

RECORD OF PROCEEDINGS
PHYSICAL DISABILITY BOARD OF REVIEW

NAME: XXXXXXXXXXXXXXXX
CASE NUMBER: PD1200622
BOARD DATE: 20121102

BRANCH OF SERVICE: ARMY
SEPARATION DATE: 20021025

SUMMARY OF CASE: Data extracted from the available evidence of record reflects that this covered individual (CI) was an active duty SSG/E-6 (31S/Satellite Communications System Operator/Repairer), medically separated for left knee pain. The condition began as a result of injury in 1996. Despite initial surgery, rehabilitation and later arthroscopy, 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 MEB forwarded anterior knee pain to the Physical Evaluation Board (PEB) as medically unacceptable IAW AR 40-501. The MEB forwarded no other conditions for PEB adjudication. The PEB adjudicated the chronic left knee pain condition as unfitting, rated 10% with application of the US Army Physical Disability Agency (USAPDA) pain policy. The CI made no appeals, and was medically separated with a 10% disability rating.

CI CONTENTION: "The initial PEB only rated my left knee injury while several serious medical conditions existed at the time of separation."

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 unfitting left knee condition meets the criteria prescribed in DoDI 6040.44 for Board purview, and is accordingly addressed below. The remaining conditions rated by the VA at separation and listed on the DD Form 294 are not within the Board's purview. 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 20021010			VA (1 Mo. Pre-Separation) – All Effective Date 20021026			
Condition	Code	Rating	Condition	Code	Rating	Exam
Chronic Left Knee Pain	5099-5003	10%	Anterior Cruciate Ligament Tear	5257	10%	20020919
			Left Knee Degenerative Changes	5010	10%	20020919
			Lumbosacral Strain	5295	10%	20020919
			Right Shoulder Strain	5099-5024	10%	20020919
			Deviated Nasal Septum	6502	10%	20020919
			Tinnitus	6260	10%	20020830
					0% X 3	20020919
↓ No Additional MEB/PEB Entries ↓						
Combined: 10%			Combined: 50%*			

*Rating decision 20100511 added diabetes, coded 7913 at 20%, effective 20090420; combined 60%.

ANALYSIS SUMMARY:

Left Knee Condition. Open surgical repair of a left anterior cruciate ligament (ACL) avulsion was performed in January 1996. A post-operative note after the first arthroscopy reported that the left knee displayed a Lachman test equivalent to a Grade IA (minimally abnormal ACL integrity test). The orthopedist opined that this likely represented the CI's normal baseline because the unaffected right knee ACL showed the same findings. Because of recurrent pain and symptoms of giving way (indicating possible knee ligament instability), a diagnostic arthroscopy was performed in 1999. This revealed an intact ACL, but some scarring of the anterior fat pad was present that required surgical release. 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.

Left Knee ROM	PT ~2 Mo. Pre-Sep	VA C&P ~1 Mo. Pre-Sep
Flexion (140° Normal)	135°	140°
Extension (0° Normal)	0°	0°
Comment	+painful motion and tenderness; 1A Lachman, +anterior drawer	ROM additionally limited by pain; slight anterior subluxation with some instability
§4.71a Rating		
5099-5003 or 5010	10%	10%
5257	10%*	10%*

*If instability conceded

At the narrative summary (NARSUM) examination performed 3 months prior to separation (2 August 2002), the CI reported sharp anterior knee pain when twisting, and occasional swelling and "very occasionally giving way." Pain occurred daily. There were no symptoms of locking. Over the counter pain medication was partially helpful for pain. Physical exam showed a Grade IA Lachman test and a negative pivot shift test (normal ACL integrity test). Painful motion and tenderness were present. X-ray revealed post-surgical changes. The MEB examiner noted painful motion and no knee laxity. At the VA Compensation and Pension (C&P) exam performed a month prior to separation, the CI reported that he had some limitation in walking because of pain in his knee joints. He occasionally required pain medication. Exercise caused the pain to flare up. He also noted that his left leg would occasionally give way. Examination revealed a normal gait. Although ROM was additionally limited by pain, the degree of additional limitation was not specified. Muscle strength was normal and there was no muscle atrophy.

The Board directs attention to its rating recommendation based on the above evidence. The 10% rating by the PEB under an analogous 5003 code (degenerative arthritis) was consistent with VASRD §4.71a standards for rating a painful joint with noncompensable limitation of motion. A 10% rating was also justified under §4.40 (functional loss) or §4.59 (painful motion), an approach reflected in the VA's 10% rating under the 5010 code (traumatic arthritis). The VA however assigned an additional 10% rating for instability using the 5257 code (Knee, other impairment of: recurrent subluxation or lateral instability). Although the dominant symptom was clearly pain, the CI also complained of occasional giving way (a possible symptom of knee instability). Board members debated the significance of multiple exams showing a minimally

positive Lachman test present before and after an arthroscopy that documented a normal ACL. The Board concluded that the occasional symptom of giving way was not due to ligament instability and therefore that additional disability under the 5257 code was not justified. The Board also considered rating under the 5262 code (Tibia and fibula, impairment of), but agreed that "slight" knee disability was the most accurate descriptor of the condition under this code; thus a rating higher than 10% was not justified via this pathway. 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 left knee pain 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. As discussed above, PEB reliance on the USAPDA pain policy for rating chronic left knee pain was operant in this case and the condition was adjudicated independently of that policy by the Board. In the matter of the chronic left knee pain condition and IAW VASRD §4.71a, 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
Chronic Left Knee Pain	5099-5003	10%
	COMBINED	10%

The following documentary evidence was considered:

- Exhibit A. DD Form 294, dated 20120608, w/atchs
- Exhibit B. Service Treatment Record
- Exhibit C. Department of Veterans' Affairs Treatment Record

XXXXXXXXXXXXXXXXXXXXX
 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
XXXXXXXXXXXXXXXXXXXXXXX, AR20120020588 (PD201200622)

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 and hereby deny the individual's application. This decision is final. The individual concerned, counsel (if any), and any Members of Congress who have shown interest in this application have been notified of this decision by mail.

BY ORDER OF THE SECRETARY OF THE ARMY:

Encl

XXXXXXXXXXXXXXXXXXXXXXX
Deputy Assistant Secretary
(Army Review Boards)

CF:
() DoD PDBR
() DVA