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

RECORD OF PROCEEDINGS

IN THE MATTER OF:

DOCKET NUMBER: BC-2023-03871

[REDACTED]

COUNSEL: NONE

HEARING REQUESTED: YES

APPLICANT’S REQUEST

He be awarded the Purple Heart Medal.

APPLICANT’S CONTENTIONS

He submitted his request for award of the Purple Heart to Air Force Central Command (AFCENT); however, due to misinterpretation of the original medical documentation, his request was denied. In 2021, he received clarifying medical documentation from the Task Force surgeon for resubmission, but his unit leadership failed to include the new documentation with the resubmitted package. This resulted in a second denial of award of the Purple Heart for Traumatic Brain Injury (TBI) caused by a vehicle borne improvised explosive device (VBIED). After two submissions through AFCENT, he is required to submit his appeal through the Air Force Board for Correction of Military Records (AFBCMR).

In a memorandum for the Board, the applicant further explains that during his deployment in 2019 to Logar Province, Afghanistan, his vehicle was struck by a VBIED with an estimated 250 pounds of explosives. He was medically evacuated and evaluated for TBI. After 48 hours of medical treatment and observation, he was sent back to his outpost to complete a seven-day return to duty progression and nine days after the incident, he was finally cleared for duty.

Air Force Instruction (AFI) 36-2806, *Military Awards: Criteria and Procedures* p. A2.10.1.3.1.1 outlines the requirements for award of the Purple Heart for moderate TBI and states “the chain of command will ensure the diagnosed moderate TBI resulted in a disposition of 'not fit for full duty' by a medical officer for a period of greater than 48 hours based on persistent signs, symptoms, or findings of functional impairment resulting from the concussive event.”

In 2020 he was submitted for award of the Purple Heart, but initial medical documentation did not properly outline the treatment protocol and denied his request because the reviewing officials thought he did not meet the ‘not fit for duty’ for greater than 48 hours criteria. In 2021, a second request for the Purple Heart was submitted after he received additional medical documentation. This documentation verified he was in fact ‘not fit for duty’ for a total of nine days following the explosion exceeding the 48-hour requirement. However, due to an administrative oversight the additional documentation was not included with his appeal package and his request was again denied.

Furthermore in 2022, he sought further treatment for insomnia, irritability, memory issues and word recall and was referred to the Spirt Intrepid Center for treatment and brain mapping in Feb 2023. The brain mapping report concluded that he had a 99.5 percent probability of suffering a

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moderate TBI. The moderate TBI from the explosion is the only head injury he has received in his career.

Due to relevant information not presented for consideration during the last two submissions, he requests the handwritten SF-600, *Chronological Record of Medical Care*, the timeline of the blast injury through treatment, and witness statements be evaluated for approval. His treatment exceeded the 48-hour requirement and additional care three years later, with Occupational Therapy and referrals to a neurologist increasing the TBI from mild to moderate exceed the requirements outlined in AFI 36-2806, paragraph A2.1 0.1.3.1.2.

The applicant's complete submission is at Exhibit A.

STATEMENT OF FACTS

The applicant is an Air Force master sergeant (E-7).

On 17 Dec 19, Special Order G-07494 was published awarding the applicant the Bronze Star Medal for exceptionally meritorious achievement as a Combat Control Journeymen during Operation FREEDOM'S SENTINEL from 25 May 19 to 1 Nov 19. According to an excerpt from the citation, "when his convoy was returning to base, his vehicle was struck by a vehicle borne improvised explosive device filled with 250 pounds of explosives. As his vehicle caught fire, he egressed and ensured his teammates were not seriously injured before controlling overhead assets. While directing five-armed aircraft to provide overwatch, he helped medics take control of the chaotic scene, assisting in the triage of United States military and Afghan civilian casualties."

On 28 Aug 19, the applicant was issued the Air Force Combat Action Medal (AFCAM) for active participation in combat, having been under direct and hostile fire or physically engaging hostile forces with direct and lethal fire, in connection with military operations on 27 Jun 19.

On 16 Oct 20 and 11 May 21, according to a memoranda from 9 AF (AFCENT)/A1, provided by the applicant, his request and his appeal for the Purple Heart was disapproved indicating that review of the supporting documentation and medical records confirmed the incident and injuries sustained, do not meet criteria for award of the Purple Heart.

On 16 Jan 25, the AFPC Recognition Team sent the applicant a letter requesting he provide the AFCENT disapproval memorandums and any additional documentation regarding the applicant's 2020 and 2021 requests for the Purple Heart.

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

APPLICABLE AUTHORITY/GUIDANCE

Air Force Manual (AFMAN) 36-2806, *Awards and Memorialization Program*, dated 10 Jun 19:

A2.10, The medal is awarded to any Service member who is killed or wounded as a result of enemy action. The wounds received must have required treatment by a medical officer. The Purple Heart differs from other decorations in that a member is entitled to the decoration upon the awarding authority determining that the specified award criteria have been met.

A2.10.1.3.1. Examples of enemy-related injuries which clearly justify the award of the Purple Heart include injuries caused by: enemy bullet, shrapnel injuries that require wound closure or have retain foreign bodies, fractures, perforated eardrum, inhalation injuries or burns due to smoke,

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fumes or chemical agents introduced or caused by the enemy, second and third degree burns, moderate or penetrating traumatic brain injuries and concussions resulting in a loss of consciousness.

A2.10.1.3.1.1. When considering award of the Purple Heart for a mild traumatic brain injury or concussion that did not result in the loss of consciousness, ensure the diagnosed mild traumatic brain injury resulted in a disposition of “not fit for full duty” by a medical officer for a period of greater than 48 hours based on persistent signs, symptoms, or findings of functional impairment resulting from the concussive event.

A2.10.1.3.1.2. The following nonexclusive list provides examples of medical treatment for mild traumatic brain injury or concussion that meet the standard of treatment necessary for award of the Purple Heart:

A2.10.1.3.1.2.1. Referral to neurologist or neuropsychologist to treat the diagnosed mild traumatic brain injury or concussion.

A2.10.1.3.1.2.2. Rehabilitation (such as occupational therapy, physical therapy, and so forth) to treat the mild traumatic brain injury or concussion.

A2.10.1.3.1.2.3. Restriction from full duty for a period of greater than 48 hours due to persistent signs, symptoms, or physical finding of impaired brain function due to the mild traumatic brain injury or concussion.

A2.10.1.3.1.3. Combat theater and unit command policies, or medical protocols, mandating rest periods, light duty, or “down time” and/or the administration of pain medication (e.g., acetaminophen, aspirin, or ibuprofen) in the absence of persistent symptoms of impairment following concussive incidents do not constitute qualifying treatment for a concussive injury.

A2.10.1.3.1.4. Treatment of the mild traumatic brain injury or concussive injury is documented in the service member’s medical and/or health record.

AIR FORCE EVALUATION

AFPC/DPSTTC recommends denying the application. After a thorough review of the applicant’s official military personnel record and provided documentation, award of the Purple Heart is unable to be verified. In accordance with DAFMAN 36-2806, *Military Awards: Criteria and Procedures* (18 January 2024), A2.10.1.3.1.1. When considering award of the PH for a mild traumatic brain injury or concussion that did not result in the loss of consciousness, ensure the diagnosed mild traumatic brain injury resulted in a disposition of “not fit for full duty” by a medical officer for a period of greater than 48 hours based on persistent signs, symptoms, or findings of functional impairment resulting from the concussive event.

On 16 Jan 25, correspondence was sent to the applicant requesting additional documentation from the applicant and on 24 Jan 25, the applicant responded and provided a denial memorandum from AFCENT dated 7 Mar 20 and the reconsideration dated 11 May 21. Both memorandums state that the incident/and or injuries sustained do not meet criteria for award of the Purple Heart. Reconsideration from AFCENT dated 11 May 21 states: “On 5 Sep 19, you stated you sustained injuries when your vehicle was struck by an improvised explosive device (JED) estimated at 250lbs. You further stated the blast compromised the driver’s window, which allowed the blast to enter the cab of the truck causing overpressure inside the cab, ejecting you from your seat, hitting the roof and then making contact with others in the truck. Finally, you stated your injuries included

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bleeding from nose, severe pain on forehead, and a laceration on your back. On 6 Sep 19, you were evaluated by unit FS for a mild headache. You had a normal neurological exam, MACE 30/30 (note indicates normal MACE on previous day). You were diagnosed with mTBI. Placed on 24 hours rest and to follow-up the next day. On 7 Sep 19, you were reevaluated by unit FS. Findings were asymptomatic and normal neurologic exam, MACE 30/30. Returned to unit with progression through remaining TBI stages and told to follow-up as needed. Lastly, on DHA3 completed 3 Mar 20, you stated you were not having continued problems related to event.”

The applicant does not have sufficient documentation to indicate the denial of the Purple Heart is an error or injustice. Absent sufficient medical documentation, the applicant does not have required evidence in accordance with DAFMAN 36-2806 to meet the criteria for award of the Purple Heart.

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 18 Mar 25 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 recommendation of AFPC/DPSTTC and finds a preponderance of the evidence does not substantiate the applicant’s contentions. The Board notes that the applicant’s request for the Purple Heart was reviewed by AFCENT on 16 Oct 20 and 11 May 21 who found that the applicant did not meet the criteria for the Purple Heart as his mild TBI conditions did not result in a “not fit for full duty” by a medical officer for a period of greater than 48 hours. However, the applicant contends that not all relevant information was presented for consideration and requests that the updated SF-600, the timeline of the blast injury through treatment, and witness statements be evaluated for approval. The Board reviewed these documents, but unfortunately did not find the evidence sufficient enough to overturn the decision made by AFCENT. Specifically, the SF-600 appears to be a handwritten letter from a medical provider and while the provider states that the applicant was restricted from duty for greater than 48 hours from the concussive event, this letter was signed on 21 Jan 21, which was nearly a year and a half after the event occurred. In addition, it appears that the medical provider provided this recommendation in part based on the SF-600 that was already presented and reviewed by the AFCENT Purple Heart review board. In this regard, the SF-600 does not show that the applicant had a sustained TBI for more than 48 hours, but instead states that his MACE was normal and that the applicant reported no symptoms of headache, nausea, or fogginess. Furthermore, it states that he completed 48 hours of stage 1 rest and that he was counseled on progressing through the remaining stages. It does not show a recommendation for a seven day return to duty, but simply indicates that that he was not slotted for any missions in the next week so he should be able to complete the protocol with no issue. As such, completing a protocol after having a mild TBI is not evidence of persistent signs, symptoms or ongoing injury and does not constitute qualifying treatment for concussive injuries. Finally, the Board notes the undated Quantitative EEG (QEEG) – Brain Mapping Report provided by the applicant; however, this in and of itself does

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not meet the standard of treatment necessary for award of the Purple Heart. 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-2023-03871 in Executive Session on 11 Feb 25 and 24 Jul 25:

- [REDACTED], Panel Chair
- [REDACTED], Panel Member
- [REDACTED] Panel Member

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

- Exhibit A: Application, DD Form 149, w/atchs, dated 27 Nov 23.
- Exhibit B: Documentary evidence, including relevant excerpts from official records.
- Exhibit C: Advisory Opinion, AFPC/DPSTTC, w/atchs, dated 14 Mar 25.
- Exhibit D: Notification of Advisory, SAF/MRBC to Applicant, dated 18 Mar 25.

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.

3/11/2026

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