## RECORD OF PROCEEDINGS PHYSICAL DISABILITY BOARD OF REVIEW

BRANCH OF SERVICE: ARMY SEPARATION DATE: 20080404

<u>SUMMARY OF CASE</u>: Data extracted from the available evidence of record reflects that this covered individual (CI) was an active duty SPC/E-4 (11B/Infantryman), medically separated for right shoulder pain. The CI began experiencing right shoulder pain after he was thrown away from a blast due to an role-playing game (RPG) that hit the back of a Bradley Fighting Vehicle. The CI's condition could not be adequately rehabilitated to meet the physical requirements of his Military Occupational Specialty (MOS) or satisfy physical fitness standards. He was issued a permanent U3 profile and referred for a Medical Evaluation Board (MEB). The MEB forwarded osteoarthrosis right shoulder condition for Physical Evaluation Board (PEB) adjudication. The MEB also forwarded anxiety; hypermobility syndrome; bunion, right foot; fractured mandible; and sprained wrist, right conditions to the PEB. However, all these conditions met retention standards. The PEB adjudicated the right shoulder pain 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.

<u>CI CONTENTION</u>: The CI elaborated no specific contention in his application.

<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; 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 service Board for Correction of Military Records.

## **RATING COMPARISON:**

| Service Revised PEB – Dated 20080426   |           |        | VA (1 Mo. Post-Separation) – All Effective Date 20080405 |      |        |          |  |
|--|-----------|--------|--|------|--------|----------|--|
| Condition  | Code      | Rating | Condition  | Code | Rating | Exam     |  |
| Right Shoulder Pain  | 5099-5003 | 10%    | Rt Shoulder Impingement Syndrome                         | 5203 | 10%    | 20080509 |  |
| $\downarrow$ No Additional MEB/PEB Entries $\downarrow$  |           |        | Residuals, Bunionectomy, Right Foot                      | 5280 | 10%    | 20080509 |  |
|  |           |        | 0% X 4 / Not Service-Connected x 1                       |      |        | 20080509 |  |
| Combined: 10%  |           |        | Combined: 20%*   |      |        |          |  |
| *Additional conditions added and overall combined rating increased to 60% effective 20091110 (see 20110427 DROD) |           |        |  |      |        |          |  |

## ANALYSIS SUMMARY:

<u>Right (Dominant) Shoulder Pain Condition</u>. 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.

| Right Shoulder ROM   | MEB ~7 Mos. Pre-Sep | VA C&P ~1 Mo. Post-Sep |
|----------------------|---------------------|------------------------|
| (Degrees)            | (20070917)          | (20080509)             |
| Flexion (180 normal) | 180                 | 180                    |
| Abduction (180)      | 180                 | 180                    |
|                      |                     | + Apprehension test.   |
| Comments             | Pain                | + Impingement signs.   |
|                      |                     | + Painful motion       |
| §4.71a Rating        | 10%                 | 10%                    |

The MEB narrative summary (NARSUM), completed 7 months prior to separation, notes the CI had a right shoulder injury in September 2004 while deployed to Iraq. He experienced continuing pain with wearing full gear, but finished his deployment. Physical therapy (PT) and injections were not effective. Surgical consultation did not provide a surgical option. He reported pain throughout 75% of the day, precipitated by running more than a mile and lifting more than 15 pounds. Physical exam found no abnormalities and ROM with pain noted in the chart. The NARSUM also noted an orthopedic consultation diagnosing a genetic hyper mobility syndrome. At the VA Compensation and Pension (C&P) exam, performed a month after separation, the CI reported a progressively worse shoulder condition. Examination revealed increased pain after three repetitive normal ROM summarized in chart above, and positive apprehension and impingement tests.

The Board directs attention to its rating recommendation based on the above evidence. The Board agreed a 10% rating for painful motion or functional impairment was supported by the evidence of the record. The right shoulder ROM in both examinations was non-compensable under the code for limitation of arm motion (5201). There was no clinical and/or radiologic evidence that suggested ankylosis, loss of the humeral head, nonunion, malunion, fibrous union, deformity, nonunion or dislocation of the scapula, or recurrent dislocations of the humerus that would have justified any alternate shoulder code with higher rating potential. 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 right (dominant) shoulder pain condition.

<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. 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 right (dominant) shoulder 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.

<u>RECOMMENDATION</u>: The Board, therefore, recommends that there be no recharacterization of the CI's disability and separation determination, as follows:

| UNFITTING CONDITION            | VASRD CODE | RATING |
|--------------------------------|------------|--------|
| Right (Dominant) Shoulder Pain | 5099-5003  | 10%    |
|                                | COMBINED   | 10%    |

The following documentary evidence was considered:

Exhibit A. DD Form 294, dated 20120710, w/atchs Exhibit B. Service Treatment Record Exhibit C. Department of Veterans' Affairs Treatment Record

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

SUBJECT: Department of Defense Physical Disability Board of Review Recommendation for XXXXXXXXXXXXXXXXX, AR20130003770 (PD201201218)

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