

ARMY BOARD FOR CORRECTION OF MILITARY RECORDS

RECORD OF PROCEEDINGS

IN THE CASE OF:

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

BOARD DATE: 23 July 2024

DOCKET NUMBER: AR20230013653

APPLICANT REQUESTS:

- award of the Combat Medical Badge (CMB)
- personal appearance hearing before the Board

APPLICANT'S SUPPORTING DOCUMENT(S) CONSIDERED BY THE BOARD:

- DD Form 149 (Application for Correction of Military Record under the Provisions of Title 10, U.S. Code, Section 1552)
- Headquarters, U.S. Army Infantry Center, Permanent Orders E0287, 5 August 2005, with 690th Medical Company (Ground Ambulance) Battle Roster
- 561st Combat Support Battalion Serious Incident Report Follow Up, 5 May 2006
- CMB Narrative, 5 May 2006
- four DA Forms 2823 (Sworn Statements), 6 and 7 June 2006
- DA Form 4187 (Personnel Action), 7 June 2006
- Enlisted Records Brief, 16 November 2007
- DA Form 4187, 31 July 2008
- Headquarters, Tripler Army Medical Center, Memorandum for Record (Letter of Endorsement), 28 October 2008
- Headquarters, Tripler Army Medical Center, Memorandum for Record (Narrative), 28 October 2008
- Memorandum for Record, 20 November 2008
- 561st Corps Support Battalion, 101st Sustainment Brigade, 101st Airborne Division (Air Assault), Shoulder Sleeve Insignia-Former Wartime Service (Combat Patch) Certificate, undated

FACTS:

1. The applicant did not file within the 3-year time frame provided in Title 10, U.S. Code, section 1552(b); however, the Army Board for Correction of Military Records

(ABCMR) conducted a substantive review of this case and determined it is in the interest of justice to excuse the applicant's failure to timely file.

2. The applicant states:

a. On 5 May 2006 while serving as a combat medical specialist on a tactical convoy traveling on Main Supply Route (MSR) Tampa in Iraq, the convoy hit an improvised explosive device (IED), resulting in two casualties. She was the sole medic assigned to the convoy.

b. While still in the IED kill zone and in imminent danger, she treated and stabilized the casualties within 15 meters of the blast. She flawlessly performed her duties as a combat medic. After stabilizing the casualties, she requested a medical evacuation (MEDEVAC) and transferred the casualties to flight medical personnel. Once the damaged vehicle was recovered, she continued the mission with the rest of the convoy.

3. She enlisted in the Regular Army on 12 February 2003. She held military occupational specialty 68W, Health Care Specialist. She deployed to Iraq from 15 September 2003 through 8 March 2004.

4. Headquarters, U.S. Army Infantry Center, Permanent Orders E0287, 5 August 2005, with 690th Medical Company (Ground Ambulance) Battle Roster, show she deployed to Iraq a second time on 7 October 2005.

5. The 561st Combat Support Battalion Serious Incident Report Follow Up, 5 May 2006, states a combat logistics patrol was hit by an IED while traveling north on MSR Tampa en route from Contingency Operating Base Speicher to Q-West Base Complex. The combat logistics patrol reported three Soldiers were injured and medically evacuated to Contingency Operating Base Speicher, 47th Combat Support Hospital, and an M923A2 military cargo truck was damaged.

6. The unsigned narrative for award of the CMB, 5 May 2006, states:

On 05 May 2006, at approximately 2345 hours, [Applicant], a 690th medic, was conducting a tactical convoy with Bravo Battery, 1/321st FAR (Abn) [Battery B, 1st Battalion, 321st Field Artillery Regiment (Airborne)] from FOB [Forward Operating Base] Speicher to Q-West [Qayyarah Airfield West] Base Complex. The convoy was traveling North on MSR Tampa when it was hit by an IED at [map grid coordinates].

After the explosion, the vehicle hit (Gun 1) rolled over and the driver and gunner were ejected. Upon arriving on the scene, [Applicant] dismounted Gun 3, quickly assessed that there were two injured Soldiers, and began medical treatment on

the first casualty. While on the ground still in the kill zone of the IED, the applicant immediately made a sling and applied it to the gunner, who suffered a broken clavicle. She then moved PFC [Private First Class] O____, the driver, to a litter because he continued to go in and out of consciousness. She applied a splint to PFC O____'s broken foot and treated him for shock. [Applicant] initiated intravenous therapy for the driver and ensured that both casualties were stabilized and properly prepared for air evacuation. She requested air MEDEVAC for the injured Soldiers and ensured that they were correctly transferred to the receiving flight medical personnel, without causing further injury.

Through sound judgment, professional competence, proper training, and tenacity of purpose, casualties received proper medical care and no one was further injured from the attack and its aftermath. The applicant's actions are in keeping with the finest traditions of military service and reflect distinct credit upon herself, the 690th Medical Company (GA) [Ground Ambulance], and the United States Army.

7. The four sworn statements from the applicant and members of the convoy, 6 and 7 June 2006, describe the IED incident.
8. The DD Form 4187, 7 June 2006, from the Commander, Battery B, 1st Battalion, 321st Field Artillery Regiment (Airborne), Iraq, recommended the applicant for award of the CMB for her actions on 5 May 2006. Her battalion and brigade commanders endorsed the recommendation. The approval authority section is incomplete.
9. The DD Form 4187, 31 July 2008, from the Commander, Medical Company B, Tripler Army Medical Center, HI, recommended the applicant for award of the CMB for her actions on 5 May 2006. The Tripler Army Medical Center Troop Commander approved the request.
10. The three memoranda for record from the applicant, the former 561st Combat Support Battalion Command Sergeant Major, and the Tripler Army Medical Center Troop Commander, 28 October 2008 and 20 November 2008, describe the events surrounding the IED blast and the applicant's treatment of the casualties.
11. She was honorably discharged on 15 December 2010 to accept a commission. She completed 7 years, 10 months, and 4 days of net active service during this period.
12. She was appointed as a commissioned officer in the Regular Army in the rank/grade of second lieutenant/O-1 on 16 December 2010.
13. The U.S. Army Human Resources Command memorandum for the U.S. Army Training Center and Fort Jackson (Request for Award of the CMB for (Applicant)),

16 May 2019, disapproved the request. The Awards and Decorations Branch Chief determined the documentation submitted in support of the request does not indicate the applicant was rendering medical care or performing medical duties while the unit was engaged in active ground combat.

14. The DA Form 199 (Informal Physical Evaluation Board (PEB) Proceedings), 16 March 2023, shows a PEB found her physically unfit by reason of temporary disability and recommended a disability rating of 100 percent and her placement on the Temporary Disability Retired List with a reexamination during December 2023. The PEB found the disability disposition was based on disease or injury incurred in the line of duty in combat with an enemy of the United States and as a direct result of armed conflict or caused by an instrumentality of war and incurred in the line of duty during a period of war.

15. Headquarters, U.S. Army Garrison, Fort Jackson, Orders 097-1303, 7 April 2023, retired her by reason of temporary physical disability effective 4 July 2023 and placed her on the Temporary Disability Retired List effective 5 July 2023.

16. On 4 July 2023, she retired by reason of temporary physical disability. She completed 12 years, 6 months, and 19 days of net active service during this period and 7 years, 10 months, and 4 days of prior active service.

BOARD DISCUSSION:

1. The Board determined the evidence of record was sufficient to render a fair and equitable decision. As a result, a personal appearance hearing is not necessary to serve the interest of equity and justice in this case.

2. After reviewing the application, all supporting documents, and the evidence found within the applicant's military records, the Board found that relief was not warranted. The applicant's contentions, her military records, and regulatory guidance were carefully considered.

a. The applicant contends that on 5 May 2006 while serving as a combat medical specialist on a tactical convoy traveling on a main supply route in Iraq when the convoy hit an IED resulting in two casualties. She was the sole medic assigned to the convoy. While still in the IED kill zone and in imminent danger, she performed her duties as a combat medic; she treated and stabilized the casualties within 15 meters of the blast. After stabilizing the casualties, she requested a MEDEVAC and transferred the casualties to flight medical personnel. Once the damaged vehicle was recovered, she continued the mission with the rest of the convoy.

b. The applicant held a medical MOS, she served in combat in Iraq from October 2005 to October 2006, and she was assigned to 690th Medical Company (Ground Ambulance). The Board noted that the applicant was awarded the CAB for another incident on 19 December 2005, during that deployment. A Soldier can be awarded the CAB and the CMB (or CIB) for the same qualifying period, provided the criteria for each badge is met. The Board thoroughly reviewed the circumstances of the IED detonation on 5 May 2006 and determined that the documentation submitted in support of this request does not indicate that she was rendering medical care or performing medical duties while the unit was engaged in active ground combat.

BOARD VOTE:

Mbr 1 Mbr 2 Mbr 3

:	:	:	GRANT FULL RELIEF
:	:	:	GRANT PARTIAL RELIEF
:	:	:	GRANT FORMAL HEARING
■	■	■	DENY APPLICATION

BOARD DETERMINATION/RECOMMENDATION:

The evidence presented does not demonstrate the existence of a probable error or injustice. Therefore, the Board determined the overall merits of this case are insufficient as a basis for correction of the records of the individual concerned.

I certify that herein is recorded the true and complete record of the proceedings of the Army Board for Correction of Military Records in this case.

REFERENCES:

1. Title 10, U.S. Code, section 1552(b), provides that applications for correction of military records must be filed within 3 years after discovery of the alleged error or injustice. This provision of law also allows the ABCMR to excuse an applicant's failure to timely file within the 3-year statute of limitations if the ABCMR determines it would be in the interest of justice to do so.

2. Army Regulation 15-185 (Army Board for Correction of Military Records) prescribes policies and procedures for correction of military records by the Secretary of the Army acting through the ABCMR. Board members will review all applications that are properly before them to determine the existence of an error or injustice and direct or recommend changes in military records to correct the error or injustice, if persuaded that material error or injustice exists and that sufficient evidence exists in the record. The ABCMR will decide cases on the evidence of record; it is not an investigative body. The ABCMR begins its consideration of each case with the presumption of administrative regularity. The applicant has the burden of proving an error or injustice by a preponderance of the evidence. The ABCMR may, in its discretion, hold a hearing (sometimes referred to as an evidentiary hearing or an administrative hearing) or request additional evidence or opinions. Applicants do not have a right to a hearing before the ABCMR. The Director or the ABCMR may grant a formal hearing whenever justice requires.

3. Army Regulation 600-8-22 (Military Awards) prescribes Army policy, criteria, and administrative instructions concerning individual and unit military awards.

a. The CMB is awarded to medical department personnel (colonel and below) who are assigned or attached to a medical unit of company or smaller size that is organic to an infantry unit of brigade, regimental, or smaller size which is engaged in active ground combat. Battle participation credit is not sufficient; the infantry unit must have been in contact with the enemy and the Soldier must have been personally present and under fire during such ground combat.

b. On or after 18 September 2001, medical personnel assigned, attached to, or under operational control of any ground combat arms or combat aviation units of brigade or smaller size who satisfactorily perform medical duties while the unit is engaged in active ground combat are eligible for award of the CMB, provided they are personally present and under fire.

//NOTHING FOLLOWS//