

## Department of Veterans Affairs

## § 4.114

### THE DIGESTIVE SYSTEM

#### § 4.110 Ulcers.

Experience has shown that the term “peptic ulcer” is not sufficiently specific for rating purposes. Manifest differences in ulcers of the stomach or duodenum in comparison with those at an anastomotic stoma are sufficiently recognized as to warrant two separate graduated descriptions. In evaluating the ulcer, care should be taken that the findings adequately identify the particular location.

#### § 4.111 Postgastrectomy syndromes.

There are various postgastrectomy symptoms which may occur following anastomotic operations of the stomach. When present, those occurring during or immediately after eating and known as the “dumping syndrome” are characterized by gastrointestinal complaints and generalized symptoms simulating hypoglycemia; those occurring from 1 to 3 hours after eating usually present definite manifestations of hypoglycemia.

#### § 4.112 Weight loss.

For purposes of evaluating conditions in § 4.114, the term “substantial weight loss” means a loss of greater than 20 percent of the individual’s baseline weight, sustained for three months or longer; and the term “minor weight loss” means a weight loss of 10 to 20 percent of the individual’s baseline weight, sustained for three months or longer. The term “inability to gain weight” means that there has been substantial weight loss with inability to regain it despite appropriate therapy. “Baseline weight” means the average weight for the two-year-period preceding onset of the disease.

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

[66 FR 29488, May 31, 2001]

#### § 4.113 Coexisting abdominal conditions.

There are diseases of the digestive system, particularly within the abdomen, which, while differing in the site of pathology, produce a common disability picture characterized in the main by varying degrees of abdominal distress or pain, anemia and disturb-

ances in nutrition. Consequently, certain coexisting diseases in this area, as indicated in the instruction under the title “Diseases of the Digestive System,” do not lend themselves to distinct and separate disability evaluations without violating the fundamental principle relating to pyramiding as outlined in § 4.14.

#### § 4.114 Schedule of ratings—digestive system.

Ratings under diagnostic codes 7301 to 7329, inclusive, 7331, 7342, and 7345 to 7348 inclusive will not be combined with each other. A single evaluation will be assigned under the diagnostic code which reflects the predominant disability picture, with elevation to the next higher evaluation where the severity of the overall disability warrants such elevation.

	Rating
7200 Mouth, injuries of. Rate as for disfigurement and impairment of function of mastication.	
7201 Lips, injuries of. Rate as for disfigurement of face.	
7202 Tongue, loss of whole or part: With inability to communicate by speech .....	100
One-half or more .....	60
With marked speech impairment .....	30
7203 Esophagus, stricture of: Permitting passage of liquids only, with marked impairment of general health .....	80
Severe, permitting liquids only .....	50
Moderate .....	30
7204 Esophagus, spasm of (cardiospasm). If not amenable to dilation, rate as for the degree of obstruction (stricture).	
7205 Esophagus, diverticulum of, acquired. Rate as for obstruction (stricture).	
7301 Peritoneum, adhesions of: Severe; definite partial obstruction shown by X-ray, with frequent and prolonged episodes of severe colic distension, nausea or vomiting, following severe peritonitis, ruptured appendix, perforated ulcer, or operation with drainage ....	50
Moderately severe; partial obstruction manifested by delayed motility of barium meal and less frequent and less prolonged episodes of pain .....	30
Mild .....	10
NOTE: Ratings for adhesions will be considered when there is history of operative or other traumatic or infectious (intraabdominal) process, and at least two of the following: disturbance of motility, actual partial obstruction, reflex disturbances, presence of pain.	0
7304 Ulcer, gastric.	
7305 Ulcer, duodenal:	

	Rat- ing		Rat- ing
Severe; pain only partially relieved by standard ulcer therapy, periodic vomiting, recurrent hematemesis or melena, with manifestations of anemia and weight loss productive of definite impairment of health .....	60	Generalized weakness, substantial weight loss, and persistent jaundice, or; with one of the following refractory to treatment: ascites, hepatic encephalopathy, hemorrhage from varices or portal gastropathy (erosive gastritis) .....	100
Moderately severe; less than severe but with impairment of health manifested by anemia and weight loss; or recurrent incapacitating episodes averaging 10 days or more in duration at least four or more times a year .....	40	History of two or more episodes of ascites, hepatic encephalopathy, or hemorrhage from varices or portal gastropathy (erosive gastritis), but with periods of remission between attacks .....	70
Moderate; recurring episodes of severe symptoms two or three times a year averaging 10 days in duration; or with continuous moderate manifestations .....	20	History of one episode of ascites, hepatic encephalopathy, or hemorrhage from varices or portal gastropathy (erosive gastritis) .....	50
Mild; with recurring symptoms once or twice yearly .....	10	Portal hypertension and splenomegaly, with weakness, anorexia, abdominal pain, malaise, and at least minor weight loss .....	30
7306 Ulcer, marginal (gastrojejunal):		Symptoms such as weakness, anorexia, abdominal pain, and malaise .....	10
Pronounced; periodic or continuous pain unrelieved by standard ulcer therapy with periodic vomiting, recurring melena or hematemesis, and weight loss. Totally incapacitating .....	100	NOTE: For evaluation under diagnostic code 7312, documentation of cirrhosis (by biopsy or imaging) and abnormal liver function tests must be present.	
Severe; same as pronounced with less pronounced and less continuous symptoms with definite impairment of health .....	60	7314 Cholecystitis, chronic:	
Moderately severe; intercurrent episodes of abdominal pain at least once a month partially or completely relieved by ulcer therapy, mild and transient episodes of vomiting or melena .....	40	Severe; frequent attacks of gall bladder colic .....	30
Moderate; with episodes of recurring symptoms several times a year .....	20	Moderate; gall bladder dyspepsia, confirmed by X-ray technique, and with infrequent attacks (not over two or three a year) of gall bladder colic, with or without jaundice .....	10
Mild; with brief episodes of recurring symptoms once or twice yearly .....	10	Mild .....	0
7307 Gastritis, hypertrophic (identified by gastroscop):		7315 Cholelithiasis, chronic.	
Chronic; with severe hemorrhages, or large ulcerated or eroded areas .....	60	Rate as for chronic cholecystitis.	
Chronic; with multiple small eroded or ulcerated areas, and symptoms .....	30	7316 Cholangitis, chronic.	
Chronic; with small nodular lesions, and symptoms .....	10	Rate as for chronic cholecystitis.	
Gastritis, atrophic.		7317 Gall bladder, injury of.	
A complication of a number of diseases, including pernicious anemia.		Rate as for peritoneal adhesions.	
Rate the underlying condition.		7318 Gall bladder, removal of:	
7308 Postgastrectomy syndromes:		With severe symptoms .....	30
Severe; associated with nausea, sweating, circulatory disturbance after meals, diarrhea, hypoglycemic symptoms, and weight loss with malnutrition and anemia .....	60	With mild symptoms .....	10
Moderate; less frequent episodes of epigastric disorders with characteristic mild circulatory symptoms after meals but with diarrhea and weight loss .....	40	Nonsymptomatic .....	0
Mild; infrequent episodes of epigastric distress with characteristic mild circulatory symptoms or continuous mild manifestations .....	20	Spleen, disease or injury of.	
7309 Stomach, stenosis of.		See Hemic and Lymphatic Systems.	
Rate as for gastric ulcer.		7319 Irritable colon syndrome (spastic colitis, mucous colitis, etc.):	
7310 Stomach, injury of, residuals.		Severe; diarrhea, or alternating diarrhea and constipation, with more or less constant abdominal distress .....	30
Rate as peritoneal adhesions.		Moderate; frequent episodes of bowel disturbance with abdominal distress .....	10
7311 Residuals of injury of the liver:		Mild; disturbances of bowel function with occasional episodes of abdominal distress .....	0
Depending on the specific residuals, separately evaluate as adhesions of peritoneum (diagnostic code 7301), cirrhosis of liver (diagnostic code 7312), and chronic liver disease without cirrhosis (diagnostic code 7345).		7321 Amebiasis:	
7312 Cirrhosis of the liver, primary biliary cirrhosis, or cirrhotic phase of sclerosing cholangitis:		Mild gastrointestinal disturbances, lower abdominal cramps, nausea, gaseous distention, chronic constipation interrupted by diarrhea .....	10
		Asymptomatic .....	0
		NOTE: Amebiasis with or without liver abscess is parallel in symptomatology with ulcerative colitis and should be rated on the scale provided for the latter. Similarly, lung abscess due to amebiasis will be rated under the respiratory system schedule, diagnostic code 6809.	
		7322 Dysentery, bacillary.	
		Rate as for ulcerative colitis..	
		7323 Colitis, ulcerative:	
		Pronounced; resulting in marked malnutrition, anemia, and general debility, or with serious complication as liver abscess .....	100
		Severe; with numerous attacks a year and malnutrition, the health only fair during remissions .....	60
		Moderately severe; with frequent exacerbations .....	30
		Moderate; with infrequent exacerbations .....	10
		7324 Distomiasis, intestinal or hepatic:	
		Severe symptoms .....	30

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	Rat- ing		Rat- ing
Moderate symptoms .....	10	Large, postoperative, recurrent, not well supported under ordinary conditions and not readily reducible, when considered inoperable .....	60
Mild or no symptoms .....	0	Small, postoperative recurrent, or unoperated irreducible, not well supported by truss, or not readily reducible .....	30
7325 Enteritis, chronic.		Postoperative recurrent, readily reducible and well supported by truss or belt .....	10
Rate as for irritable colon syndrome.		Not operated, but remediable .....	0
7326 Enterocolitis, chronic.		Small, reducible, or without true hernia protrusion .....	0
Rate as for irritable colon syndrome.		NOTE: Add 10 percent for bilateral involvement, provided the second hernia is compensable. This means that the more severely disabling hernia is to be evaluated, and 10 percent, only, added for the second hernia, if the latter is of compensable degree.	
7327 Diverticulitis.		7339 Hernia, ventral, postoperative:	
Rate as for irritable colon syndrome, peritoneal adhesions, or colitis, ulcerative, depending upon the predominant disability picture.		Massive, persistent, severe diastasis of recti muscles or extensive diffuse destruction or weakening of muscular and fascial support of abdominal wall so as to be inoperable .....	100
7328 Intestine, small, resection of:		Large, not well supported by belt under ordinary conditions .....	40
With marked interference with absorption and nutrition, manifested by severe impairment of health objectively supported by examination findings including material weight loss .....	60	Small, not well supported by belt under ordinary conditions, or healed ventral hernia or post-operative wounds with weakening of abdominal wall and indication for a supporting belt .....	20
With definite interference with absorption and nutrition, manifested by impairment of health objectively supported by examination findings including definite weight loss .....	40	Wounds, postoperative, healed, no disability, belt not indicated .....	0
Symptomatic with diarrhea, anemia and inability to gain weight .....	20	7340 Hernia, femoral.	
NOTE: Where residual adhesions constitute the predominant disability, rate under diagnostic code 7301.		Rate as for inguinal hernia.	
7329 Intestine, large, resection of:		7342 Visceroperosis, symptomatic, marked .....	10
With severe symptoms, objectively supported by examination findings .....	40	7343 Malignant neoplasms of the digestive system, exclusive of skin growths .....	100
With moderate symptoms .....	20	NOTE: A rating of 100 percent shall continue beyond the cessation of any surgical, X-ray, antineoplastic chemotherapy or other therapeutic procedure. Six months after discontinuance of such treatment, the appropriate disability rating shall be determined by mandatory VA examination. Any change in evaluation based upon that or any subsequent examination shall be subject to the provisions of §3.105(e) of this chapter. If there has been no local recurrence or metastasis, rate on residuals.	
With slight symptoms .....	10	7344 Benign neoplasms, exclusive of skin growths:	
NOTE: Where residual adhesions constitute the predominant disability, rate under diagnostic code 7301.		Evaluate under an appropriate diagnostic code, depending on the predominant disability or the specific residuals after treatment.	
7330 Intestine, fistula of, persistent, or after attempt at operative closure:		7345 Chronic liver disease without cirrhosis (including hepatitis B, chronic active hepatitis, autoimmune hepatitis, hemochromatosis, drug-induced hepatitis, etc., but excluding bile duct disorders and hepatitis C):	
Copious and frequent, fecal discharge .....	100	Near-constant debilitating symptoms (such as fatigue, malaise, nausea, vomiting, anorexia, arthralgia, and right upper quadrant pain) .....	100
Constant or frequent, fecal discharge .....	60	Daily fatigue, malaise, and anorexia, with substantial weight loss (or other indication of malnutrition), and hepatomegaly, or; incapacitating episodes (with symptoms such as fatigue, malaise, nausea, vomiting, anorexia, arthralgia, and right upper quadrant pain) having a total duration of at least six weeks during the past 12-month period, but not occurring constantly .....	60
Slight infrequent, fecal discharge .....	30		
Healed; rate for peritoneal adhesions.			
7331 Peritonitis, tuberculous, active or inactive:			
Active .....	100		
Inactive: See §§4.88b and 4.89.			
7332 Rectum and anus, impairment of sphincter control:			
Complete loss of sphincter control .....	100		
Extensive leakage and fairly frequent involuntary bowel movements .....	60		
Occasional involuntary bowel movements, necessitating wearing of pad .....	30		
Constant slight, or occasional moderate leakage .....	10		
Healed or slight, without leakage .....	0		
7333 Rectum and anus, stricture of:			
Requiring colostomy .....	100		
Great reduction of lumen, or extensive leakage ..	50		
Moderate reduction of lumen, or moderate constant leakage .....	30		
7334 Rectum, prolapse of:			
Severe (or complete), persistent .....	50		
Moderate, persistent or frequently recurring .....	30		
Mild with constant slight or occasional moderate leakage .....	10		
7335 Ano, fistula in.			
Rate as for impairment of sphincter control.			
7336 Hemorrhoids, external or internal:			
With persistent bleeding and with secondary anemia, or with fissures .....	20		
Large or thrombotic, irreducible, with excessive redundant tissue, evidencing frequent recurrences .....	10		
Mild or moderate .....	0		
7337 Pruritus ani.			
Rate for the underlying condition.			
7338 Hernia, inguinal:			

	Rat- ing		Rat- ing
Daily fatigue, malaise, and anorexia, with minor weight loss and hepatomegaly, or; incapacitating episodes (with symptoms such as fatigue, malaise, nausea, vomiting, anorexia, arthralgia, and right upper quadrant pain) having a total duration of at least four weeks, but less than six weeks, during the past 12-month period .....	40	Followed by demonstrably confirmative post-operative complications of stricture or continuing gastric retention .....	40
Daily fatigue, malaise, and anorexia (without weight loss or hepatomegaly), requiring dietary restriction or continuous medication, or; incapacitating episodes (with symptoms such as fatigue, malaise, nausea, vomiting, anorexia, arthralgia, and right upper quadrant pain) having a total duration of at least two weeks, but less than four weeks, during the past 12-month period .....	20	With symptoms and confirmed diagnosis of alkaline gastritis, or of confirmed persisting diarrhea .....	30
Intermittent fatigue, malaise, and anorexia, or; incapacitating episodes (with symptoms such as fatigue, malaise, nausea, vomiting, anorexia, arthralgia, and right upper quadrant pain) having a total duration of at least one week, but less than two weeks, during the past 12-month period .....	10	Recurrent ulcer with incomplete vagotomy .....	20
Nonsymptomatic .....	0	NOTE: Rate recurrent ulcer following complete vagotomy under diagnostic code 7305, minimum rating 20 percent; and rate dumping syndrome under diagnostic code 7308.	
NOTE (1): Evaluate sequelae, such as cirrhosis or malignancy of the liver, under an appropriate diagnostic code, but do not use the same signs and symptoms as the basis for evaluation under DC 7354 and under a diagnostic code for sequelae. (See § 4.14.)		7351 Liver transplant:	
NOTE (2): For purposes of evaluating conditions under diagnostic code 7345, "incapacitating episode" means a period of acute signs and symptoms severe enough to require bed rest and treatment by a physician.		For an indefinite period from the date of hospital admission for transplant surgery .....	100
NOTE (3): Hepatitis B infection must be confirmed by serologic testing in order to evaluate it under diagnostic code 7345.		Minimum .....	30
7346 Hernia hiatal:		NOTE: A rating of 100 percent shall be assigned as of the date of hospital admission for transplant surgery and shall continue. One year following discharge, the appropriate disability rating shall be determined by mandatory VA examination. Any change in evaluation based upon that or any subsequent examination shall be subject to the provisions of § 3.105(e) of this chapter.	
Symptoms of pain, vomiting, material weight loss and hematemesis or melena with moderate anemia; or other symptom combinations productive of severe impairment of health .....	60	7354 Hepatitis C (or non-A, non-B hepatitis):	
Persistently recurrent epigastric distress with dysphagia, pyrosis, and regurgitation, accompanied by substernal or arm or shoulder pain, productive of considerable impairment of health .....	30	With serologic evidence of hepatitis C infection and the following signs and symptoms due to hepatitis C infection:	
With two or more of the symptoms for the 30 percent evaluation of less severity .....	10	Near-constant debilitating symptoms (such as fatigue, malaise, nausea, vomiting, anorexia, arthralgia, and right upper quadrant pain) .....	100
7347 Pancreatitis:		Daily fatigue, malaise, and anorexia, with substantial weight loss (or other indication of malnutrition), and hepatomegaly, or; incapacitating episodes (with symptoms such as fatigue, malaise, nausea, vomiting, anorexia, arthralgia, and right upper quadrant pain) having a total duration of at least six weeks during the past 12-month period, but not occurring constantly .....	60
With frequently recurrent disabling attacks of abdominal pain with few pain free intermissions and with steatorrhea, malabsorption, diarrhea and severe malnutrition .....	100	Daily fatigue, malaise, and anorexia, with minor weight loss and hepatomegaly, or; incapacitating episodes (with symptoms such as fatigue, malaise, nausea, vomiting, anorexia, arthralgia, and right upper quadrant pain) having a total duration of at least four weeks, but less than six weeks, during the past 12-month period .....	40
With frequent attacks of abdominal pain, loss of normal body weight and other findings showing continuing pancreatic insufficiency between acute attacks .....	60	Daily fatigue, malaise, and anorexia (without weight loss or hepatomegaly), requiring dietary restriction or continuous medication, or; incapacitating episodes (with symptoms such as fatigue, malaise, nausea, vomiting, anorexia, arthralgia, and right upper quadrant pain) having a total duration of at least two weeks, but less than four weeks, during the past 12-month period .....	20
Moderately severe; with at least 4–7 typical attacks of abdominal pain per year with good remission between attacks .....	30	Intermittent fatigue, malaise, and anorexia, or; incapacitating episodes (with symptoms such as fatigue, malaise, nausea, vomiting, anorexia, arthralgia, and right upper quadrant pain) having a total duration of at least one week, but less than two weeks, during the past 12-month period .....	10
With at least one recurring attack of typical severe abdominal pain in the past year .....	10	Nonsymptomatic .....	0
NOTE 1: Abdominal pain in this condition must be confirmed as resulting from pancreatitis by appropriate laboratory and clinical studies.			
NOTE 2: Following total or partial pancreatectomy, rate under above, symptoms, minimum rating 30 percent.			
7348 Vagotomy with pyloroplasty or gastroenterostomy:			

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	Rating
NOTE (1): Evaluate sequelae, such as cirrhosis or malignancy of the liver, under an appropriate diagnostic code, but do not use the same signs and symptoms as the basis for evaluation under DC 7354 and under a diagnostic code for sequelae. (See §4.14.) NOTE (2): For purposes of evaluating conditions under diagnostic code 7354, "incapacitating episode" means a period of acute signs and symptoms severe enough to require bed rest and treatment by a physician.	

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

[29 FR 6718, May 22, 1964, as amended at 34 FR 5063, Mar. 11, 1969; 40 FR 42540, Sept. 15, 1975; 41 FR 11301, Mar. 18, 1976; 66 FR 29488, May 31, 2001]

### THE GENITOURINARY SYSTEM

#### §4.115 Nephritis.

Albuminuria alone is not nephritis, nor will the presence of transient albumin and casts following acute febrile illness be taken as nephritis. The glomerular type of nephritis is usually preceded by or associated with severe infectious disease; the onset is sudden, and the course marked by red blood cells, salt retention, and edema; it may clear up entirely or progress to a chronic condition. The nephrosclerotic type, originating in hypertension or arteriosclerosis, develops slowly, with minimum laboratory findings, and is associated with natural progress. Separate ratings are not to be assigned for disability from disease of the heart and any form of nephritis, on account of the close interrelationships of cardiovascular disabilities. If, however, absence of a kidney is the sole renal disability, even if removal was required because of nephritis, the absent kidney and any hypertension or heart disease will be separately rated. Also, in the event that chronic renal disease has progressed to the point where regular dialysis is required, any coexisting hypertension or heart disease will be separately rated.

[41 FR 34258, Aug. 13, 1976, as amended at 59 FR 2527, Jan. 18, 1994]

#### §4.115a Ratings of the genitourinary system—dysfunctions.

Diseases of the genitourinary system generally result in disabilities related to renal or voiding dysfunctions, infec-

tions, or a combination of these. The following section provides descriptions of various levels of disability in each of these symptom areas. Where diagnostic codes refer the decision maker to these specific areas of dysfunction, only the predominant area of dysfunction shall be considered for rating purposes. Distinct disabilities may be evaluated separately under this section, pursuant to §4.14, if the symptoms do not overlap. Since the areas of dysfunction described below do not cover all symptoms resulting from genitourinary diseases, specific diagnoses may include a description of symptoms assigned to that diagnosis.

	Rating
<b>Renal dysfunction:</b>	
Chronic kidney disease with glomerular filtration rate (GFR) less than 15 mL/min/1.73 m <sup>2</sup> for at least 3 consecutive months during the past 12 months; or requiring regular routine dialysis; or eligible kidney transplant recipient .....	100
Chronic kidney disease with GFR from 15 to 29 mL/min/1.73 m <sup>2</sup> for at least 3 consecutive months during the past 12 months .....	80
Chronic kidney disease with GFR from 30 to 44 mL/min/1.73 m <sup>2</sup> for at least 3 consecutive months during the past 12 months .....	60
Chronic kidney disease with GFR from 45 to 59 mL/min/1.73 m <sup>2</sup> for at least 3 consecutive months during the past 12 months .....	30
GFR from 60 to 89 mL/min/1.73 m <sup>2</sup> and either recurrent red blood cell (RBC) casts, white blood cell (WBC) casts, or granular casts for at least 3 consecutive months during the past 12 months; or	
GFR from 60 to 89 mL/min/1.73 m <sup>2</sup> and structural kidney abnormalities (cystic, obstructive, or glomerular) for at least 3 consecutive months during the past 12 months; or	
GFR from 60 to 89 mL/min/1.73 m <sup>2</sup> and albumin/creatinine ratio (ACR) ≥30 mg/g for at least 3 consecutive months during the past 12 months .....	0
Note: GFR, estimated GFR (eGFR), and creatinine-based approximations of GFR will be accepted for evaluation purposes under this section when determined to be appropriate and calculated by a medical professional.	
<b>Voiding dysfunction:</b>	
Rate particular condition as urine leakage, frequency, or obstructed voiding	
Continual Urine Leakage, Post Surgical Urinary Diversion, Urinary Incontinence, or Stress Incontinence:	
Requiring the use of an appliance or the wearing of absorbent materials which must be changed more than 4 times per day .....	60
Requiring the wearing of absorbent materials which must be changed 2 to 4 times per day ..	40
Requiring the wearing of absorbent materials which must be changed less than 2 times per day .....	20