## §718.202 Determining the existence of pneumoconiosis.

- (a) A finding of the existence of pneumoconiosis may be made as follows in paragraphs (a)(1) through (4) of this section:
- (1) A chest X-ray conducted and classified in accordance with §718.102 may form the basis for a finding of the existence of pneumoconiosis. Except as otherwise provided in this section, where two or more X-ray reports are in conflict, in evaluating such X-ray reports consideration must be given to the radiological qualifications of the physicians interpreting such X-rays (see §718.102(d)).
- (2) A biopsy or autopsy conducted and reported in compliance with §718.106 may be the basis for a finding of the existence of pneumoconiosis. A finding in an autopsy or biopsy of anthracotic pigmentation, however, must not be considered sufficient, by itself, to establish the existence of pneumoconiosis. A report of autopsy must be accepted unless there is evidence that the report is not accurate or that the claim has been fraudulently represented.
  - (3) If the presumptions described in §718.304 or §718.305 are applicable, it must be presumed that the miner is or was suffering from pneumoconiosis.
- (4) A determination of the existence of pneumoconiosis may also be made if a physician, exercising sound medical judgment, notwithstanding a negative X-ray, finds that the miner suffers or suffered from pneumoconiosis as defined in §718.201. Any such finding must be based on objective medical evidence such as blood-gas studies, electrocardiograms, pulmonary function studies, physical performance tests, physical examination, and medical and work histories. Such a finding must be supported by a reasoned medical opinion.
  - (b) A claim for benefits must not be denied solely on the basis of a negative chest X-ray.
    - (c) A determination of the existence of pneumoconiosis must not be made—
      - (1) Solely on the basis of a living miner's statements or testimony; or
- (2) In a claim involving a deceased miner, solely on the basis of the affidavit(s) (or equivalent testimony) of the claimant and/or his or her dependents who would be eligible for augmentation of the claimant's benefits if the claim were approved.

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