RECORD OF PROCEEDINGS PHYSICAL DISABILITY BOARD OF REVIEW

BOARD DATE: 20130116

<u>SUMMARY OF CASE</u>: Data extracted from the available evidence of record reflects that this covered individual (CI) was an active duty Soldier, SPC/E-4(74B/Information Systems Operator and Analyst), medically separated for asthma. The CI first noticed breathing problems after completing basic and technical training. Her asthma did not improve adequately with treatment to meet the physical requirements of her Military Occupational Specialty or satisfy physical fitness standards. She was issued a permanent P3 profile and referred for a Medical Evaluation Board (MEB). The MEB forwarded asthma as medically unacceptable IAW AR 40-501. Hypercholesterolemia, mild, identified in the rating chart below, was identified as not disqualifying and forwarded by the MEB. The Physical Evaluation Board (PEB) adjudicated the asthma as unfitting, rated 0%, with application of the Veterans Affairs Schedule for Rating Disabilities (VASRD). The hypercholesterolemia was adjudicated as not disqualifying. The CI made no appeals, and was medically separated with a 0% disability rating.

<u>CI CONTENTION</u>: The CI states: "My rating should be changed because the decision was based on incorrect information. I have highlighted areas on pgs. 2 & 3 of my decision letter because they conflict with the evidence I am submitting. According to my letter I never showed up for my x-rays, but I have the receipt from where they billed Tricare to prove I did. Also on pg. 3 it says "according to the x-rays of my hand." If x-rays of my hand were taken then so were my chest x-rays. Also upon being discharged when I did my final breathing test, I was never given the methacholine [sic] as in my first test in 2000. Of course the test showed nothing I was standing still when I took it. My asthma is based on exerction. [sic] If I am just sitting there of course the test would come back normal. I also have 2 receipts from Tricare explaining the x-rays of my chest and hand."

<u>SCOPE OF REVIEW</u>: 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 (asthma) 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 PEB – Dated 20030206 | | | VA (2 Mos. Pre-Separation) – All Effective Date 20030613 | | | |
|---------------------------------|-------------------|--------|--|------|--------|----------|
| Condition | Code | Rating | Condition | Code | Rating | Exam |
| Asthma | 6602 | 0% | Asthma | 6602 | 10% | 20030402 |
| Hypercholesterolemia, Mild | Not Disqualifying | | No VA Entry | | | |
| √No Additional MEB/PEB Entries√ | | | 0% X 0 / Not Service-Connected x 1 | | | 20030402 |

Combined: 0% Combined: 10%

ANALYSIS SUMMARY:

Asthma. The MEB narrative summary (NARSUM) notes the CI first noticed problems with breathing after completing basic training. Spirometry was normal in May 2000; however, she was diagnosed with asthma based on a positive methacholine bronchoprovocation test in June 2000. The MEB allergy consult 2 October 2002, and the MEB NARSUM 7 November 2002, recorded the CI was using daily inhaled bronchodilator and inhaled anti-inflammatory medications; however, she continued to have respiratory problems and respiratory distress with exertion. No repeat spirometry was performed at the time of the MEB. At the VA Compensation and Pension exam performed on 2 April 2003, 2 months before separation, the CI reported a history of exercise induced asthma diagnosed in 2000. At that time the CI stated she was using Advair and Singulair daily and Albuterol as needed before running (about 3 times/week). The pulmonary exam evidence good air entry in both lungs and no respiratory distress. Pulmonary function tests (PFT) were also normal (FEV1 104% predicted, and FEV1/FVC ratio was 95%).

The Board directs attention to its rating recommendation based on the above evidence. The PEB rated the asthma condition based on review of the pharmacy record indicating intermittent use of medications. The VA rated the condition 10% also citing normal spirometry with intermittent use of inhalatory medication. In its deliberations, the Board devoted attention to the issue of whether the requirement for daily bronchodilator and/or anti-inflammatory therapy was met in this case, as that is the pivotal criteria between a 10% or 30% rating IAW VASRD §4.97. The pharmacy medication profile printed by the PEB on 25 February 2003 documented the last refill of Advair, Albuterol, and Singulair was on 5 September 2002, almost 6 months before. Each prescription was for a one to 2 months' supply. The Board concluded this was convincing evidence the CI was not using inhaled medication on a daily basis. Based on normal spirometry and intermittent use of inhaler medication, the Board agreed with the 10% rating adjudicated by the VA. After due deliberation, considering all of the evidence and mindful of VASRD §4.3 (Resolution of reasonable doubt), the Board recommends a disability rating of 10% for the asthma condition coded 6602.

<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. In the matter of the asthma condition, the Board unanimously recommends a disability rating of 10%, coded 6602 IAW VASRD §4.97. There were no other conditions within the Board's scope of review for consideration.

<u>RECOMMENDATION</u>: The Board recommends that the Cl's prior determination be modified as follows, effective as of the date of her prior medical separation:

| UNFITTING CONDITION | VASRD CODE | RATING |
|---------------------|------------|--------|
| Asthma | 6602 | 10% |
| | COMBINED | 10% |

The following documentary evidence was considered:

Exhibit A. DD Form 294, dated 20120603, w/attachments Exhibit B. Service Treatment Record

Exhibit C. Department of Veterans' Affairs Treatment Record

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

SUBJECT: Department of Defense Physical Disability Board of Review Recommendation for xxxxxxxxxxxxxxx, AR20130002254 (PD201200797)

- 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