paragraph (a) of this section, unless les-
sions are first shown so soon after
entry on active service as to compel
the conclusion, on the basis of sound
medical principles, that they existed
prior to entry on active service.

(c) Primary lesions. Healed primary
type tuberculosis shown at the time of
entrance into active service will not be
taken as evidence to rebut direct or
presumptive service connection for ac-
tive reinfection type pulmonary tuber-
culosi.

§ 3.371 Presumptive service connec-
tion for tuberculous disease; war-
time and service on or after Janu-
ary 1, 1947.

(a) Pulmonary tuberculosis. (1) Evi-
dence of activity on comparative study
of X-ray films showing pulmonary tu-
berculosis within the 3-year presum-
tive period provided by § 3.307(a)(3) will
be taken as establishing service con-
nection for active pulmonary tuber-
culosi subsequently diagnosed by ap-
proved methods but service connection
and evaluation may be assigned only
from the date of such diagnosis or
other evidence of clinical activity.

(2) A notation of inactive tuber-
culosi of the reinfection type at induc-
tion or enlistment definitely prevents
the grant of service connection under
§ 3.307 for active tuberculosis, regard-
less of the fact that it was shown with-
in the appropriate presumptive period.

(b) Pleurisy with effusion without obvi-
ous cause. Pleurisy with effusion with
evidence of diagnostic studies ruling
out obvious nontuberculous causes will
qualify as active tuberculosis. The re-
quirements for presumptive service
connection will be the same as those
for tuberculous pleurisy.

(c) Tuberculous pleurisy and endo-
bronchial tuberculosis. Tuberculous
pleurisy and endobronchial tuber-
culosi fall within the category of pul-
monary tuberculosis for the purpose of
service connection on a presumptive
basis. Either will be held incurred in
service when initially manifested with-
in 36 months after the veteran’s separa-
tion from service as determined under
§ 3.307(a)(2).

(d) Miliary tuberculosis. Service con-
nection for miliary tuberculosis involv-
ing the lungs is to be determined in the
same manner as for other active pul-
monary tuberculosis.

§ 3.372 Initial grant following inac-
tivity of tuberculosis.

When service connection is granted
initially on an original or reopened
claim for pulmonary or nonpulmonary
tuberculosis and there is satisfac-
tory evidence that the condition was active
previously but is now inactive (ar-
rested), it will be presumed that the
disease continued to be active for 1
year after the last date of established
activity, provided there is no evidence
to establish activity or inactivity in
the intervening period. For a veteran
entitled to receive compensation on
August 19, 1968, the beginning date of
graduated ratings will commence at
the end of the 1-year period. For a vet-
eran who was not receiving or entitled
to receive compensation on August 19,
1968, ratings will be assigned in accord-
ance with the Schedule for Rating Dis-
abilities (part 4 of this chapter). This
section is not applicable to running
award cases.

§ 3.373 [Reserved]

§ 3.374 Effect of diagnosis of active tu-
berculosis.

(a) Service diagnosis. Service depart-
ment diagnosis of active pulmonary tu-
berculosis will be accepted unless a
board of medical examiners, Clinic Di-
rector or Chief, Outpatient Service cer-
tifies, after considering all the evi-
dence, including the favoring or oppos-
ing tuberculosis and activity, that such
diagnosis was incorrect. Doubtful cases
may be referred to the Chief Medical
Director in Central Office.

(b) Department of Veterans Affairs di-
agnosis. Diagnosis of active pulmonary
tuberculosis by the medical authorities
of the Department of Veterans Affairs
as the result of examination, observa-
tion, or treatment will be accepted for