

### **Independent Medical Group 4 Veterans**

Evidence-Based DBQs and Nexus Opinions www.img4vets.com | contact@img4vets.com

# DBQ Case Study #1: The Right Exam Made All the Difference

## Background:

An Army veteran had been rated at only 10% for chronic knee pain that began after multiple airborne jumps. Despite worsening pain, instability, and limited motion, his rating hadn't changed for nearly a decade. The DBQ originally submitted with his claim listed only general comments like "pain on motion" and lacked specific degree measurements or flare-up impact.

#### What IMG4VETS Did:

Our team performed a full records review and immediately identified that the original DBQ was missing the objective data the VA needs to evaluate severity. We coordinated an in-person orthopedic evaluation with a licensed examiner who followed VA-standard measurement procedures using a goniometer and repetition testing. After the examination, our reviewing physician at IMG4VETS compiled a comprehensive orthopedic DBQ and medical opinion summarizing the new findings and clearly explaining how functional loss during flare-ups affected the veteran's daily life and employment.

#### Outcome:

The new, fully documented DBQ provided the VA with accurate range-of-motion data and medical rationale. On review, the VA increased the veteran's rating from 10% to 40%, specifically citing the updated, properly executed DBQ as the basis for the higher evaluation.

## Takeaway:

The VA relies on objective medical evidence—especially for musculoskeletal claims. A DBQ must be complete, precise, and performed in person when physical measurements are required. IMG4VETS ensures every examination meets that standard and that the resulting documentation clearly supports the true extent of a veteran's service-connected disability.

Prepared by Independent Medical Group 4 Veterans