



CUI//SP-MIL/SP-PRVCY

**UNITED STATES AIR FORCE
BOARD FOR CORRECTION OF MILITARY RECORDS**

RECORD OF PROCEEDINGS

IN THE MATTER OF:

Work-Product

DOCKET NUMBER: BC-2022-02131

COUNSEL: NONE

HEARING REQUESTED: YES

APPLICANT'S REQUEST

1. Her DD Form 214, *Certificate of Release or Discharge from Active Duty*, be changed to reflect a separation code of RFJ, which denotes Permanent Disability Retired List or SFJ, which denotes Permanent Disability Retirement.
2. She be assigned a disability rating for tinnitus, asthma, migraine headaches, recurrent sinusitis, cervical spine, and degenerative disc disease.

APPLICANT'S CONTENTIONS

While serving, she had three Medical Evaluation Boards (MEBs) conducted solely for her medical condition of asthma. Her records indicate she had more than one chronic medical condition which included obstructive sleep apnea (OSA), incontinence of urine, and migraines. All of her chronic conditions caused absence from work, exemption from fitness testing, frequent follow-up appointments, medications, pain injections, and placement on quarters several times a year. In 2009, the Department of Veterans Affairs (DVA) awarded her a 50 percent disability rating for her medical condition of asthma and OSA. One year later, the DVA increased her rating to a 100 percent combined disability rating. The MEB should have assigned a rating for all of her medical conditions that the DVA rated.

The applicant's complete submission is at Exhibit A.

STATEMENT OF FACTS

The applicant is a retired Air Force senior master sergeant (E-8).

On 21 Mar 07, AF IMT 618, *Medical Board Report*, indicates the applicant was referred to the Informal Physical Evaluation Board (IPEB) for asthma.

Dated 20 Apr 07, AF Form 356, *Findings and Recommended Disposition of USAF Physical Evaluation Board*, indicates the applicant's medical condition of asthma does not prevent her from reasonably performing the duties of her office, grade, rank, or rating. The IPEB found the applicant fit and recommended she be returned to duty.

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

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On 31 Jan 10, the applicant received an honorable discharge with a separation code of RBD. Her narrative reason for separation is “Vol Retirement: Sufficient Service for Retirement.” She was credited with 26 years, 10 months and 10 days of total active service.

For more information, see the excerpt of the applicant’s record at Exhibit B and the advisory at Exhibit C.

AIR FORCE EVALUATION

The AFBCMR Medical Advisor finds insufficient evidence to support the applicant’s request for a medical retirement. Based on a review of the available records both submitted and those in electronic format, the Medical Advisor opines the applicant, although claiming errors made on behalf of the IPEB, remains in opposition to such claims.

The military’s DES, established to maintain a fit and vital fighting force, can by law, under Title 10, United States Code (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 snapshot time of separation and not based on future progression of injury or illness. On the other hand, operating under a different set of laws (Title 38, U.S.C.), with a different purpose, the DVA is authorized to offer compensation for any medical condition determined service incurred, without regard to and independent of its demonstrated or proven impact upon a service members retainability, fitness to serve, or the length of time since date of discharge. has no nexus to that of the DoD disability criteria that may have led to a medical retirement. The submitted and reviewed evidence were insufficient in proving that she should have received a medical retirement. The objective evidence to prove an inability to perform the duties of her office, rank, rate, or rating, were lacking despite brief intervals of profiling. Therefore, in the absence of compelling evidence to the contrary, the medical advisor finds no solid basis to recommend granting the relief sought in this application.

The complete advisory opinion is at Exhibit C.

APPLICANT’S REVIEW OF AIR FORCE EVALUATION

The Board sent a copy of the advisory opinion to the applicant on 20 Mar 23 for comment (Exhibit D), but has received no response.

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 concludes the applicant is not the victim of an error or injustice. The Board concurs with the rationale and opinion of AFBCMR Medical Advisor and finds a preponderance of the evidence does not substantiate the applicant’s contentions. The Board finds the applicant’s medical condition of asthma did not impair her ability to reasonably perform her military duties in accordance to her office, grade, rank, or rating nor was there evidence her

other medical conditions caused her discharge. She was found fit and recommended she be returned to duty which does not meet the criteria to be processed through medical channels for a medical discharge. 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-2022-02032 in Executive Session on 24 May 23:

Work-Product [Redacted] Panel Chair
[Redacted], Panel Member
Work-Product [Redacted] Panel Member

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

- Exhibit A: Application, DD Form 149, w/atchs, dated 2 Aug 22.
- Exhibit B: Documentary evidence, including relevant excerpts from official records.
- Exhibit C: Advisory Opinion, AFBCMR Medical Advisor, dated 15 Mar 23.
- Exhibit D: Notification of Advisory, SAF/MRBC to Applicant, dated 20 Mar 23.

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.

1/3/2024

Work-Product [Redacted] _____
Board Operations Manager, AFBCMR
Signed by: *Work-Product* [Redacted]