

RECORD OF PROCEEDINGS
PHYSICAL DISABILITY BOARD OF REVIEW

NAME: XXXXXXXXXXXXXXXX
CASE NUMBER: PD1200599
BOARD DATE: 20121108

BRANCH OF SERVICE: ARMY
SEPARATION DATE: 20020713

SUMMARY OF CASE: Data extracted from the available evidence of record reflects that this covered individual (CI) was an active duty SPC/E4 (11B/Infantryman), medically separated for chronic right groin pain. In September 2000, following a game of football, the CI developed a right groin hernia. The CI had a prior history of successful right hernia repairs at age 4 and 12. One month after successful right inguinal hernia repair in early 2001, the CI experienced right groin pain causing significant physical limitations. Peripheral Neuropathy of the right ilio-inguinal nerve was diagnosed along with scar pain. Two unsuccessful right ilio-inguinal nerve blocks in the fall of 2001 were unsuccessful. Exploratory surgery in November 2001 with neurolysis was also unsuccessful in reversing possible pathological nerve entrapment. The CI did not improve adequately with treatment to meet the physical requirements of his Military Occupational Specialty (MOS) or satisfy physical fitness standards. He was issued a permanent L3 profile and referred for a Medical Evaluation Board (MEB). The condition characterized as "chronic right groin pain" was forwarded to the Physical Evaluation Board (PEB) as medically unacceptable IAW AR 40-501. No other conditions were submitted by the MEB. The PEB adjudicated the "chronic right groin pain status post right inguinal hernia surgery" as unfitting, rated 0% with application of the Veterans Administration Schedule for Rating Disabilities (VASRD). The CI made no appeals, and was medically separated with a 0% disability rating.

CI CONTENTION: "I still have chronic right groin pain which keeps me from being able to run for an extended period of time without hurting for days afterwards. I hurt every day with some days worse than others. Good days I hurt. Bad days I hurt to the point that I can barely get out of bed."

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 rating for the unfitting chronic right groin pain condition is 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.

RATING COMPARISON:

Service IPEB – Dated 20020415			VA (3 Mos. Post-Separation) – All Effective Date 20020714			
Condition	Code	Rating	Condition	Code	Rating	Exam
Chronic R groin pain	8799-8729	0%	Inguinal Hernia Repair w/groin pain	7338	10%	20021014
↓ No Additional MEB/PEB Entries ↓			0% X 0 / Not Service-Connected x 0			

ANALYSIS SUMMARY: The Disability Evaluation System (DES) is responsible for maintaining a fit and vital fighting force. While the DES considers all of the member's medical conditions, compensation can only be offered for those medical conditions that cut short a member's career, and then only to the degree of severity present at the time of final disposition. The DES has neither the role nor the authority to compensate members for anticipated future severity or potential complications of conditions resulting in medical separation nor for conditions determined to be service-connected by the Department of Veterans' Affairs (DVA) but not determined to be unfitting by the PEB. However the DVA, operating under a different set of laws (Title 38, United States Code), is empowered to compensate all service-connected conditions and to periodically re-evaluate said conditions for the purpose of adjusting the Veteran's disability rating should his degree of impairment vary over time. The Board's role is 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 severity at the time of separation.

Right Groin Pain Condition: The narrative summary (NARSAM) indicated no evidence of repeat hernia during exploratory right groin surgery in November 2001. At the MEB exam, 6 months before separation, the CI complained of "chronic intense right groin pain." Exam noted "no abdominal tenderness...no notable right or left inguinal hernias. The right testicle is slightly high riding and non-tender. The musculoskeletal system reveals full range-of-motion (ROM), specifically at the right hip. The strength in his right lower extremity is normal as is his sensory function..." Pain was considered moderate and constant with a diagnosis of chronic right groin pain. Profile restriction was "no repetitive motion of the lower extremities."

The VA Compensation and Pension (C&P) exam, performed 3 months after separation, noted the CI stated "he had pain in the right inguinal area every day and sometimes the pain radiates down to the right thigh and right leg." Physical exam showed good posture and gait, slight tenderness and diminished sensation to light touch in the right groin. Computerized Tomography (CT) imaging demonstrated a "small inguinal hernia without any intra-hernial content. Suspicious of bilateral hydroceles..."

The Board directs attention to its rating recommendation based on the above evidence. The IPEB coded the condition as 8799-8729, analogous to Neuralgia (External Cutaneous Nerve of the Thigh), rated at 0% (moderate) IAW the VASRD. The VA coded the condition as 7338 Hernia, Inguinal rated at 10%. For rating the diagnosis of a post-operative ilio-inguinal neuropathy (8730, Ilio-inguinal nerve) and the External Cutaneous Nerve of the Thigh (8729) code are both limited to a maximum rating of 0% for 'moderate' peripheral nerve impairment IAW VASRD §4.124 for rating neuralgia "with a maximum equal to moderate incomplete paralysis." The Board deliberated if the CI's hernia noted on the post-separation VA imaging justified coding under code 7338. The VA exam was closer to the date of separation, and there was no evidence of post-separation injury or worsening in the 3 months post-separation. The Board determined that the VA exam had the higher probative value for rating. The CI's disability picture of pain and post-surgical hernia was closest to the disability picture of the VASRD 7338 10% criteria "Postoperative recurrent, readily reducible and well supported by truss or belt." There was no evidence that any hernia was not reducible, irremediable or not able to be supported as would be required to warrant the higher 30% rating. 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 chronic right groin pain condition coded as 8729-7338 to indicate inclusion of the pain and post-operative recurrent hernia by diagnostic testing.

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 chronic right groin pain condition, the Board unanimously recommends a disability rating of 10%, coded 8729-7338 IAW VASRD §4.114. There were no other conditions within the Board's scope of review for consideration.

RECOMMENDATION: The Board therefore 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 Groin Pain Condition	8729-7338	10%
	COMBINED	10%

The following documentary evidence was considered:

Exhibit A. DD Form 294, dated 20120604, w/atchs

Exhibit B. Service Treatment Record

Exhibit C. Department of Veterans' Affairs Treatment Record

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President

Physical Disability Board of Review

SFMR-RB

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 XXXXXXXXXXXXXXXXXXXX, AR20120021220 (PD201200599)

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

XXXXXXXXXXXXXXXXXXXXX
Deputy Assistant Secretary
(Army Review Boards)

CF:
() DoD PDBR
() DVA