

RECORD OF PROCEEDINGS  
PHYSICAL DISABILITY BOARD OF REVIEW

NAME: XXXXXXXXXXXXX  
CASE NUMBER: PD1200479  
BOARD DATE: 20130110

BRANCH OF SERVICE: ARMY  
SEPARATION DATE: 20011026

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**SUMMARY OF CASE:** Data extracted from the available evidence of record reflects that this covered individual (CI) was an Army active duty SGT/E-5 with Military Occupational Specialty (MOS) (11B/Infantry). The evidence of record shows a career dating back to 1990. In March 1998, the CI underwent a vasectomy and subsequently developed unremitting right groin and testicular pain. The CI underwent a right epididymectomy in 2000 that led to resolution of the testicular pain. However, his right groin pain persisted and given his highly physically demanding MOS, he was unable to meet medical retention standards. He was issued a permanent L4 Profile and referred for a Medical Evaluation Board (MEB). The MEB forwarded right chronic groin pain, unremitting, to the Physical Evaluation Board (PEB). The PEB adjudicated the CI's condition as neuralgia of the ilioinguinal nerve, unfit, rated at 0%, with application of the Veteran's Affairs Schedule for Rating Disabilities (VASRD). The CI made no appeals, and was medically separated for neuralgia of the ilioinguinal nerve in Oct 2001.

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**CI CONTENTION:** The CI contended: "Still have chronic pain in the area which at times affects my job."

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**SCOPE OF REVIEW:** The Board wishes to clarify that the scope of its review as defined in DoDI 6040.44, Enclosure 3, paragraph 5.e. (2) is limited to those conditions which were determined by the PEB to be specifically unfitting for continued military service; or, when requested by the CI, those condition(s) "identified but not determined to be unfitting by the PEB." The ratings for unfitting conditions will be reviewed in all cases. The neuralgia of the ilioinguinal nerve condition requested for consideration meets the criteria prescribed in DoDI 6040.44 for Board purview and is accordingly addressed below. Any conditions or contention not requested in this application, or otherwise outside the Board's defined scope of review, remain eligible for future consideration by the Army Board for Correction of Military Records.

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**RATING COMPARISON:**

IPEB – Dated 20010425 (6 Mos Pre-Sep)			VA (C&P Exam 2 Mos. Pre-Sep) – All Effective 20011027			
Condition	Code	Rating	Condition	Code	Rating	Exam
Neuralgia of the Ilioinguinal Nerve	8799-8730	0%	Right Groin Pain	7525-7804	10%	20010816
↓No Additional MEB/PEB Entries↓			Residuals Laceration, Left Middle Finger	7804	0%	20010816
			Not Service-Connected x 6			20010816
Combined: 0%			Combined: 10%			

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**ANALYSIS SUMMARY:** The Board's authority as defined in DoDI 6040.44, resides in evaluating the fairness of Disability Evaluation System (DES) fitness determinations and rating decisions for disability at the time of separation. The Board utilizes VA evidence proximal to separation in arriving at its recommendations; and, DoDI 6040.44 defines a 12-month interval for special consideration to post-separation evidence. Post-separation evidence is probative only to the

extent that it reasonably reflects the disability and fitness implications at the time of separation.

Neuralgia of the Ilioinguinal Nerve Condition. The CI underwent a vasectomy in March 1998 and in early 2000, he experienced a popping sound with an acute onset of right groin and testicular pain during a run. When conservative therapy did not lead to resolution, he was referred to urology in July 2000. A cord block resulted in only temporary relief of his pain. Further conservative management was not successful and the CI underwent a right epididymectomy in September 2000. This led to resolution of the testicular pain, but his groin pain persisted. Pain management offered further injections, but the CI reasonably declined, as this had not provided any permanent solution in the past. Serial examinations, scrotal ultrasound, and serial urinalyses did not reveal any source for the right groin pain and no inguinal hernia was present. The MEB narrative summary (NARSUM) was initiated in early April 2001 but was not dictated until the end of May 2001, approximately 5 months prior to separation. The NARSUM examiner referred to an MEB exam annotated on an SF 88 dated 20 April 2001 that noted marked right testicular pain. The NARSUM itself included a more complete urologic exam that noted pain in the right inguinal canal and right groin with palpation, no hernia, and no testicular abnormalities. The CI's condition at the time of that examination included pain with any type of exertion, such as prolonged walking, climbing stairs, or any other activity. Activity limitation failed to relieve the pain and prognosis was poor. The VA Compensation & Pension (C&P) examination completed approximately 2 months prior to separation included a similar clinical history. The physical examination documented the same findings as the NARSUM examination with the addition of tenderness in the superior aspect of the right testis. The examiner opined that the impression was chronic right groin pain secondary to ilioinguinal neuralgia following a vasectomy and epididymectomy.

The Board directs attention to its rating recommendation based on the above evidence. The PEB coded the neuralgia of the ilioinguinal nerve 8799 analogous to 8730 neuralgia rated as 0%. The VA coded the right groin pain condition 7525 epididymo-orchitis; chronic only, analogous to 7804 Scar(s), unstable or painful rated as 10%. VASRD §4.124 stipulates that neuralgia characterized usually by a dull and intermittent pain, of typical distribution so as to identify the nerve is to be rated on the same scale with a maximum equal to moderate incomplete paralysis. In this case, the PEB rating is for chronic right groin pain; however, the NARSUM indicated right groin pain that was constant, worse with any activity, and interfered with daily activities. The C&P exam noted daily episodic right scrotal pain easily associated with exertion and sometimes with radiation to the right anterior leg as well. This evidence supports a neurologic etiology for this condition since pain is the overriding pathology and the Board determined that the ilioinguinal nerve peripheral nerve code closely reflected not on the functions affected, but the anatomical localization and symptomatology of the CI's condition. The Board took into consideration that §4.123 neuritis does allow for a rating of "severe, incomplete" in this case. The Board considered rating as severe neuritis without organic changes due to the degree and persistence of pain in evidence. After due deliberation, considering all of the evidence and mindful of VASRD §4.3 (reasonable doubt), the Board recommends a disability rating of 10% for the neuritis of the ilioinguinal nerve condition coded 8630.

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BOARD FINDINGS: IAW DoDI 6040.44, provisions of DoD or Military Department regulations or guidelines relied upon by the PEB will not be considered by the Board to the extent they were inconsistent with the VASRD in effect at the time of the adjudication. The Board did not surmise from the record or PEB ruling in this case that any prerogatives outside the VASRD were exercised. In the matter of the neuritis of the ilioinguinal nerve condition, the Board

unanimously recommends a disability rating of 10%, coded 8630 IAW VASRD §4.71a. There were no other conditions within the Board's scope of review for consideration.

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**RECOMMENDATION:** The Board recommends that the CI's prior determination be modified as follows, effective as of the date of his prior medical separation:

UNFITTING CONDITION	VASRD CODE	RATING
Neuritis of the Ilioinguinal Nerve	8630	10%
	<b>COMBINED</b>	<b>10%</b>

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The following documentary evidence was considered:

Exhibit A. DD Form 294, dated 20120603, w/atchs  
Exhibit B. Service Treatment Record  
Exhibit C. Department of Veterans' Affairs Treatment Record

XXXXXXXXXXXXXXXXXX, DAF  
President  
Physical Disability Board of Review

SFMR-RB

MEMORANDUM FOR Commander, US Army Physical Disability Agency  
(TAPD-ZB / XXXXXXXXXXXX), 2900 Crystal Drive, Suite 300, Arlington, VA 22202-3557

SUBJECT: Department of Defense Physical Disability Board of Review Recommendation  
for XXXXXXXXXXXXXXXX, AR20130000816 (PD201200479)

1. I have reviewed the enclosed Department of Defense Physical Disability Board of Review (DoD PDBR) recommendation and record of proceedings pertaining to the subject individual. Under the authority of Title 10, United States Code, section 1554a, I accept the Board's recommendation to modify the individual's disability rating to 10% without recharacterization of the individual's separation. This decision is final.
2. I direct that all the Department of the Army records of the individual concerned be corrected accordingly no later than 120 days from the date of this memorandum.
3. I request that a copy of the corrections and any related correspondence be provided to the individual concerned, counsel (if any), any Members of Congress who have shown interest, and to the Army Review Boards Agency with a copy of this memorandum without enclosures.

BY ORDER OF THE SECRETARY OF THE ARMY:

Encl

XXXXXXXXXXXXXX  
Deputy Assistant Secretary  
(Army Review Boards)

CF:  
( ) DoD PDBR  
( ) DVA