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FOIA MARKER

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Gays in the Military - Benefits: Coast Guard

Stack:	Row:	Section:	Shelf:	Position:
S	113	3	9	3

9.B.19.c. (3) For adjudicative purposes, it is necessary that the concerned boards and review agencies be provided with conclusions from audiology specialists relative to which of the two methods of testing best depicts the severity of the organic hearing loss.

(4) Most audiometric examinations now being performed use as reference-zero level that one recommended by The American Standards Institute (ANSI), which is essentially identical, for rating purposes, to the International Standards Organization (ISO) levels. The American Standards Association (ASA) reference standards are numerically less than, and may be converted to, the ISO levels, by adding the difference in decibels at each frequency in the normal range of hearing, as follows:

At Frequency (CPS)	500	1000	2000
Convert ASA to ISO by adding	15	10	10

(5) Uniformity in analyzing data obtained in audiometric examination for adjudication and review is essential. Reference standards must be clearly indicated as ANSI, ISO, or ASA. No individual shall be considered for rating unless member has been evaluated by an audiologist.

20. 6300-6350, Systemic Conditions. Convalescent ratings of 6 or 12 months provided under certain of these codes shall not be applied.

a. 6309, Rheumatic Fever. Residual impairments will be rated under the appropriate code. When a member is determined to be unfit due to recurrence of disease, and there is no residual functional impairment, consider using the zero percent rating.

b. 6350, Lupus Erythematosus, Systemic. Collagen diseases will be rated under this code. Sarcoidosis is a variable disease that in analogous to Lupus and this analogy allows residuals or the active disease to be rated, whichever is higher.

c. 6351/6353, Acquired Immunodeficiency Syndrome (AIDS). Acquired Immune Deficiency Syndrome (AIDS) and AIDS Related Complex will be rated on the basis of the underlying disease. Human Immunodeficiency Virus

PDES MANUAL COMDTINST M1850.2B

9.B.20.c. (cont'd) (HIV) antibody positive without manifestation of underlying diseases associated with AIDS or ARC will be rated analogous to Lupus Erythematosus. Any Coast Guard member that tests HIV positive and confirmed by repeat HIV positive and/or Western Blot positive will be found Unfit For Continued Duty regardless of other symptomatology and will enter the disability system via the standard IME. All personnel retired under this section will be placed on the Temporary Disability Retired List (TDRL) unless they are rated at 80 percent or higher. Personnel rated at 80 percent or higher may be permanently retired. Personnel showing rapid progression that would otherwise be rated at 60 percent may be rated at 80 percent. The following descriptions and ratings are to be applied for rating purposes.

(1) HIV infection, manifested by positive antibody test T helper cells less than 400/mm^3, complete anergy, Opportunistic infection (WR-6).
VA Code 6351.....100%

(2) HIV infection, manifested by positive antibody test, T helper cells less than 400/mm^3, either complete anergy and/or oral thrush, (WR-5).
VA Code 6351.....100%

(3) HIV infection, manifested by positive antibody test, T helper cells less than 400/mm^3, neurological involvement (WR-3).
VA Code 6352/XXXX..30-100%

(4) HIV infection, manifested by positive antibody test, cervical and axillary lymphadenopathy, Kaposi's sarcoma, (WR-2K).
VA Code 6351/XXXX..80-100%

(5) HIV infection, manifested by positive antibody test, T helper cells less than 400/mm^3, partial anergy (WR-4). VA Code 6352/XXXX.....30-60%

(6) HIV infection, manifested by positive antibody test, asymptomatic without lymphadenopathy (WR- 1); HIV antibody positive, asymptomatic with lymphadenopathy defined as lymph nodes grater than one centimeter in diameter in two extra-inguinal sites persisting for 3 months (WR-2);

9.B.20.c.(6) (cont'd) HIV antibody positive, with or without lymphadenopathy, T helper cells less than 400/mm^3, without neurological involvement (WR-3).
VA Code 6353/6350.....30%

ILLUSTRATIVE EXAMPLES

VA CODE	DESCRIPTION	RATING
6353/6350	HIV infection, manifested by positive antibody test with lymphadenopathy - rated analagous to Lupus Erythematosis (WR-2)	30%
6352	HIV infection, manifested by positive antibody test, T-4 cells less than 400/mm^3, partial anergy.	60%
6351	HIV infection, manifested by positive antibody test, T-4 cells less than 400/mm^3, partial/complete angergy, weight loss and other signs of clinical deterioration.	100%
6351	HIV infection, manifested by positive antibody test, T-4 cells less than 400/mm^3, oral thrush (or persistent anergy).	100%
6351	HIV infection, manifested by positive antibody test, T-4 cells less than 400/mm^3, complete anergy, pneumocystis carinii pneumonia, (or other opportunistic infections malignancies, or neurological syndromes).	100%

CONDITIONS READILY IDENTIFIABLE AS BEING THE CONSEQUENCE OF HIV INFECTION BUT RATABLE UNDER ANOTHER VASRD CODE:

6352/9302	Dementia (Organic Brain Syndrome) secondary to HIV and manifested by emotional lability, personality change, memory impairment, impairment of abstract thinking, decrease in job performance of such extent and severity, as to produce [total, severe, considerable, etc] social and industrial impairment.	30-100%