

RECORD OF PROCEEDINGS
PHYSICAL DISABILITY BOARD OF REVIEW

NAME: XXXXXXXXXXXXXXXXXXXX
CASE NUMBER: PD1201653
BOARD DATE: 20130129

BRANCH OF SERVICE: ARMY
SEPARATION DATE: 20020315

SUMMARY OF CASE: Data extracted from the available evidence of record reflects that this covered individual (CI) was an active duty SPC/E-4, (13B/Cannon Crewman), medically separated for chronic right groin pain, subsequent to inguinal hernia repair with mesh. CI underwent a hernia repair in May 2000 with residual chronic right groin pain despite treatment. The chronic right groin pain condition could not be adequately rehabilitated and 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 P3 profile and referred for a Medical Evaluation Board (MEB). The MEB forwarded no other conditions for Informal Physical Evaluation Board (IPEB) adjudication. The IPEB adjudicated the chronic right groin pain condition as unfitting, rated 0%. The CI appealed to the Formal PEB (FPEB), which affirmed the IPEB findings; and was then medically separated with a 0% disability rating.

CI CONTENTION: "The rating of 10% was never a satisfactory rating. I continue to have lower back pain and groin pain."

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 chronic right groin pain meets the criteria prescribed in DoDI 6040.44 for Board purview and is addressed below. The other requested condition, low back pain (LBP), is 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 FPEB – Dated 20020115			VA (# Mos. Pre/Post-Separation) – All Effective Date 20020316			
Condition	Code	Rating	Condition	Code	Rating	Exam
Chronic Right Groin Pain	8777-8730	0%	Nerve Impingement Status Post Right Inguinal Hernia	7338-8530	0%	20030415
↓No Additional MEB/PEB Entries↓			Not Service-Connected x 1			20030415
Combined: 0%			Combined: 0%			

ANALYSIS SUMMARY:

Chronic Right Groin Pain Condition. The MEB narrative summary (NARSUM), dictated 16 October 2001, notes the CI had a right inguinal hernia repair with mesh application in May 2000. After surgery, the CI continued to complain of right inguinal pain possibly secondary to a nerve impingement syndrome in the area. Pain was unalleviated by conservative treatment and injection therapy and limited the CI's military duty to include no running, marching and no field duty. The CI received a permanent profile and medical separation from the service was recommended. The MEB NARSUM physical exam performed on 17 November 2001 noted a well healed post-surgery scar in the right inguinal area with diffuse tenderness to palpation and decreased light touch sensation in the area. No bulge or masses were observed. The leg had normal strength (5/5). At the VA Compensation and Pension (C&P) examination, performed 15 April 2003, 13 months after separation, the CI reported he continued to have pain and numbness in the right inguinal area. The examiner noted that a neurologist diagnosed nerve impingement and the CI was referred to a pain specialist who treated with local steroid and anesthetic injections. Surgical exploration of the nerve was proposed, however the CI declined the intervention. The C&P physical examination revealed a well healed 3 cm scar in the right groin area, barely visible, without any keloid or cicatrization. There was no evidence of recurrence of hernia. Gait was normal.

The Board directs attention to its rating recommendation based on the above evidence. Both the PEB and VA rated the right inguinal hernia condition 0% using different codes. The PEB used codes 8777-8730 ilioinguinal nerve neuralgia rated 0%, the highest rating achievable under this code IAW §4.124. The VA used codes 7338-8530 (inguinal hernia, paralysis ilioinguinal nerve), nerve impingement status post (s/p) right hernia repair. Both the PEB and VA rated analogously to the ilioinguinal nerve, the PEB using the code for ilioinguinal nerve neuralgia (8730) while the VA used ilioinguinal nerve paralysis (8530). No paralysis was present to warrant the 10% rating and both adjudicated a 0% (zero percent) rating. The Board also considered a rating under 7338 for inguinal hernia however a rating of 10% requires hernia operation with recurrence, not supported by the record in evidence. 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 inguinal hernia 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 nerve impingement s/p right inguinal hernia condition and IAW VASRD §4.124a, 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
Nerve Impingement Status Post Right Inguinal Hernia	8777-8730	0%
	COMBINED	0%

The following documentary evidence was considered:

- Exhibit A. DD Form 294, dated 20120606, w/atchs
- Exhibit B. Service Treatment Record
- Exhibit C. Department of Veterans' Affairs Treatment Record

XXXXXXXXXXXXXXXXXXXX, DAF
Acting Director
Physical Disability Board of Review

SFMR-RB

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

SUBJECT: Department of Defense Physical Disability Board of Review Recommendation
for XXXXXXXXXXXXXXXXXXXX, AR20130003820 (PD201201653)

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

XXXXXXXXXXXXXXXXXXXXX
Deputy Assistant Secretary
(Army Review Boards)