

Veteran's name: _____

Veteran's SS#: _____

Veteran's VA File #: _____

(Date)

To Whom It May Concern –

I have been asked to write a letter in support of _____'s claim. I am board certified as _____. My full credentials can be found below.

I have reviewed the veteran's NARSUM, service treatment records and subsequent medical records regarding _____ condition, and _____ documents detailing _____ pertinent events that occurred during his military service. These documents include _____ *(list vital evidence found in the document, i.e. the triggering event or exposure, the original diagnosis and continued treatment of the primary condition, etc. Also include any important dates or date ranges.)*

The veteran has been my patient since _____. I continued to treat _____ condition and first diagnosed a secondary condition _____ on _____. The tests performed on _____ support my diagnosis. *(list any tests performed and their conclusions)*

It is my professional opinion that the veteran's current diagnosis is ("more likely than not" "less likely than not" "at least as likely as not") a direct result of _____ *("service-connected condition" or "event that occurred during the veteran's military service")*.

In my professional experience, _____ *(give medical rationale to support the opinion)*. The following medical references and studies also support my opinion _____ *(list any supportive literature)*.

Signed,

Dr. (print name)
(Include full pertinent credentials)