part VIII, Subpart ii, 1.B.2.k

2. **Mental disorders.** This includes any condition contained in [38 C.F.R. § 4.130](#), the mental disorders section of the VA Schedule for Rating Disabilities. **Note:** Toxic exposure can result in symptoms of neurobehavioral decline, like decreased memory and concentration. A diagnosis of a mental disorder should be considered on a direct or secondary basis.

Important: Unless there is competent medical or scientific evidence of record that the mental health condition is related to a TERA, an examination and TERA medical opinion is not needed. VA is to apply the TERA exclusion.

3. **Conditions determined to have no positive association with herbicide exposure.** These are conditions determined by the Secretary based on cumulative scientific data reported by the National Academies of Science since 1993 and are as follows:

Malignant conditions (cancers):

- Melanoma
- Nonmelanoma skin cancer (basal cell and squamous cell)
- Hepatobiliary cancers (liver, gallbladder, and bile ducts), and pancreatic cancer
- Cancers of the pleura, mediastinum, and other unspecified sites within the respiratory system and infrathoracic organs
- Bone and connective tissue cancer
- Endocrine cancers (including thyroid and thymus)
- Cancers of the reproductive organs (cervix, uterus, ovary, testes, and penis; excluding prostate)
- Cancers of the digestive organs (esophageal cancer; stomach cancer; colorectal cancer (including small intestine and anus))
- Renal cancer (kidney and renal pelvis)
- Cancers of the brain and nervous system (including eye)
- Leukemia (other than all chronic B-cell leukemias including chronic lymphocytic leukemia and hairy cell leukemia)
- Cancers of the oral cavity (including lips and tongue), pharynx (including tonsils), and nasal cavity (including ears and sinuses)

Compensation Service
Last Updated: February 13, 2023

VA



U.S. Department
of Veterans Affairs

Page 1 of 2

Toxic Exposure Risk Activity (TERA) Exception Job Aid

Non-malignant conditions:

- Osteoporosis
- Farmer's lung
- Chronic obstructive pulmonary disease
- Immune system disorders (immune suppression, allergy, and autoimmunity)
- Neurodegenerative diseases (including amyotrophic lateral sclerosis (ALS) but excluding Parkinson's disease and Parkinsonism)
- Asthma
- Hearing loss
- Neurobehavioral disorders (cognitive and neuropsychiatric)
- Circulatory disorders (other than hypertension, ischemic heart disease, and stroke)
- Endometriosis
- Diseases of the eye
- Gastrointestinal, metabolic, and digestive disorders
- Chronic peripheral nervous system disorders (other than early-onset peripheral neuropathy)

Note: The malignant and non-malignant conditions under this exception (Exception 3) *only* apply to herbicide exposure. Claims processors must still consider all evidence as there may be a record of a different TERA (other than herbicides).

Important: Claims processors should not order a disability examination based upon a TERA if the Veteran claims service connection for a non-presumptive disability based on **Exceptions 1–3** (i.e., physical trauma, mental disorder, or conditions determined to have no positive association with herbicide exposure) *unless* the Veteran submits competent medical or scientific evidence of an association between their disability and the in-service TERA.

GULF WAR ILLNESSES - LOCATIONS

A *Persian Gulf Veteran*, under [38 U.S.C. 1117](#), is a Veteran who served on active duty in the Armed Forces during the Persian Gulf War in one of the following locations:

- the **Southwest Asia** theater of operations, which includes the following locations and the airspace above them:
 - Iraq
 - Kuwait
 - Saudi Arabia
 - the neutral zone between Iraq and Saudi Arabia
 - United Arab Emirates
 - Bahrain
 - Qatar
 - Oman
 - the Gulf of Aden
 - the Gulf of Oman
 - the Persian Gulf
 - the Arabian Sea, and
 - the Red Sea
- Afghanistan
- Israel
- Egypt
- Turkey
- Syria, or
- Jordan.

Note: Per [38 U.S.C. 101\(33\)](#), the Gulf War period extends from August 2, 1990, through a date yet to be determined by law or Presidential proclamation.

GULF WAR ILLNESSES & MUCMI

- An ***undiagnosed illness*** is a type of chronic qualifying disability where qualifying signs and/or symptoms cannot be attributed to any known clinical diagnosis by history, physical examination and laboratory tests.

A ***medically unexplained chronic multi-symptom illness*** (MUCMI) is a type of chronic qualifying disability in which there is a *diagnosed* illness that has

- either an inconclusive etiology or an inconclusive pathophysiology
- overlapping symptoms and signs, and
- features such as
 - fatigue and pain
 - disability out of proportion to physical findings, and
 - inconsistent demonstration of laboratory abnormalities.

Note: A multi-symptom illness is *not* an MUCMI if *both* the etiology and the pathology of the illness are partly understood.

MUCMIs include but are not limited to

- chronic fatigue syndrome
- fibromyalgia, or
- FGIDs, excluding structural gastrointestinal diseases.

GULF WAR ILLNESSES

Functional gastrointestinal disorders (FGIDs) are a group of diagnosed conditions that are a type of MUCMI. They are characterized by chronic or recurrent symptoms that are

- unexplained by any structural, endoscopic, laboratory, or other objective signs of injury or disease, and
- may be related to any part of the gastrointestinal tract.

Characteristic FGID symptoms include

- abdominal pain
- substernal burning or pain
- nausea
- vomiting
- altered bowel habits (including diarrhea, constipation),
- indigestion
- bloating
- postprandial fullness, and
- painful or difficult swallowing.

FGID diagnoses include but are not limited to

- irritable bowel syndrome, and
- functional
 - dyspepsia
 - vomiting
 - constipation
 - bloating
 - abdominal pain syndrome, or
 - dysphagia.

Diagnosis of a FGID under generally accepted medical principles normally requires

- symptom onset at least six months prior to diagnosis, and
- the presence of symptoms sufficient to diagnose the specific disorder at least three months prior to diagnosis.

Important: FGIDs do not include structural gastrointestinal diseases, such as inflammatory bowel disease (such as ulcerative colitis or Crohn's disease) and gastroesophageal reflux disease, as these conditions are considered to be organic or structural diseases characterized by abnormalities seen on x-ray, endoscopy, or through laboratory tests.

GULF WAR ILLNESSES – SIGNS/SYMPTOMS

[38 CFR 3.317](#) specifies the following 13 categories of signs or symptoms that may be manifestations of an undiagnosed illness or an MUCMI:

- joint pain
- muscle pain
- neurological signs or symptoms
- headache
- neuropsychological signs or symptoms
- gastrointestinal signs or symptoms
- abnormal weight loss
- fatigue
- sleep disturbances
- respiratory signs and symptoms (upper and lower)
- cardiovascular signs or symptoms
- skin signs and symptoms, and
- menstrual disorders.

THE SERGEANT FIRST CLASS (SFC) HEATH ROBINSON HONORING OUR PROMISE TO ADDRESS COMPREHENSIVE TOXICS AKA PACT ACT

- The PACT Act is a law that expands VA health care and benefits for Veterans exposed to burn pits, Agent Orange, and other toxic substances. This law helps us provide generations of Veterans—and their survivors—with the care and benefits they’ve earned and deserve.

On or after September 11, 2001, in any of these locations:

- Afghanistan
- Djibouti
- Egypt
- Jordan
- Lebanon
- Syria
- Uzbekistan
- Yemen
- The airspace above any of these locations

On or after August 2, 1990, in any of these locations:

- Bahrain
- Iraq
- Kuwait
- Oman
- Qatar
- Saudi Arabia
- Somalia
- The United Arab Emirates (UAE)
- The airspace above any of these locations

NEW PRESUMPTIVE CONDITIONS

- Brain cancer
- Gastrointestinal cancer of any type
- Glioblastoma
- Head cancer of any type
- Kidney cancer
- Lymphoma of any type
- Melanoma
- Neck cancer of any type
- Pancreatic cancer
- Reproductive cancer of any type
- Respiratory (breathing-related) cancer of any type
- Asthma that was diagnosed after service
- Chronic bronchitis
- Chronic obstructive pulmonary disease (COPD)
- Chronic rhinitis
- Chronic sinusitis
- Constrictive bronchiolitis or obliterative bronchiolitis
- Emphysema
- Granulomatous disease
- Interstitial lung disease (ILD)
- Pleuritis
- Pulmonary fibrosis
- Sarcoidosis

TOXIC EXPOSURE RISK ACTIVITY (TERA)

- The PACT Act defines toxic exposure risk activity (TERA) as any activity that requires a corresponding entry in an exposure tracking record system, such as ILER (as defined in § 1119(c)); or the Secretary determines qualifies for purposes of this subsection when taking into account what is reasonably prudent to protect the health of Veterans.
- The definition of TERA is important for the implementation of the modified threshold examination requirements as discussed in content titled, Modified Examination Threshold for TERA Claims. The statutory definition is extremely broad and requires claims processors to consider all evidence of record when determining if a Veteran was subject to a TERA and regardless of whether the Veteran specifically claims an exposure(s) as the basis of their claim. · There is no requirement.