

status, including persons whose claims are based on war or peacetime service rendered before April 21, 1898.

(Pub. L. 85-857, Sept. 2, 1958, 72 Stat. 1124, § 352; renumbered § 1152, Pub. L. 102-83, § 5(a), Aug. 6, 1991, 105 Stat. 406.)

AMENDMENTS

1991—Pub. L. 102-83 renumbered section 352 of this title as this section.

§ 1153. Aggravation

A preexisting injury or disease will be considered to have been aggravated by active military, naval, or air service, where there is an increase in disability during such service, unless there is a specific finding that the increase in disability is due to the natural progress of the disease.

(Pub. L. 85-857, Sept. 2, 1958, 72 Stat. 1124, § 353; renumbered § 1153, Pub. L. 102-83, § 5(a), Aug. 6, 1991, 105 Stat. 406.)

AMENDMENTS

1991—Pub. L. 102-83 renumbered section 353 of this title as this section.

§ 1154. Consideration to be accorded time, place, and circumstances of service

(a) The Secretary shall include in the regulations pertaining to service-connection of disabilities (1) additional provisions in effect requiring that in each case where a veteran is seeking service-connection for any disability due consideration shall be given to the places, types, and circumstances of such veteran's service as shown by such veteran's service record, the official history of each organization in which such veteran served, such veteran's medical records, and all pertinent medical and lay evidence, and (2) the provisions required by section 5 of the Veterans' Dioxin and Radiation Exposure Compensation Standards Act (Public Law 98-542; 98 Stat. 2727).

(b) In the case of any veteran who engaged in combat with the enemy in active service with a military, naval, or air organization of the United States during a period of war, campaign, or expedition, the Secretary shall accept as sufficient proof of service-connection of any disease or injury alleged to have been incurred in or aggravated by such service satisfactory lay or other evidence of service incurrence or aggravation of such injury or disease, if consistent with the circumstances, conditions, or hardships of such service, notwithstanding the fact that there is no official record of such incurrence or aggravation in such service, and, to that end, shall resolve every reasonable doubt in favor of the veteran. Service-connection of such injury or disease may be rebutted by clear and convincing evidence to the contrary. The reasons for granting or denying service-connection in each case shall be recorded in full.

(Pub. L. 85-857, Sept. 2, 1958, 72 Stat. 1124, § 354; Pub. L. 94-433, title IV, § 404(20), Sept. 30, 1976, 90 Stat. 1379; Pub. L. 98-542, § 4, Oct. 24, 1984, 98 Stat. 2727; Pub. L. 102-54, § 14(b)(1), June 13, 1991, 105 Stat. 282; renumbered § 1154 and amended Pub. L. 102-83, §§ 4(b)(1), (2)(E), 5(a), Aug. 6, 1991, 105 Stat. 404-406.)

REFERENCES IN TEXT

Section 5 of the Veterans' Dioxin and Radiation Exposure Compensation Standards Act, referred to in subsec. (a), is set out below.

AMENDMENTS

1991—Pub. L. 102-83, § 5(a), renumbered section 354 of this title as this section.

Pub. L. 102-54, § 14(b)(1)(A), inserted a comma after "place" in section catchline.

Subsec. (a). Pub. L. 102-83, § 4(b)(1), (2)(E), substituted "Secretary" for "Administrator".

Pub. L. 102-54, § 14(b)(1)(B), inserted before period at end "(Public Law 98-542; 98 Stat. 2727)".

Subsec. (b). Pub. L. 102-83, § 4(b)(1), (2)(E), substituted "Secretary" for "Administrator".

1984—Subsec. (a). Pub. L. 98-542 designated existing provisions as cl. (1) and added cl. (2).

1976—Subsec. (a). Pub. L. 94-433 substituted "such veteran's" for "his" in three places and "such veteran" for "he".

EFFECTIVE DATE OF 1976 AMENDMENT

Amendment by Pub. L. 94-433 effective Oct. 1, 1976, see section 406 of Pub. L. 94-433, set out as a note under section 1101 of this title.

RADIATION DOSE RECONSTRUCTION PROGRAM OF DEPARTMENT OF DEFENSE

Pub. L. 108-183, title VI, § 601, Dec. 16, 2003, 117 Stat. 2667, provided that:

"(a) REVIEW OF MISSION, PROCEDURES, AND ADMINISTRATION.—(1) The Secretary of Veterans Affairs and the Secretary of Defense shall jointly conduct a review of the mission, procedures, and administration of the Radiation Dose Reconstruction Program of the Department of Defense.

"(2) In conducting the review under paragraph (1), the Secretaries shall—

"(A) determine whether any additional actions are required to ensure that the quality assurance and quality control mechanisms of the Radiation Dose Reconstruction Program are adequate and sufficient for purposes of the program; and

"(B) determine the actions that are required to ensure that the mechanisms of the Radiation Dose Reconstruction Program for communication and interaction with veterans are adequate and sufficient for purposes of the program, including mechanisms to permit veterans to review the assumptions utilized in their dose reconstructions.

"(3) Not later than 90 days after the date of the enactment of this Act [Dec. 16, 2003], the Secretaries shall jointly submit to Congress a report on the review under paragraph (1). The report shall set forth—

"(A) the results of the review;

"(B) a plan for any actions determined to be required under paragraph (2); and

"(C) such other recommendations for the improvement of the mission, procedures, and administration of the Radiation Dose Reconstruction Program as the Secretaries jointly consider appropriate.

"(b) ON-GOING REVIEW AND OVERSIGHT.—The Secretaries shall jointly take appropriate actions to ensure the on-going independent review and oversight of the Radiation Dose Reconstruction Program, including the establishment of the advisory board required by subsection (c).

"(c) ADVISORY BOARD.—(1) In taking actions under subsection (b), the Secretaries shall jointly appoint an advisory board to provide review and oversight of the Radiation Dose Reconstruction Program.

"(2) The advisory board under paragraph (1) shall be composed of the following:

"(A) At least one expert in historical dose reconstruction of the type conducted under the Radiation Dose Reconstruction Program.

"(B) At least one expert in radiation health matters.