

RECORD OF PROCEEDINGS
PHYSICAL DISABILITY BOARD OF REVIEW

NAME: XXXXXXXXXXXXXXXXXXXX
CASE NUMBER: PD1200877
BOARD DATE: 20130116

BRANCH OF SERVICE: ARMY
SEPARATION DATE: 20011212

SUMMARY OF CASE: Data extracted from the available evidence of record reflects that this covered individual (CI) was an active duty PV2/E-2 (96B/Intelligence Analyst), medically separated for chronic left hip flexor tendinitis. The CI was unable to meet the physical requirements of her Military Occupational Specialty or satisfy physical fitness standards. The CI was issued a permanent U3 profile and referred for a Medical Evaluation Board (MEB). The MEB forwarded no other conditions for Physical Evaluation Board (PEB) adjudication. The PEB adjudicated the chronic left hip condition as unfitting, rated 0%, with application of the Veterans Affairs Schedule for Rating Disabilities (VASRD). The CI made no appeals, and was medically separated with a 0% disability rating.

CI CONTENTION: "I believe there was evidence of injury that should have been compensated once I was discharged. I received compensation for the exact same injuries that I received a rating of 0%."

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 left hip condition requested for consideration meets the criteria prescribed in DoDI 6040.44 for Board purview, and is accordingly addressed below. The right hip and lumbar which were rated by the VA but not identified by the MEB 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 20011113			VA (5.5 Mos. Post-Separation) – All Effective Date 20011213			
Condition	Code	Rating	Condition	Code	Rating	Exam
Left Hip flexor tendinitis	5099-5024	0%	Chronic Bursitis Left Hip	5019	10%	20020628
↓No Additional MEB/PEB Entries↓			Chronic Bursitis Right Hip	5019	10%	20020628
			Radiating Symptomatology of L spine associated with B Hip bursitis	5295	10%	20020628
			0% X 0 / Not Service-Connected x 0			
Combined: 0%			Combined: 30%			

ANALYSIS SUMMARY:

Left Hip Condition. There were three 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 Hip (Thigh) ROM (Degrees)	Ortho ~3.5 Mo. Pre-Sep	MEB ~2 Mo. Pre-Sep	VA C&P ~6 Mo. Post-Sep
Flexion (125 normal)	115	>100	100
Extension (20)	-	-	15
External Rotation (45)	45	30-40	40
Abduction (45)	-	60	30
Adduction (45)	-	-	20
Comment	Tenderness	Without pain Minimal tenderness Minimal limp	Painful motion. Gait and posture normal
§4.71a Rating	10%	0% (PEB 0%)	10% (VA 10%)

The CI developed left hip pain during basic training. X-rays and bone scan revealed no abnormality with the left hip. The hip pain would aggravate with physical activity and movement, therefore the CI was never able to pass the Army Physical Fitness Test. The CI was evaluated by orthopedics who concluded that the CI's symptoms were not likely to resolve within a reasonable period of time in the military environment and recommended referral to the PEB. At the MEB exam (2 months prior to separation), the CI had "full, active/passive" ROM of the hips without pain as noted in the table. There was minimal tenderness to palpation along anterior inguinal ligament. The CI walked with minimal limp, jump was equal, could jog without pain and heel-toe walk without difficulty and full deep knee bends were noted. At the VA Compensation and Pension (C&P) exam (6 months after separation), the ROM is noted in the table above. The CI did have pain with motion of the left hip. There were no abnormal weight bearing signs; posture and gait were normal. There was no further limitation by fatigue, weakness, lack of endurance or incoordination.

The Board directs attention to its rating recommendation based on the above evidence. The PEB rated the left hip condition 0% citing "chronic left hip flexor tendinitis [...] rated as tenosynovitis without loss of range of motion. (MEBD Dx 1, 2 NARSUM: 1. chronic left hip tendonitis and 2. left hip intra-articular irritation)"; and coded the condition 5099-5024 (tenosynovitis). The VA rated 10% citing limitation of motion coded 5019 (bursitis). The Board notes that the VASRD directs that both diagnoses codes 5019 and 5024 be rated on limitation of motion of the affected parts, as arthritis, degenerative. The CI's ROM is not limited to support even the 10% lowest rating and thus would be rated at 0%. The Board considered the application of §4.59, (Painful motion). The CI did have pain with movement at the orthopedic evaluation about a month prior to the MEB examination and at the C&P exam 6 months after-separation. The Board concluded that the CI does have painful motion in sufficient frequency to support a rating of 10%. 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 left hip flexor tendonitis 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 left hip flexor tendonitis condition, the Board unanimously recommends a disability rating of 10%, coded 5099-5024 IAW VASRD §4.71a. There were no other conditions within the Board's scope of review for consideration.

RECOMMENDATION: The Board recommends that the CI's prior determination be modified as follows, effective as of the date of her prior medical separation:

UNFITTING CONDITION	VASRD CODE	RATING
Left Hip Flexor Tendonitis	5099-5024	10%
	COMBINED	10%

The following documentary evidence was considered:

- Exhibit A. DD Form 294, dated 20120605, w/atchs
- Exhibit B. Service Treatment Record
- Exhibit C. Department of Veterans' Affairs Treatment Record

XXXXXXXXXXXXXXXXXXXXX, DAF
Director
Physical Disability Board of Review

SFMR-RB

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 XXXXXXXXXXXXXXXXXXXX, AR20130002538 (PD201200877)

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

XXXXXXXXXXXXXXXXXX
Deputy Assistant Secretary
(Army Review Boards)