



Rating Traumatic Brain Injury (TBI) with Mental Disorders

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Choose VA

Objectives

- Upon completion of this lesson and given available references, the trainee will be able to prepare a rating decision targeting TBI.



References

- 38 CFR 3.114 - Change of law or Department of Veterans Affairs issue.
- 38 CFR 3.304 - Direct service connection; wartime and peacetime
- 38 CFR 4.7 - Higher of two evaluations
- 38 CFR 4.124a - Schedule of ratings – neurological conditions and convulsive disorders
- 38 CFR 4.130 - Schedule of ratings – mental disorder

References

- M21-1, Part III, Subpart iv, Chapter 3, Section D - Examination Reports
- M21-1, Part III, Subpart iv, Chapter 4, Section G - Neurological Conditions and Convulsive Disorders
- M21-1, Part III, Subpart iv, Chapter 4, Section H - Mental Disorders
- M21-1, Part III, Subpart iv, Chapter 6, Section C - Completing the Rating Decision Narrative
- M21-1, Part III, Subpart iv, Chapter 6, Section D - Codesheet Section
- M21-1, Part IV, Subpart ii, Chapter 2, Section H - Special Monthly Compensation (SMC)
- M21-1, Part IV, Subpart ii, Chapter 2, Section I - History of SMC



Traumatic Brain Injury (TBI)

- Has been called the “signature wound” of the conflicts in Iraq and Afghanistan
- Often occurs as the result of an Improvised Explosive Device (IED)
- High public profile of this issue
- Complex issue that leads to errors



Topics for Discussion

- Define TBI
- Evaluate TBI
- Recognize common complications of TBI
- Avoid pyramiding residuals of TBI
- Secondary conditions associated with TBI
- Long Form Rating Narrative

Definition of TBI

- The term traumatic brain injury (TBI) means the physical, cognitive and/or behavioral/emotional residual disability resulting from an event of external force causing an injury to the brain.

TBI Residuals

- Three categories of dysfunction that may result from TBI
 1. Cognitive
 2. Emotional and behavioral
 3. Physical

Cognitive Residuals

- Defined as decreased memory, concentration, attention and executive functions of the brain
- Executive functions: goal setting, processing information, organizing, problem solving and flexibility
- Examples of TBI cognitive residuals:
 - Dementias (pre-senile Alzheimer's type, dementia pugilistica, post traumatic dementia)
 - Attention & concentration deficits
 - Memory, processing and learning impairment
 - Language deficiencies
 - Planning difficulties
 - Judgement and control difficulties
 - Reasoning and abstract thinking limitations
 - Self-awareness limitations



Emotional and Behavioral Residuals

- Diagnosed mental disorder due to TBI or separate from TBI (PTSD): rate under 4.130 for the specific mental disorder
- No diagnosis of mental condition with only symptoms due to TBI (anxiety, depression) rate under 8045
- TBI behavioral/emotional residuals:
 - Depression
 - Agitation and irritability
 - Impulsivity
 - Aggression
 - Anxiety
 - Posttraumatic stress disorder



Physical Residuals

- Motor and Sensory Impairment
- Visual-Spatial Orientation: rated on ability to follow directions and recognize self and surroundings
- TBI physical residuals:
 - Apraxia (inability to execute purposeful, previously learned motor tasks, despite physical ability and willingness)
 - Aphasia (difficulty communicating orally and/or in writing)
 - Paresis (muscle weakness or incomplete paralysis)
 - Plegia (paralysis or stroke)
 - Dysphagia (difficulty swallowing)
 - Disorders of balance and coordination
 - Diseases of hormone deficiency
 - Parkinsonism
 - Nausea/vomiting
 - Headaches
 - Dizziness
 - Blurred vision
 - Seizure disorder
 - Sensory loss
 - Weakness
 - Sleep disturbance



Residuals of TBI

- Residual with distinct diagnosis: rate separately (i.e. migraines)
- If symptoms overlap, rating is based on the condition that provides the highest evaluation
- A 10% maximum evaluation for subjective symptoms only no longer applies for 38 CFR 4.124a, DC 8045



Multiple Evaluations and Pyramiding in TBI Cases

- In addition to the evaluation for TBI manifestations under the table “Evaluation of Cognitive Impairment and Other Residuals of Residuals of TBI Not Otherwise Classified” in DC 8045 (and also incorporated into VBMS-R), manifestations of a comorbid mental, neurologic or other physical disorder can be separately evaluated under another DC if there is a distinct diagnosis – even if based on subjective symptoms – and no more than one evaluation is based on the same manifestation(s).
- Consider assigning separate evaluations for migraines, tinnitus, mental disorders, etc. **as long as the manifestations do not overlap** with those used to assign the evaluation of TBI under DC 8045
- Evaluate occasional, subjective headaches and subjective feelings of anxiety as part of the TBI evaluation.
- Do not evaluate vertigo separately when evaluating TBI. Vertigo is a subjective symptom that is already considered in the facets of the TBI criteria. However, if vertigo has already been awarded a separate compensable evaluation, do not change or correct the evaluation.
- Remember that TBI is an issue that requires a long form rating narrative.



TBI Evaluation Facets

1. Executive Functions; memory, attention, and concentration
 2. Judgment
 3. Social Interaction
 4. Orientation
 5. Motor Activity
 6. Visual-Spatial Orientation
 7. Subjective Symptoms
 8. Neurobehavioral Effects
 9. Communication
 10. Consciousness
- Evaluation is based on the most disabling facet

TBI DBQ and Evaluation Builder

Memory, Attention, Concentration, Executive Functions Facet

1. Memory, attention, concentration, executive functions

- No complaints of impairment of memory, attention, concentration, or executive functions
- A complaint of mild memory loss (such as having difficulty following a conversation, recalling recent conversations, remembering names of new acquaintances, or finding words, or often misplacing items), attention, concentration, or executive functions, but without objective evidence on testing
- Objective evidence on testing of mild impairment of memory, attention, concentration, or executive functions resulting in mild functional impairment
- Objective evidence on testing of moderate impairment of memory, attention, concentration, or executive functions resulting in moderate functional impairment
- Objective evidence on testing of severe impairment of memory, attention, concentration, or executive functions resulting in severe functional impairment

Memory, Attention, Concentration, Executive Functions Facet

Facet cannot be used to support evaluation

Please select one of the following:

- 0-No complaints of impairment of memory, attention, concentration, or executive functions
- 1-A complaint of mild loss of memory (such as having difficulty following a conversation, recalling recent conversations, remembering names of new acquaintances, or finding words, or often misplacing items), attention, concentration, or executive functions, but without objective evidence on testing
- 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
- None of the Above



Judgment Facet

2. Judgment

- Normal
- 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
- 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
- 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
- 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.

Judgment Facet

Facet cannot be used to support evaluation

Please select one of the following:

- 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.
- None of the Above



Social Interaction Facet

3. Social interaction

- Social interaction is routinely appropriate
- Social interaction is occasionally inappropriate
- Social interaction is frequently inappropriate
- Social interaction is inappropriate most or all of the time

Social Interaction

Facet cannot be used to support evaluation

Please select one of the following:

- 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.
- None of the Above



Orientation Facet

4. Orientation

- Always oriented to person, time, place, and situation
- Occasionally disoriented to one of the four aspects (person, time, place, situation) of orientation
- Occasionally disoriented to two of the four aspects (person, time, place, situation) of orientation or often disoriented to one aspect of orientation
- Often disoriented to two or more of the four aspects (person, time, place, situation) of orientation
- Consistently disoriented to two or more of the four aspects (person, time, place, situation) of orientation

Orientation Facet

Facet cannot be used to support evaluation

Please select one of the following:

- 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.
- None of the Above



Motor Activity Facet

5. Motor activity (with intact motor and sensory system)

- Motor activity normal
- Motor activity is normal most of the time, but mildly slowed at times due to apraxia (inability to perform previously learned motor activities, despite normal motor function)
- Motor activity is mildly decreased or with moderate slowing due to apraxia
- Motor activity moderately decreased due to apraxia
- Motor activity severely decreased due to apraxia

Motor Activity (with intact motor and sensory system)

Facet cannot be used to support evaluation

Please select one of the following:

- 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.
- None of the Above



Visual Spatial Orientation Facet

6. Visual spatial orientation

- Normal
- 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)
- 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)
- Moderately severely impaired: Gets lost even in familiar surroundings, unable to use assistive devices such as GPS (global positioning system)
- 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

Visual Spatial Orientation

Facet cannot be used to support evaluation

Please select one of the following:

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.

None of the Above



Subjective Symptoms Facet

7. Subjective symptoms

- No subjective symptoms
- 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
- 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
- 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

Subjective Symptoms

Facet cannot be used to support evaluation

Please select one of the following:

- 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.
- None of the Above



Neurobehavioral Effects Facet

8. Neurobehavioral effects

NOTE: Examples of neurobehavioral effects of TBI include: 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 serious impact on workplace interaction and social interaction than some of the other effects.

- No neurobehavioral effects
- One or more neurobehavioral effects that do not interfere with workplace interaction or social interaction.
- One or more neurobehavioral effects that occasionally interfere with workplace interaction, social interaction, or both but do not preclude them
- One or more neurobehavioral effects that frequently interfere with workplace interaction, social interaction, or both but do not preclude them
- 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

Neurobehavioral Effects

Facet cannot be used to support evaluation

Please select one of the following:

- 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.
- None of the Above



Communication Facet

9. Communication

- Able to communicate by spoken and written language (expressive communication) and to comprehend spoken and written language
- Comprehension or expression, or both, of either spoken language or written language is only occasionally impaired. Can communicate complex ideas
- 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
- 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
- Complete inability to communicate either by spoken language, written language, or both, or comprehend spoken language, written language, or both. Unable to communicate basic needs

Communication

Facet cannot be used to support evaluation

Please select one of the following:

- 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.
- None of the Above



Consciousness Facet

10. Consciousness

- Normal
- Persistent altered state of consciousness, such as vegetative state, minimally responsive state, coma

Consciousness

Facet cannot be used to support evaluation

Please select one of the following:

Total-Persistently altered state of consciousness, such as vegetative state, minimally responsive state, coma.

None of the Above

Scenario (1)

- A Veteran suffers a TBI while serving with the Army in Afghanistan, and submits an original claim for service connection. The Veteran has a TBI DBQ that indicates a diagnosis of TBI, with the highest facet indicated as a 2 for neurobehavioral effects. The Veteran also has subjective complaints of anxiety, but no diagnosis. The Veteran has separate diagnoses of tinnitus and migraine headaches (with characteristic prostrating attacks averaging one in 2 months over the last several months).
- How would you combine (or separate) these conditions?



Scenario (1) Answer

- Rate the TBI under DC 8045 with an evaluation of 40%. The TBI evaluation includes the subjective complaints of anxiety.
- Rate the tinnitus separate under DC 6260 with an evaluation of 10%.
- Rate the migraine headaches separate under DC 8100 with an evaluation of 10%.

Questions/Rating Example