

[Your Name]  
[Your Address]  
[City, State, Zip Code]  
[Email Address]  
[Phone Number]  
[Date]

[Recipient's Name]  
[Recipient's Title]  
[Institution/Organization Name]  
[Address]  
[City, State, Zip Code]

Subject: Nexus Letter for Sleep Apnea

Dear [Recipient's Name],

I am writing this letter to establish a direct connection between [Veteran's Name]'s military service and his/her current diagnosis of sleep apnea.

[Veteran's Name] served in the [Branch of Service] from [Start Date] to [End Date]. During this time, [he/she] was exposed to various risk factors known to contribute to the development of sleep apnea, including [specific risks related to military service, e.g., weight gain, stress, environmental factors].

The medical record indicates that [Veteran's Name] was first diagnosed with sleep apnea on [Date of Diagnosis], which was supported by [mention any relevant tests, e.g., polysomnography]. Symptoms such as [list relevant symptoms, e.g., excessive daytime sleepiness, loud snoring] began showing up during [his/her] service, particularly during [mention specific incidents or deployments].

Based on my assessment and review of [Veteran's Name]'s medical history and military records, it is at least as likely as not (a 50% or greater probability) that his/her sleep apnea is related to [his/her] active duty service. This conclusion is supported by [mention any medical literature, studies, or specific diagnostic criteria].

For these reasons, I strongly recommend that the connection between [Veteran's Name]'s military service and current sleep apnea diagnosis be recognized.

Thank you for your attention to this matter.

Sincerely,

[Your Signature]  
[Your Printed Name]  
[Your Credentials/Title]  
[NPI or State License Number, if applicable]