

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

[Recipient Name]  
[Recipient Title/Position]  
[Company/Organization Name]  
[Address]  
[City, State, Zip Code]

Subject: Nexus Letter for Sleep Apnea Claim

Dear [Recipient Name],

I am writing this letter to provide medical evidence regarding the connection between my service-related activities and my diagnosed sleep apnea condition.

I have been diagnosed with sleep apnea since [insert date], and I have been experiencing symptoms including [list symptoms such as excessive daytime sleepiness, loud snoring, etc.]. My condition has been evaluated and treated under the care of [Doctor's Name] at [Clinic/Hospital Name]. During my military service from [start date] to [end date], I was exposed to [describe relevant experiences, such as stressors, sleeping conditions, etc.]. These service-related factors are known to contribute to the development of sleep apnea.

I am providing the following medical documentation to support my claim:

1. Medical records from [Clinic/Hospital Name]
2. Sleep study results
3. Statement from [Doctor's Name] regarding the nexus between my service and sleep apnea

Based on the accumulated evidence, I firmly believe that my sleep apnea condition is directly linked to my time in military service. I respectfully request that this letter and the accompanying documents be taken into consideration for my claim.

Thank you for your attention to this matter.

Sincerely,

[Your Name]  
[Your VA File Number] (if applicable)