

FWD ASSIST HQ / CLAIM TOOLKIT / NO. 06

The Flare Log

Your back is rated on how far you bend, measured once, on one day. Here is how to put the other three hundred and sixty four days into the file.

Pain is the whole experience. It is not the whole measurement. The spine gets rated largely on degrees of motion, taken with a goniometer, in one appointment.

Which sets a trap. You go in and describe how much it hurts, because that is what it is like to live in that body. Meanwhile the number that drives the rating is being taken from how far you bent in that room, at that moment, on a day you were able to get to an appointment.

WHAT IS IN HERE

1. What is actually being measured
2. The rule that is on your side, and why it needs proof
3. The flare log
4. What to do on exam day

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What is being measured

Degrees, not adjectives.

An examiner will ask you to bend forward, backward, side to side, and rotate, and will measure the range with an instrument. Those numbers go on the form. Whatever you said about the pain goes in a narrative box that carries much less weight in the arithmetic.

This is not the examiner being unkind. It is the format. But it means that a claim built entirely around how much it hurts handed its most important evidence to a single measurement taken on one morning.

THE ONE LINE TO REMEMBER

They measure the bend. You have to supply the day.

What you can do at 10 a.m. in an exam room is one data point. What happens at hour three of a shift, or the morning after you moved furniture, is the rest of the picture and it is invisible unless you write it down.

Will they believe a log I wrote myself?

It is a fair question and the answer is yes, with a condition. You are allowed to describe what you can see and feel and do, and a log written as things happened carries more than the same account given from memory two years later. What makes it land is company: treatment records from the same period, and one person who saw it. A log on its own is evidence. A log next to a doctor visit and a witness is harder to set aside.

The numbers, and the rule on your side

The numbers you are near

Forward flexion of the lower back is the measurement most levels turn on. Knowing roughly where you sit tells you why the log matters.

Level	Forward flexion of the thoracolumbar spine
10	Greater than 60 degrees but not greater than 85 degrees
20	Greater than 30 degrees but not greater than 60 degrees
40	30 degrees or less, or favorable ankylosis of the entire thoracolumbar spine
50	Unfavorable ankylosis of the entire thoracolumbar spine
100	Unfavorable ankylosis of the entire spine

Those are the regulation's words, so here is what they mean. Thoracolumbar is the mid and lower back together. Forward flexion is bending forward at the waist, measured in degrees from standing straight. Ankylosis means the spine is fixed in one position and does not move, from fusion or from the disease itself. Favorable and unfavorable turn on more than the position. The regulation says fixation in neutral is always favorable, and that unfavorable means fixed in flexion or extension and producing one of a listed set of consequences, such as trouble walking from a limited line of sight, breathing limited to the diaphragm, or nerve symptoms from root stretching.

Those are bands, not a promise, and there are other routes to a rating in the same criteria. What they show you is how close a difference of a few degrees can be, which is exactly why a day that measures well and a day you cannot put your socks on are both worth having in the file.

The rule that is on your side

The regulation does not stop at the measurement. It says functional loss may be due to pain, supported by adequate pathology and shown by the visible behavior of the person doing the motion. And it says plainly that a part which becomes painful on use must be regarded as seriously disabled.

Read that second part again. Painful **on use**. Not painful sitting still in a quiet room. The rule already knows that a back can measure acceptably once and fail on the fourth repetition, or on the second hour, or the next day.

The catch is that nobody can apply that rule to a fact that is not in your file. That is the entire job of the next page.

Pain diary versus flare log

Most people keep the first one. The second one is the one that carries weight.

Those days are not your days. Put down your own. What is worth taking from them is the size: one task you could not finish, on a dated day, and what it cost you afterward.

What you would write	What actually helps
Back pain 8 out of 10 today.	Could not get my own boots on. Second time this week.
Rough day, hurt all day.	Two hours into the shift I had to sit down. Took the last four hours on the stool. Supervisor saw.
Bad flare, could barely move.	Flare started Tuesday after unloading the truck. Lasted through Thursday. Missed work Wednesday. Could not bend past about my knees.
Pain worse with activity.	Fine for the first ten minutes of mowing. By twenty minutes I was leaning on the handle. Had to stop and finish it the next day.

Three things appear on the right that are missing on the left: what specifically could not be done, how long it lasted, and what set it off. Those are the facts a rule about functional loss on use can actually attach to.

DO NOT OVERSTATE

Write your real days, including the good ones. A log with no good days in it reads as manufactured and does more harm than an honest one with fewer entries. Variation is the point. It is what a flare pattern looks like.

DO THIS BEFORE YOU START GATHERING

Gathering all of this takes time, and the date VA receives your claim is what your back pay is measured from. So do not spend weeks keeping a flare log and then file. There is a way to hold the date first.

It is called an intent to file. VA Form 21-0966, Intent to File a Claim for Compensation and/or Pension, or Survivors Pension and/or DIC (May 2026 version). The regulation says that if VA receives your complete claim within one year of the intent to file, the claim is treated as filed on the day the intent to file came in. That protection goes to the first complete claim VA receives after the intent to file, so put every condition you mean to claim in that one filing. An intent to file does not apply to a supplemental claim.

Starting a disability compensation claim online at va.gov can establish this on its own, once you start and save the application. Do not assume it did. Look for VA's confirmation, or send the form separately so there is a dated record you can point to. For a pension claim, va.gov says to submit the intent to file even when you apply online.

The page for it is va.gov/find-forms/about-form-21-0966. It costs nothing, takes minutes, and an accredited representative will do it with you at no charge. Then take your year and gather properly.

The flare log

Print several. One line per notable day. Two or three months of this is worth more than anything you can say from memory in an exam room.

NAME

DATE

Date	What set it off	What I could not do	How long
Ex: 3/14	Unloading the truck at work	Could not put my own socks on. Wife did it. Sat out the last four hours on a stool.	3 days

Also worth a line somewhere

Anything you stopped doing entirely. Anybody who has taken over a task for you. Days missed from work. Whether the pain runs down a leg, and which one, along with numbness, tingling or weakness, because the regulation says any associated objective neurologic abnormality gets evaluated separately under its own code. That is a second rating, not a detail.

On exam day

- ☐ I brought the flare log, or a copy of it.
- ☐ I described what I cannot do, not only how much it hurts.
- ☐ I said what happens after repeated use, not just on the first bend.
- ☐ I said how often flares happen and how long they last.
- ☐ I did not push through the motion past where it genuinely stops.
- ☐ I did not pretend it was worse than it is, either.
- ☐ I mentioned anything that runs down a leg, and which leg.
- ☐ I said what somebody else now does for me because I cannot.

ONE HONEST NOTE ABOUT THE EXAM

Do not force the bend to look worse and do not force it to look better. Both distort the record. If the motion stops because it genuinely stops, that is the measurement. If you can go further but it will cost you two days, that is worth saying out loud, because it is exactly what the functional loss rule is about.

ABOUT THE EXAM APPOINTMENT

You will probably be seen on a day you could get to an appointment, which is by definition not your worst day. If you are in a flare, say so. If you are not, say that too, and say what the bad days look like.

If you cannot make it, call and reschedule rather than missing it. Missing one without good cause is worse than most people think: on an original compensation claim it means the claim is rated on whatever is already in the file, and on a claim for increase or a supplemental claim for something previously denied, the regulation says the claim shall be denied. And examiners often will not take papers from you, which is why the block below matters more than handing anything over in the room.

HOW THIS REACHES VA

Handing a page to somebody in an appointment is not the same as putting it in your file. To be sure the flare log lands, submit it yourself.

VA Form 21-10210, Lay/Witness Statement (July 2024 version), is the form built for a written statement from you or from somebody else. You can upload it through your account at va.gov or mail it. Form numbers and versions change, so check the current one first. The page for this form is va.gov/find-forms/about-form-21-10210 and every VA form has one at the same address with its own number on the end.

Anybody who has watched you struggle, or taken a task over for you, can write their own short statement on the same form. A log plus one witness lands harder than a log alone.

Keep a copy of what you sent and how you sent it.

NOBODY SHOULD CHARGE YOU TO FILE

Help from an accredited Veterans Service Officer is free. Always. Disabled American Veterans, the Veterans of Foreign Wars, the American Legion and your state or county veterans service office all have accredited representatives and none of them charges you. The search is at va.gov/get-help-from-accredited-representative/find-rep.

Nobody may charge you a fee for helping with your claim before VA issues its first decision on it. That rule is 38 USC 5904(c)(1). After the first decision an accredited agent or attorney may charge, and 38 CFR 14.636 sets the limits, measured against past-due benefits, which means the back pay owed for the stretch before the decision: a fee not over 20 percent of that is presumed reasonable if that person represented you through the date of the decision, and a fee over one third is presumed unreasonable. Only an accredited agent or attorney may charge you anything.

So if somebody who is not accredited offers to file for you, wants money up front, or wants a cut, walk away and report them to the VA Office of Inspector General at 1-800-488-8244.

Where this is written down

Functional loss, including loss due to pain supported by pathology and shown by visible behavior during the motion, is in 38 CFR 4.40, which also states that a part which becomes painful on use must be regarded as seriously disabled. Additional factors affecting joints are in 38 CFR 4.45. The general rating formula for the spine, including the forward flexion figures above, and the instruction in its Note (1) to evaluate any associated objective neurologic abnormality separately under an appropriate diagnostic code, are in 38 CFR 4.71a.

What happens when an examination is missed is in 38 CFR 3.655.

Regulation text: [ecfr.gov](https://www.ecfr.gov), Title 38, Part 4, sections 4.40, 4.45 and 4.71a.

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Current as of October 2026. Regulations change. Check for a newer version before you rely on this.

If working on this is bringing things up, the Veterans Crisis Line is 988 then press 1, or text 838255. Family members can call it too.