RECORD OF PROCEEDINGS PHYSICAL DISABILITY BOARD OF REVIEW

BOARD DATE: 20121102

<u>SUMMARY OF CASE</u>: Data extracted from the available evidence of record reflects that this covered individual (CI) was an active duty SPC/E-4 (25F/Network Switching Operator), medically separated for chronic right ankle pain. The CI had a sprain in 2003 with ligamentous laxity. On 1 February 2005 he had surgical repair with good stability, but persistent pain refractory to treatment. The CI did not meet the physical requirements of his Military Occupational Specialty or satisfy physical fitness standards. He was issued a permanent L3 profile and referred for a Medical Evaluation Board (MEB). The MEB forwarded chronic right ankle pain to the Physical Evaluation Board (PEB). No other conditions were forwarded for PEB adjudication. The PEB adjudicated the chronic right ankle pain condition as unfitting, rated 0%, with application of the US Army Physical Disability Agency (USAPDA) pain policy. The CI appealed directly to the USAPDA, which affirmed the PEB findings. He was then medically separated with a 0% disability rating.

<u>CI CONTENTION</u>: The CI elaborated no specific contention in his application.

SCOPE OF REVIEW: The Board wishes to clarify that the scope of its review as defined in the Department of Defense Instruction (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. 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.

RATING COMPARISON:

Service PDA – Dated 20060109			VA (4 Mos. 4 Post-Separation) – All Effective Date 20060130			
Condition	Code	Rating	Condition	Code	Rating	Exam
Chronic Right Ankle Pain	5099-5003	0%	Right ATFL Strain	5271	10%	20060506
↓No Additional MEB/PEB Entries↓			Osgood-Schlatter's Disease	5299-5261	10%	20060506
			0% X 1 / Not Service-Connected x 2			20060426
Combined: 0%			Combi	ned: 20%		

ANALYSIS SUMMARY:

<u>Chronic Right Ankle Pain</u>. The first visit for right ankle in the record was performed on 2 April 2002 after he sprained his right ankle. He was treated with an ace wrap and duty limitations. He was seen again in 2004 for chronic right ankle pain. X-rays performed on 23 July 2004 were normal. An magnetic resonance imaging (MRI) performed on 18 October 2004 was

suggestive of strain of the anterior tibiofibular ligament (ATFL). An orthopedics evaluation, for persistent pain, performed on 19 January 2005 was significant for a positive anterior drawers and talar tilt. He underwent a Bronstom repair of the ATFL and regained stability, but had persistent pain despite physical therapy. He did have improvement in his ROM with treatment, though. An orthopedic note on 25 April 2005, 9 months prior to separation, noted dorsiflexion of 15 degrees and normal plantar flexion at 45 degrees. His ankle remained stable. He was seen again in orthopedics on 22 July 2005 and 14 October 2005 with persistent pain. He was recommended for MEB at the latter appointment. There were two goniometric range-of-motion (ROM) evaluations in evidence, with documentation of additional ratable criteria, which the Board weighed in arriving at its rating recommendation; as summarized in the chart below.

Ankle ROM	MEB ~2 M	o. Pre-Sep	VA C&P ~4 Mo. Post-Sep		
Degrees	Left	Right	Left	Right	
Dorsiflexion (0-20)	10	5	-	0	
Plantar Flexion (0-45)	35	30	-	30	
Comments	and talar tilt tes	anterior drawer t. No additional with repetition	No instability to varus or valgus stress; no pain with repetitive motion. Sub-talar motion 20 degrees		
§4.71a Rating	N/A	10%	N/A	10%	

At the MEB exam performed on 1 November 2005, the CI reported pain and swelling of the right ankle. The MEB physical examiner noted lateral swelling and reduced ROM. The ROM was measured 2 weeks later in physical therapy and is in the table above. The narrative summary (NARSUM) was dictated 23 November 2005, 2 months prior to separation. The CI noted constant pain, but took no medications for it. No separate examination was performed. At the VA Compensation and Pension (C&P) exam performed on 6 May 2006, a little over 3 months after separation, the CI reported daily pain without flares. He was limited in running, but could stand for 3-4 hours and walk a mile. He used no assistive devices and had no limitations in activities of daily living including recreation. On examination, he had swelling and tenderness over the ATFL. Gait was non-antalgic. He had painless ROM and could rise on his toes without difficulty. There was no instability or malalignment. X-rays showed medial calcification with an intact ankle mortise. He was thought to have peroneal tendonitis. The Board directs attention to its rating recommendation based on the above evidence. The PEB rated the ankle at 0% disability and coded it 5099-5003, analogous to degenerative arthritis using the PDA pain policy. The VA coded the ankle 5271 and rated it 10% for moderate limitations in ROM. The Board considered other coding options, but concluded that none offered an advantage to the CI or were better descriptors of the condition than 5271 and that the limitation in ROM was best described as moderate, which supports a rating of 10%. 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 right ankle condition coded 5271.

<u>BOARD FINDINGS</u>: 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. As discussed above, PEB reliance on the USAPDA pain policy for rating ankle was operant in this case and the condition was adjudicated independently of that policy by the Board. In the matter of the right ankle condition, the Board unanimously recommends a disability rating of 10%, coded 5271 IAW

VASRD §4.71a. There were no other conditions within the Board's scope of review for consideration.

<u>RECOMMENDATION</u>: 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
Chronic Right Ankle Pain	5271	10%
	COMBINED	10%

The following documentary evidence was considered:

Exhibit A. DD Form 294, dated 20120322, w/atchs

Exhibit B. Service Treatment Record

Exhibit C. Department of Veterans' Affairs Treatment Record

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

SUBJECT: Department of Defense Physical Disability Board of Review Recommendation for XXXXXXXXXXXXXXXXXX, AR20120020616 (PD201200316)

- 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	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
CF: () DoD PDBR () DVA	