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

### RECORD OF PROCEEDINGS

IN THE MATTER OF:

DOCKET NUMBER: BC-2023-02498

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COUNSEL: NONE

HEARING REQUESTED: NO

### APPLICANT'S REQUEST

His "Uncharacterized" Entry Level Separation (ELS) be upgraded to honorable with a medical separation.

### APPLICANT'S CONTENTIONS

He was injured during training and ultimately discharged for a medical condition with an uncategorized discharge. He was told to visit the local Department of Veterans Affairs (DVA) office to have his record updated to honorable with service-connected injuries; however, he discovered the record was updated to honorable but not with service-connected injuries when attempting to obtain a Certificate of Eligibility (COE) for DVA Home loan.

The applicant's complete submission is at Exhibit A.

### STATEMENT OF FACTS

The applicant is a former Air Force airman first class (E-3).

On 13 Jul 16, the applicant's commander recommended the applicant receive an ELS from the Air Force, under the provisions of AFI 36-3208, *Administrative Separation of Airmen*, paragraph 5.14 for an erroneous enlistment due to the 7 Jul 16 medical narrative summary that found he did not meet the minimum medical standards to enlist due to his medical condition of left ankle stress fracture and vitamin D deficiency. The applicant reported intermittent bilateral knee pain, lower leg, ankle, and feet pain which existed prior to service (EPTS). He was recommended for separation without consideration for a medical waiver.

On 15 Jul 16, the discharge authority directed the applicant be discharged for erroneous enlistment, with an uncharacterized service characterization.

On 18 Jul 16, the applicant received an uncharacterized ELS. His narrative reason for separation is "Failed Medical/Physical Procurement Standards" and he was credited with two months and two days of total active service.

**AFBCMR Docket Number BC-2023-02498**

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Controlled by: SAF/MRB  
CUI Categories: Work-Product  
Limited Dissemination Control: N/A  
POC: [SAF.MRBC.Workflow@us.af.mil](mailto:SAF.MRBC.Workflow@us.af.mil)

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

#### **APPLICABLE AUTHORITY/GUIDANCE**

AFI 36-3208, *Administrative Separation of Airmen*, dated 9 Jul 04, incorporating changes through 24 Jun 16, 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.

**Under Honorable Conditions (General).** If an airman's service has been honest and faithful, this characterization is warranted when significant negative aspects of the airman's conduct or performance of duty outweigh positive aspects of the airman's military record.

**Under Other than Honorable Conditions.** When basing the reason for separation on a pattern of behavior or one or more acts or omissions that constitute a significant departure from the conduct expected of airmen. The member must have an opportunity for a hearing by an administrative discharge board or request discharge in lieu of trial by court-martial.

**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.

#### **AIR FORCE EVALUATION**

The AFBCMR Medical Advisor recommends denying the application finding insufficient evidence to support the applicant's request to change his current separation documents. His own reported history of chronic multi-joint bilateral pain conditions would, if known at the time of his enlistment, disqualify him for service entry. There was no calculated error or rendered injustice committed by the DoD in the applicant's separation proceedings. The applicant's own details of his historical pains only lent a significant amount of probative value of his existed prior to service (EPTS) condition, and the overall separation process was in accordance with regulatory guidance.

The burden of proof is placed on the applicant to submit evidence to support his request. The evidence he did submit was assessed to not support his request for any change in his separation documents.

The Medical Advisor is of the opinion the Air Force followed what it believed to be an appropriate use of established policies for the separation of members, who within the first 180 days of service, demonstrate the inability to complete Basic Military Training (BMT). Unless warranting a referral through the Disability Evaluation System (DES) for completion of a Medical Evaluation Board (MEB) and subsequent fitness and rating determination by a Physical Evaluation Board (PEB), or other basis for discharge, then a service member is released as an ELS, with an “uncharacterized” character of service. This is a discharge that does not attempt to characterize the type of service as either good or bad, but rather simply denotes the service member’s short time in uniform. This brief time constraint reflects an inadequate period to appropriately and fairly judge an individual’s work characteristics because in the first few months of service, a new enlistee’s duties revolve around training; both BMT and technical school, prior to performing their specialized work. Therefore, an uncharacterized character of service is associated with an ELS.

The Board is provided the following extracted definitions taken from AFI 36-3208, Section 5C, *Defective Enlistments*, to further facilitate an informed Board decision. Paragraph 5.13.3 states an erroneous enlistment is one the Air Force should not have accepted, but it does not involve fraud and paragraph 5.13.4 states a fraudulent entry is one involving deliberate deception on the part of the member. Medical circumstances meeting the aforementioned criteria are generally determined to have EPTS and either was not known to the applicant at the time of entry (Erroneous Entry) or was known by the member, but deliberately concealed or misrepresented at the time of entry to military service (Fraudulent Entry).

Addressing the applicant’s pain condition during military service, it is well-known the rigors of physical training during BMT, certain forces (compression, traction, and tension) upon the lower extremities, such as in running and marching on hard surfaces, may precipitate stress changes or even stress fractures along bones such as the tibia (lower leg), calcaneus (heel), malleolus (ankle), and other sites; manifested clinically as pain due to repeated microtrauma involving the richly innervated periosteum (outermost layer of bone) and at points of muscular and tendon attachments. These so-called stress changes are not generally notable on plain X-rays of the involved bone, particularly immediately after an acute injury, but may be seen on a bone scan and or magnetic resonance imaging (MRI) scan; or, if a fracture has occurred, may later be seen on plain X-rays as sclerotic (white areas on X-ray) changes indicated the healing or remodeling of bone process. Some believe the process is a result of poor personal conditioning, and thus, has been categorized as a pre-existing condition, or concluding the individual had a predisposition (or expected natural progression) for developing the clinical manifestations prior to entering military service.

The applicant gradually developed left ankle pain that accompanied a feeling of swelling and numbness/tingling to the side of his foot in the absence of any known or reported trauma during week zero through week one of BMT, specifically on day six of BMT. The record indicates pain relief was achieved through rest. Radiographic evaluation (MRI scan and X-rays) as interpreted by an orthopedist revealed stress reaction about the left ankle without any discrete fracture line.

Despite his enlistment medical history and physical examination (PE) being void of any adverse past issues with body joints or musculoskeletal joint pains, there was ample in-service documentation whereby the applicant himself reported years of such chronic pains to an array of joints to include the ankles and feet. Additionally, documents were in evidence of the applicant's knowledge of symptoms which EPTS. Important in this case is the understanding a deficiency in vitamin D can be a significant factor/contributor in the setting of bony stress reactions and or actual stress fractures. It is not known if the applicant was truly deficient in vitamin D prior to his enlistment, but what is factually known by his own reported history, is having multiple joint pains of a chronic nature long before the start of his military service; and therefore, such condition is considered EPTS. Consequently, the applicant was discharged under the premise, had the Air Force known of the applicant's predisposition (low vitamin D) for developing musculoskeletal and bony pain as well as having knowledge of his reported past and long-term symptomatology, it is likely he would not have been accepted onto active military service; or if so, under a waiver. Under such separation actions for conditions occurring so soon after entering military service, and where the evidence shows the condition existed prior to entering service, the reason for separation may be designated as Erroneous Entry, Failed Medical Procurement Standards, or Fraudulent Entry; the latter reserved for individuals who knowingly failed to disclose a pre-existing medical condition on entering military service. Although the record suggests the applicant's exacerbations of pain persisted over a several week period, despite conservative physical therapy (PT) treatment measures, this is not proof his symptoms represented or were manifestations of permanent service aggravation of his musculoskeletal condition above and beyond its expected natural progression or clinical expression when under strenuous physical activity.

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 15 Apr 24 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 DVA's determination of his service as honorable does not have any impact on what is annotated on his 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 applicant only served two months and two days of active service, therefore, the type of separation and character of service are correct as indicated on his DD Form 214. Additionally, the Board concurs with the rationale and recommendation of the AFBCMR Medical Advisor and finds a preponderance of the evidence does not substantiate the applicant's contentions. Even though his medical processing through the Military Entrance Processing Station (MEPS) did not reveal any adverse past issues with body joints or musculoskeletal joint pains, the Board finds the

applicant's condition was correctly diagnosed as EPTS and was not aggravated by his military service due to his reported years of such chronic pains to an array of joints to include the ankles and feet which most likely indicated a vitamin D deficiency. Therefore, the Board recommends against correcting the applicant's record.

## 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-2023-02498 in Executive Session on 23 May 24 and 30 May 24:

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Panel Chair

, Panel Member

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Panel Member

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

Exhibit A: Application, DD Form 149, dated 5 Jul 23.

Exhibit B: Documentary evidence, including relevant excerpts from official records.

Exhibit C: Advisory Opinion, AFBCMR Medical Advisor, dated 9 Apr 24.

Exhibit D: Notification of Advisory, SAF/MRBC to Applicant, dated 15 Apr 24.

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.

6/6/2024

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Board Operations Manager, AFBCMR  
Signed by: USAF