

RECORD OF PROCEEDINGS
PHYSICAL DISABILITY BOARD OF REVIEW

NAME: XXXX
CASE NUMBER: PD1200464
BOARD DATE: 20121031

BRANCH OF SERVICE: MARINE CORPS
SEPARATION DATE: 20021130

SUMMARY OF CASE: Data extracted from the available evidence of record reflects that this covered individual (CI) was a Reserve LCPL/E-3 (Food Service Specialist, 3381), medically separated for folliculitis decalvans (FD). The CI was initially diagnosed with FD in 2001, treated by dermatology with shampoo, topical cream, anti-inflammatory and antibiotic medications. He did not improve adequately to perform his Military Occupational Specialty (MOS) in full capacity. He was unable to comply with military grooming regulations, was not worldwide assignable, and referred for a Medical Evaluation Board (MEB). The MEB forwarded no other conditions for Physical Evaluation Board (PEB) adjudication. The PEB adjudicated the FD condition as unfitting, rated 10%, with application of the Veteran's Affairs Schedule for Rating Disabilities (VASRD). The CI made no appeals, and was medically separated with a 10% disability rating.

CI CONTENTION: "My disability (service-connected), folliculitis decalvans, has no known cure. Therefore, I am continuously taking medication for this incurable disability/disorder. (continued) At the time of my disability separation it was stated that scars on my scalp had let to bleeding over my pillowcase. It has been nearly a decade since this, and yet I still experience bleeding (occasionally) over my pillowcase. As mentioned on the first page (item 3) I still take medications to try to minimize scalp inflammation.

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. The FD condition requested for consideration meets the criteria prescribed in DoDI 6040.44 for Board purview, and is accordingly addressed below. Any condition or contention not requested in this application, or otherwise outside the Board's defined scope of review, remain eligible for future consideration by Board for Correction of Naval Records.

RATING COMPARISON:

Service IPEB – Dated 20021002			VA (~6 Mos. Post-Separation) – All Effective Date 20021201			
Condition	Code	Rating	Condition	Code	Rating	Exam
Folliculitis Decalvans	7899-7806	10%	Folliculitis Decalvans	7899-7806	10%*	20030630
No Additional MEB/PEB Entries			No Additional VA Entries			20030630
Combined: 10%			Combined: 10%			

*No subsequent VARDs

ANALYSIS SUMMARY: IAW DoDI 6040.44, the Board's authority is limited to making recommendations on correcting disability determinations. The Board's role is thus confined to the review of medical records and all evidence at hand to assess the fairness of PEB rating

determinations, compared to VASRD standards, based on ratable severity at the time of separation; and, to review those fitness determinations within its scope (as elaborated above) based on MOS performance limitations in evidence at separation. (NOTE: The VASRD changes for disability codes 7806-7819, effective August 30, 2002, were applicable in this case and the changes for codes 7800-7805, effective October 23, 2008, were not applicable.) The Board acknowledges the CI's information regarding the significant impairment with which his service-connected condition continue to burden him; but, must emphasize that the Disability Evaluation System (DES) has neither the role nor the authority to compensate members for anticipated future severity or potential complications of conditions resulting in medical separation. That role and authority is granted by Congress to the Department of Veterans' Affairs (DVA), operating under a different set of laws. Post-separation evidence is probative to the Board's recommendations only to the extent that it reasonably reflects the disability at the time of separation.

Folliculitis Decalvans Condition. The CI's scalp condition appeared following the CI's initial haircut at boot camp. He developed papulo-pustular lesions on the scalp with some keloid formation to the neck and scalp area. Topical therapy and systemic antibiotic therapy did not resolve the scalp lesions and the CI was subsequently diagnosed with FD. He was unable to tolerate close haircuts or wear a helmet. The MEB physical exam performed approximately 8 months prior to separation, noted scalp lesions described as "erythematous pustules in a folliculocentric pattern on his scalp and several boggy plaques as well as plaques of scarred alopecia. Purulent discharge was easily expressed from the boggy plaques with pressure." Treatment notes indicated that the CI was not on systemic corticosteroids or immunosuppressive medications. The bleeding from his scalp lesions led to duty restrictions.

The VA Compensation and Pension (C&P) exam performed approximately 6 months after separation indicated a similar history as the service record. Exam demonstrated "the patient's hair is coarse thoroughly. Follicular papules are visually appreciated and palpated over the entirety of the patient's scalp. No pustules are present today. There are few scattered foci of scarring alopecia." The examiner indicated photographs were not obtained because the CI was wearing his hair long that prevented an accurate photograph of what was palpated. The examiner diagnosed "Folliculitis decalvans (100% of scalp)."

The Board directs attention to its rating recommendation based on the above evidence. Both the PEB and VA rated this condition analogously to 7806 (Dermatitis or eczema) at 10%. The CI had not been on "systemic therapy such as corticosteroids or other immunosuppressive drugs" and the remainders of the 7806 rating criteria are based on the area of skin involved. The CI had been on systemic antibiotics, which the Board adjudged was not considered equivalent to systemic therapy such as "as corticosteroids or other immunosuppressive drugs." Codes 7800 (Disfigurement of the head, face, or neck) and 7830 (Scarring alopecia) were considered for potential alternative coding. The Board noted that there was apparent improvement in the CI's scalp condition from the MEB exam to the VA rating exam. Neither exam provided specific equivalent square inches involved and/or specific measurements for plaques or scars. Although "Folliculitis decalvans (100% of scalp)" was the VA exam diagnosis, this was interpreted to mean there was no sparing of the scalp from the follicular papules. Papules, by definition have normal surrounding skin that would not be counted for the affected square area and surface area determinations. There was some doubt that the MEB exam may have approached the 20% of exposed skin criteria for rating at 30% IAW VASRD 7806; however, the VA exam was adjudged as below 20% of the exposed area affected (10% rating level). The Board consensus was that less than 20% of the exposed areas were affected at the time of separation. There was insufficient evidence for higher rating using alternative coding under 7800 (disfigurement of the head, face, or neck), or under 7830 Scarring alopecia. After due deliberation, considering all of the evidence and mindful of VASRD §4.3 (reasonable doubt), the Board concluded that

there was insufficient cause to recommend a change in the PEB adjudication for the folliculitis decalvans condition.

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 folliculitis decalvans condition and IAW VASRD §4.118, the Board unanimously recommends no change in the PEB adjudication. There were no other conditions within the Board’s scope of review for consideration.

RECOMMENDATION: The Board, therefore, recommends that there be no recharacterization of the CI’s disability and separation determination, as follows:

UNFITTING CONDITION	VASRD CODE	RATING
Folliculitis Decalvans	7899-7806	10%
	COMBINED	10%

The following documentary evidence was considered:

- Exhibit A. DD Form 294, dated 20120602, w/atchs
- Exhibit B. Service Treatment Record
- Exhibit C. Department of Veterans’ Affairs Treatment Record

XXXX
President
Physical Disability Board of Review

MEMORANDUM FOR DIRECTOR, SECRETARY OF THE NAVY COUNCIL
OF REVIEW BOARDS

Subj: PHYSICAL DISABILITY BOARD OF REVIEW (PDBR) RECOMMENDATIONS

Ref: (a) DoDI 6040.44
(b) CORB ltr dtd 7 Nov 12

In accordance with reference (a), I have reviewed the cases forwarded by reference (b), and, for the reasons provided in their forwarding memorandum, approve the recommendations of the PDBR that the following individual's records not be corrected to reflect a change in either characterization of separation or in the disability rating previously assigned by the Department of the Navy's Physical Evaluation Board:

- former USN
- former USN
- former USMC
- former USN
- former USMC
- former USMC
- former USMC
- former USMC
- former USN

Assistant General Counsel
(Manpower & Reserve Affairs)