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UNITED STATES AIR FORCE BOARD FOR CORRECTION OF MILITARY RECORDS

ADDENDUM TO RECORD OF PROCEEDINGS

IN THE MATTER OF:

DOCKET NUMBER: BC-2016-01899-2

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COUNSEL: NONE

HEARING REQUESTED: YES

APPLICANT'S REQUEST

The Board reconsider her request to have her "Uncharacterized" Entry-Level Separation (ELS) changed to honorable with a medical separation and have her service-connected disabilities added to her DD Form 214, *Certificate of Release of Discharge from Active Duty*.

RESUME OF THE CASE

The applicant is a retired Air Force airman basic (E-1) who on 21 Sep 99, received an "Uncharacterized" ELS with a narrative reason of "Failed Medical/Physical Procurement Standards" after serving 21 days of active duty.

On 21 Sep 17, the Board considered and denied her request to have her discharge and reentry (RE) code changed so she could reenter the military; finding the applicant had provided insufficient evidence of an error or injustice to justify relief. The Board agreed with the Offices of Primary Responsibility (OPR) finding her discharge was within the parameters of the discharge authority. The Board noted she indicated she had a history of asthma since age 12 but did not disclose this information at the Military Entrance Processing Station (MEPS) which interfered with her training and was the basis for her discharge. An error was discovered in the applicant's RE code on her DD Form 214 which was administratively corrected to "2C" which denotes involuntarily separated with an honorable discharge, or entry level separation without characterization of service.

For an accounting of the applicant's original request and the rationale of the earlier decision, see the AFBCMR Letter and Record of Proceedings at Exhibit H.

On 1 Feb 24, the applicant requested reconsideration of her request for an upgrade to honorable and a medical separation with an annotation showing her service-connected disability ratings. She contends a Department of Veterans Affairs (DVA) judge found in favor of her diagnosis of asthma, right knee, acquired psychiatric disorder, depression and anxiety, and migraines are related to and were diagnosed during her time in the military. In support of her reconsideration request, the applicant submitted new evidence, her DVA decisional letters from 2023 and 2024.

The applicant's complete submission is at Exhibit I.

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POC: SAF.MRBC.Workflow@us.af.mil

APPLICABLE AUTHORITY/GUIDANCE

AFI 36-3208, *Administrative Separation of Airmen*, dated 14 Oct 94, describes the authorized service characterizations that were applicable at the time of the applicant's separation.

Honorable. The quality of the airman's service generally has met Air Force standards of acceptable conduct and performance of duty or when a member's service is otherwise so meritorious that any other characterization would be inappropriate.

Entry Level Separation. Airmen are in entry level status during the first 180 days of continuous active military service or the first 180 days of continuous active military service after a break of more than 92 days of active service. Determine the member's status by the date of notification; thus, if the member is in entry level status when initiating the separation action, describe it as an entry level separation unless:

- A service characterization of under other than honorable conditions is authorized under the reason for discharge and is warranted by the circumstances of the case; or
- The Secretary of the Air Force determines, on a case-by-case basis, that characterization as honorable is clearly warranted by unusual circumstances of personal conduct and performance of military duty.

The DD Form 214 is used to record qualifying active-duty service. It provides qualifying airmen that are separating, or retiring, with brief and clear records of their active military service for the time period the document is published. The DD Form 214, *Certificate of Release or Discharge from Active Duty*, Personnel Services Delivery (PSD) Guide, outlines how to prepare a DD Form 214 and what information is annotated on this form. Per Section E, *Specific Procedures*, which outlines specific block by block contents on the DD Form 214, for block 18, *Remarks*, only entries authorized per this section are annotated in this block or unless specifically authorized by AFPC DD Form 214 policy. No where in this section does it list service-connected ratings for disabilities as determined by the DVA as an authorized annotation in this block or in any other section of the DD Form 214.

AIR FORCE EVALUATION

The AFRBA Psychological Advisor completed a review of all available records and finds insufficient evidence to support the applicant's request. From a psychological perspective, the evidence does not support the applicant was unfit for duty during her 21 days in military service. She appears to have been diagnosed with a medical (not psychiatric) condition three days into training. It was determined in the medical narrative summary she did not meet minimum medical standards to enlist, and she should not have been allowed to join the Air Force because of cold urticaria asthma. She was service-connected for anxiety disorder 21 years after her military discharge.

There is no evidence to suggest her mental health condition at the time of service and at discharge was unfitting. There is some evidence to suggest her mental health symptoms increased following her military service in the mental health encounter dated 24 Jan 24. It should be noted the military's Disability Evaluation System (DES), established to maintain a fit and vital fighting force, can by law, under Title 10, U.S.C., only offer compensation for those service incurred diseases or injuries which specifically rendered a member unfit for continued active service and were the cause for career termination; and then only for the degree of impairment present at the time of separation and not based on post-service progression of disease or injury. To the contrary, the DVA, operating under a different set of laws, Title 38, U.S.C., is empowered to offer compensation for any medical condition with an established nexus with military service, without regard to its impact upon a member's fitness to serve, the narrative reason for release from service, or the length time transpired since the date of discharge. The DVA may also conduct periodic reevaluations for the purpose of adjusting the disability rating awards as the level of impairment from a given medical condition may vary (improve or worsen) over the lifetime of the veteran.

As mentioned above, there is no evidence the applicant was unfit for duty from a psychological perspective during her time in service or at discharge. The cause of her career termination was not related to a mental health condition but rather a medical condition. It should also be noted an uncharacterized discharge does not reflect poorly on the applicant's character or service. An uncharacterized discharge is given to individuals who separate prior to completing 180 days of military service or when the discharge action was initiated prior to 180 days of service. This type of discharge does not attempt to characterize service as good or bad. Through no fault of her own, she had a medical condition that was not within enlistment standards.

The applicant is asking for a change to her DD Form 214 to reflect her service-connected disability. The applicant is already service-connected at 100 percent, with 70 percent for a mental health condition (anxiety) by the DVA. No change is needed or possible to her DD Form 214 based on her service connection.

The complete advisory opinion is at Exhibit J.

The AFBCMR Medical Advisor recommends denying the application. The applicant's own report of past health issues being present prior to basic training only lent a significant amount of probative value of her existed prior to service (EPTS) condition. The overall separation process was in accordance with regulatory guidance. It appeared the applicant was not a victim of an error or injustice in her discharge processing. A post-service DVA rating is not synonymous or equivalent to the military's disability evaluation near the time-of-service discharge as described above. The burden of proof is placed on the applicant to submit evidence to support her request. The evidence she did submit was assessed to not support her request for changes in her separation documents.

The applicant is advised the current designation of "Failed Medical Procurement Standards" on her DD Form 214, does not imply she knowingly or fraudulently entered military service. The applicant's own verbally provided history of having the said asthma condition since age 12 in and of itself revealed the pre-existence of the condition prior to service entry. Service aggravation of this pre-existing condition was not applicable. Cold urticaria is a chronic condition causing episodic symptoms of cold-induced wheals (hives) or angioedema (deep swelling) in response to

direct or indirect exposure to cold temperatures. Whereas symptoms of cold urticaria are typically benign and self-limiting, severe systemic anaphylactic reactions are possible. Acquired, atypical, and hereditary forms have been described, each with variable triggers, symptoms (to include asthma), and responses to therapy. In this case, healthcare providers were informed by the applicant herself of the chronic nature of her condition from a young age. Since the Military Department is not equipped to retain individuals during any lengthy healing or rehabilitation process, they are more commonly released from military service; some with the opportunity to reapply following a full and unhindered recovery, if possible. Such conditions commonly result in discharge due to “Failed Medical/Procurement Standards” or as “Erroneous Medical Entry.”

A service member may be administratively discharged, even though related to a medical condition, when in the case of a service member it has been determined a disqualifying medical condition EPTS and has not been permanently aggravated by military service. The applicant was seen for shortness of breath symptoms only three days into basic training and the consideration of the condition being permanently aggravated above the natural (long-term) progression of this condition is not a medically plausible conclusion. Although not found upon enlistment, the applicant would not/did not meet minimum standards for military enlistment. The Medical Advisor has not seen evidence to refute the decision to administratively separate the applicant in 1999.

The complete advisory opinion is at Exhibit K.

APPLICANT’S REVIEW OF AIR FORCE EVALUATION

The Board sent a copy of the advisory opinion to the applicant on 11 Oct 24 for comment (Exhibit L), and the applicant replied on 16 Oct 24. In her response, the applicant contends she was discharged for multiple medical diagnoses during Basic Military Training (BMT). Her DD Form 214 reflects in the narrative section she failed physical and medical procurement standards but does not list her service-connected disabilities in the notes section.

The applicant’s complete response is at Exhibit M.

FINDINGS AND CONCLUSION

1. The application was timely filed.
2. The applicant exhausted all available non-judicial relief before applying to the Board.
3. After reviewing all Exhibits, the Board remains unconvinced the evidence presented demonstrates an error or injustice. The Board concurs with the rationale and recommendation of the AFRBA Psychological Advisor and the AFBCMR Medical Advisor and finds a preponderance of the evidence does not substantiate the applicant’s contentions. The applicant only served 21 days of active service; therefore, the type of separation and character of service are correct as indicated on her DD Form 214. Airmen are given entry level separation with uncharacterized service when they fail to complete a minimum of 180 days of continuous active military service and the Board finds no unusual circumstances of personal conduct and performance of military duty which would

warrant a characterization of honorable. The applicant did have a pre-existing medical condition, cold urticaria asthma, at the time which did not meet accession standards and was the basis for her discharge. Furthermore, the Board noted the applicant’s DVA disability ratings; however, a higher rating by the DVA, based on new and/or current examinations conducted after discharge from service, does not warrant a change to a member’s separation. The DVA is empowered to offer compensation for any medical condition with an established nexus with military service, without regard to its impact upon a member’s fitness to serve, the narrative reason for release from service, or the length of time transpired since the date of discharge. The mere existence of a medical or mental health diagnosis does not automatically determine unfitness and eligibility for a medical separation or retirement. The preponderance of evidence does not support the applicant had any mental health or medical condition which was not determined to have EPTS or was incurred or permanently aggravated by her military service and impacted her ability to reasonably perform the duties of her or her office, grade, rank, or rating. Lastly, service-connected disabilities as determined by the DVA are not listed on the DD Form 214. Therefore, the Board recommends against correcting the applicant’s records.

4. The applicant has not shown a personal appearance, with or without counsel, would materially add to the Board’s understanding of the issues involved.

RECOMMENDATION

The Board recommends informing the applicant the evidence did not demonstrate material error or injustice, and the Board will reconsider the application only upon receipt of relevant evidence not already presented.

CERTIFICATION

The following quorum of the Board, as defined in Department of the Air Force Instruction (DAFI) 36-2603, *Air Force Board for Correction of Military Records (AFBCMR)*, paragraph 2.1, considered Docket Number BC-2016-01899-2 in Executive Session on 20 Nov 24:

 Panel Chair
 Panel Member
 Panel Member

All members voted against correcting the record. The panel considered the following:

- Exhibit H: Record of Proceedings, w/ Exhibits A-G, dated 21 Sep 17.
- Exhibit I: Application, DD Form 149, w/atchs, dated 1 Feb 24.
- Exhibit J: Advisory Opinion, AFRBA Psychological Advisor, dated 8 Jul 24.
- Exhibit K: Advisory Opinion, AFBCMR Medical Advisor, dated 8 Oct 24.
- Exhibit L: Notification of Advisory, SAF/MRBC to Applicant, dated 11 Oct 24.
- Exhibit M: Applicant’s Response, w/atchs, dated 16 Oct 24.

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Taken together with all Exhibits, this document constitutes the true and complete Record of Proceedings, as required by DAFI 36-2603, paragraph 4.12.9.

12/5/2024

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Board Operations Manager, AFBCMR
Signed by: USAF

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