How the VA Rates Sciatica (Secondary to Back Injury)

Regulatory Source: 38 CFR § 4.124a – Diagnostic Code 8520 VA Source: https://ecfr.gov

Summary:

Sciatica is typically filed as secondary to a service-connected back condition. It's rated based on the severity of nerve involvement—whether you have pain, numbness, tingling, or motor loss along the sciatic nerve path.

VA Rating Table:

Rating	Explanation
10%	Mild incomplete paralysis. Tingling or occasional numbness down one leg. No major strength loss.
20%–40%	Moderate incomplete paralysis with noticeable numbness, weakness, or pain affecting mobility or prolonged sitting/standing.
60%–80%	Severe incomplete paralysis or near-constant radiating pain down leg(s). Difficulty walking, climbing stairs, or driving.
90%–100%	Complete paralysis with no motor or sensory function. Foot drop or permanent mobility loss. Extremely rare.

Required Evidence:

- Diagnosis of sciatica, radiculopathy, or nerve impingement from MRI or EMG
- Primary service-connected back condition (e.g., DDD, herniated disc)
- C&P; exam or neurologist notes showing sensory/motor deficits
- Pain mapping, gait assessment, or strength testing results
- Personal statement about leg symptoms during sitting/walking

Pro Tip:

File sciatica claims by specific limb—left or right leg. Include EMG test results and gait/strength evaluations. If both legs are affected, they can be rated separately.