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**Template for VA Nexus Letter for Skin Cancer**
[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]
[Date]
[Recipient's Name]
[Recipient's Title]
[VA Regional Office Address]
[City, State, Zip Code]
**Subject: ** Nexus Letter for Skin Cancer Claim - [Veteran's Full Name
and VA File Number]
Dear [Recipient's Name],
I am writing this letter to provide a medical opinion regarding the
connection between [Veteran's Full Name]'s skin cancer diagnosis and
their military service.
**Veteran's Information:**
- **Name:** [Veteran's Full Name]
- **Date of Birth: ** [Veteran's Date of Birth]
- **Service Dates: ** [Veteran's Service Dates]
**Medical History:**
- [Provide a brief history of the veteran's skin cancer diagnosis: type
of skin cancer, date of diagnosis, treatment received, etc.]
**Service Connection:**
- [Explain the nature of veteran's military service, including exposure
to environmental factors related to skin cancer, such as excessive sun
exposure, Agent Orange, etc.]
**Medical Opinion:**
Based on my assessment and review of [Veteran's Full Name]'s medical
records, it is my professional opinion that there is a direct correlation
between the veteran's military service and their current diagnosis of
skin cancer. [Provide supporting evidence or reasoning that links the
diagnosis to service.]
**Conclusion:**
In light of the above information, I respectfully conclude that
[Veteran's Full Name]'s skin cancer is more likely than not related to
their military service. This letter serves to support their claim for
service-connected disability benefits.
Should you require any additional information or clarification, please
feel free to contact me at [Your Phone Number] or [Your Email Address].
Sincerely,
[Your Name]
[Your Professional Title/Qualification]
[Your License Number]
[Your Practice Name, if applicable]
[Your Practice Address, if applicable]
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