

ARMY BOARD FOR CORRECTION OF MILITARY RECORDS

RECORD OF PROCEEDINGS

IN THE CASE OF: [REDACTED]

BOARD DATE: 11 September 2024

DOCKET NUMBER: AR20240007494

APPLICANT REQUESTS: in effect,

- Upgrade of uncharacterized character of service
- Change Separation Code from "JFW" to something else
- Change Reentry Code from "3" to "1"
- Change Narrative Reason for Separation from "Failed Medical/Physical/Procurement Standards" to something else

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

- DD Form 149 (Application for Correction of Military Record)
- DD Form 214 (Certificate of Release or Discharge from Active Duty)
- Self-authored letter
- DA Form 4707 (Entrance Physical Standards Board (EPSBD) Proceedings, 29 June 2020
- Trainee Quarters or Bedrest Instructions, 25 June 2020
- Trainee Quarters or Bedrest Instructions, undated (applicant states 26 June 2020)
- Sick Call Slip, 24 July 2020
- Sick Call Slip, 28 September 2020

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 during basic combat training, he suffered a service-related injury while in basic combat training, leading to his discharge due to the resulting inability to walk within the expected timeframe. Subsequent medical examinations revealed scoliosis, inaccurately measured while on crutches. The paperwork surrounding his discharge misrepresents the situation. citing scoliosis as the reason and

hindering his ability to reenlist without a medical waiver. He requests a correction to accurately reflect the temporary nature of his injury and the opportunity to reenlist without the burden of an inaccurate characterization of his service. Attached are relevant medical records for review.

a. The applicant states in a self-authored letter his aim is to correct the inaccuracies surrounding his discharge from the United States Army, which he believes does not accurately reflect the circumstances leading to his separation from service.

b. He firmly believes that his discharge was a result of a temporary injury incurred during training, and the mischaracterization of his medical condition has had enduring consequences on his ability to serve. He was not discharged for scoliosis or any failed medical standards, but rather for an injury sustained during his first couple days in basic combat training.

c. He was engaged in the cleanup activities following a training activity involving sandbags. Unfortunately, during the process of carrying these sandbags, he tripped on the stairs in the barracks, resulting in a significant hip injury. Despite the pain, his eagerness to serve and commitment to training led him to initially attempt to push through the discomfort.

d. It was only after his drill sergeants observed the visible difficulty, he had in standing and walking that he was ordered to go to sick call for a proper evaluation of his injury. Following their orders, he promptly attended sick call, and as a result, he was immediately issued crutches due to the severity of the hip injury. This sequence of events is corroborated by the sick call form dated 24 July 2020, which states that his drill sergeants instructed him to see Mrs. F. at the Consolidated Troop Medical Center (CTMC).

e. He explained his medical treatment and gave a brief description of his supporting documents submitted as a part of his claim. (The entire letter is attached for review by the board in documents).

3. The applicant underwent an enlistment physical on 27 May 2020. He was found medically qualified.

4. The applicant enlisted in the Regular Army on 22 June 2020.

5. An EPSBD convened on 29 June 2020, for hip pain and difficulty standing. The EPSBD shows:

a. HISTORY OF PRESENT ILLNESS: The service member is a 17-year-old male in reception of initial military training. During controlled isolation he suffered hip pain from

standing in formation. He presented 23 June 2020, for hip pain and was given medication for pain. On 25 June 2020, he presented to Clinic and was sent to Emergency Room due to right hip pain and radiographs were ordered. Results revealed lumbar dextroscoliosis and Spina bifida occulta, incidentally. Hip views detect a subtle subcortical lucency at junction of right femoral head/neck. His lab work revealed rhabdomyolysis.

b. PHYSICAL EXAMINATION: Service member is well nourished, well developed, and appears uncomfortable. Skin is warm and dry. Neck is supple without lymphadenopathy, no thyromegaly. Heart with regular rate and rhythm, no murmurs, rubs, or gallops. Normal S1-S2. Lungs are clear to auscultation bilaterally without adventitious sounds. Abdomen is soft with no tenderness, guarding, or rigidity. His lumbar spine is dextroscoliotic causing an uneven stance. He is unable to stand straight.

c. DIAGNOSTIC STUDIES: L Spine and Right Hip Series; 25 June 2020.  
DIAGNOSIS: Lumbar dextroscoliosis, Spina bifida occulta and rhabdomyolysis.

d. RECOMMENDATIONS: The service member has a disqualifying medical condition that existed prior to enlistment. Please consider expeditiously separating this service member from active duty in accordance with (IAW) Army Regulation (AR) 635-200 (Active Duty Enlisted Administrative Separations), Chapter 5-11 and Department of Defense Instructions 6030.03 5.16 SPINE AND SACROILIAC JOINT CONDITIONS: c. current deviation or curvature of the spine from normal alignment, structure, or function if: (3) It is symptomatic. History of any condition that may reasonably be expected to interfere with the successful performance of military duty or training or limit geographical assignment.

6. The applicant provides:

a. Trainee Quarters or Bedrest Instructions, 25 June 2020, showing he was to be on bedrest for 24 hours. Also, to use crutches, non-weight bearing at all times.

b. Trainee Quarters or Bedrest Instructions, undated (applicant states 26 June 2020) showing he was to be on strict bedrest for 72 hours.

c. Sick Call Slip, 24 July 2020, showing he went to the hospital for scoliosis survey.

d. Sick Call Slip, 28 September 2020, due to his profile being expired, right leg turns purple when standing. His profile was continued and crutches for 7 days.

7. Findings of the EPSBD were approved on 30 June 2020.

8. On 27 October 2020, his commander counseled him due to recommendation for separation IAW AR 635-200 separation of personnel who did not meet procurement medical fitness standards. The applicant agreed.
9. On 2 November 2020, the applicant waived a separation medical examination.
10. On 11 November 2020, the applicant requested to remain in the military.
11. On 18 November 2020, the applicant concurred with the EPSBD proceedings and requested to be discharged from the U.S. Army without delay.
12. On 18 November 2020, after having been advised of his rights to consult with an attorney regarding his administrative separation he waived those rights.
13. On 19 November 2020, his immediate commander recommended that he be separated.
14. On 20 November 2020, the separation authority approved separation from the Army.
15. Accordingly, he was discharged on 7 December 2020. His DD Form 214 shows he completed 5 months and 16 days net active service this period. It also shows:
  - Item 24 (Character of Service): Uncharacterized
  - Item 25 (Separation Authority): AR 635-200, paragraph 5-11
  - Item 26 (Separation Code): JFW
  - Item 27 (Reentry Code): 3
  - Item 28 (Narrative Reason for Separation): Failed Medical/Physical/Procurement Standards
16. The Army rates only conditions determined to be physically unfitting at the time of discharge, which disqualify the Soldier from further military service. The Army disability rating is to compensate the individual for the loss of a military career. The VA does not have authority or responsibility for determining physical fitness for military service. The VA may compensate the individual for loss of civilian employability.
17. Title 38, USC, Sections 1110 and 1131, permit the VA to award compensation for disabilities which were incurred in or aggravated by active military service. However, an award of a VA rating does not establish an error or injustice on the part of the Army.
18. Title 38, CFR, Part IV is the VA's schedule for rating disabilities. The VA awards disability ratings to veterans for service-connected conditions, including those conditions detected after discharge. As a result, the VA, operating under different policies, may

award a disability rating where the Army did not find the member to be unfit to perform his duties. Unlike the Army, the VA can evaluate a veteran throughout his or her lifetime, adjusting the percentage of disability based upon that agency's examinations and findings.

19. MEDICAL REVIEW:

a. The Army Review Boards Agency (ARBA) Medical Advisor was asked to review this case. Documentation reviewed included the applicant's ABCMR application and accompanying documentation, the military electronic medical record (EMR – AHLTA and/or MHS Genesis), the VA electronic medical record (JLV), the electronic Physical Evaluation Board (ePEB), the Medical Electronic Data Care History and Readiness Tracking (MEDCHART) application, the Army Aeromedical Resource Office (AERO), and the Interactive Personnel Electronic Records Management System (iPERMS). The ARBA Medical Advisor made the following findings and recommendations:

b. The applicant is applying to the ADRB requesting changes to his DD 214 which would allow him to reenter the military without a medical waiver. He states:

“During basic combat training, I suffered a service-related injury while in basic combat training, leading to my discharge due to the resulting inability to walk within the expected timeframe. Subsequent medical examinations revealed scoliosis, inaccurately measured while on crutches.

The paperwork surrounding my discharge misrepresents the situation. citing scoliosis as the reason and hindering my ability to reenlist without a medical waiver. I request a correction to accurately reflect the temporary nature of my injury and the opportunity to reenlist without the burden of an inaccurate characterization of my service.”

c. The Record of Proceedings details the applicant's military service and the circumstances of the case. His DD 214 for the period of service under consideration shows he entered the regular Army for initial entry training (IET) on 22 June 2020 and received an uncharacterized discharge on 7 December 2020 under the provisions in paragraph 5-11 of AR 635-200, Active Duty Enlisted Administrative Separations (19 December 2016): Separation of personnel who did not meet procurement medical fitness standards.

d. Paragraph 5-11a of AR 635-200:

“Soldiers who were not medically qualified under procurement medical fitness standards when accepted for enlistment or who became medically disqualified under these standards prior to entry on AD or ADT for initial entry training, may be separated. Such conditions must be discovered during the first 6 months of AD. Such findings will result in an entrance physical standards board. This board, which must be convened within the Soldier’s first 6 months of AD, takes the place of the notification procedure (para 2–2) required for separation under this chapter.”

e. The applicant’s pre-entrance Report of Medical History and Report of Medical Examination show the applicant was in good health, without any significant medical history or conditions identified.

f. The EMR shows the applicant presented with right hip pain and the inability to “tolerate standing in formation for any length of time” on 23 June 2020, the day after entering active duty. The examination was consistent with scoliosis. The applicant was placed on a duty limiting physical profile with the plan that he would get a radiographic scoliosis survey once he was released from isolation (covid precautions).

g. On 25 June 2020, an ambulance was called to his barracks for his right hip pain. Evaluation in the emergency department included a laboratory finding of moderate rhabdomyolysis (a sign of muscle damage or breakdown) and lumbar radiographs which revealed scoliosis. He was treated and released.

h. The scoliosis survey obtained on 24 July 2020 revealed a 29-degree apex right curve of the lumbar spine and a 6.3-centimeter negative coronal balance. He was subsequently referred to an Entry Physical Standards Board (EPSBD) IAW paragraph 5-11 of AR 635-200 for this condition which had existed prior to service.

i. EPSBDs are convened IAW paragraph 7-12 of AR 40-400, Patient Administration. This process is for enlisted Soldiers who within their first 6 months of active service are found to have a preexisting condition which does not meet the enlistment standard in chapter 2 of AR 40-501, Standards of Medical Fitness, but does meet the chapter 3 retention standard of the same regulation. The fourth criterion for this process is that the preexisting condition was not permanently service aggravated.

j. Excerpts from the Entrance Physical Standards Board (EPSBD) Proceedings (DA form 4707) dated 9 March 2018:

“PHYSICAL EXAMINATION: ... His lumbar spine is dextroscoliotic causing an uneven stance. He is unable to stand straight

DIAGNOSIS: Lumbar dextroscoliosis, Spina bifida occulta and rhabdomyolysis

RECOMMENDATIONS: The service member has a disqualifying medical condition that existed prior to enlistment. Please consider expeditiously separating this service member from active duty in accordance with AR 635-200, Chapter 5-11 and DODI 6030.03 [Department of Defense Instruction 6130.03, Volume 1, "Medical Standards for Military Service: Appointment, Enlistment, or Induction, (May 6, 2018)]

5.16 SPINE AND SACROILIAC JOINT CONDITIONS:

'c. Current deviation or curvature of the spine from normal alignment, structure, or function if: (3) It is symptomatic. History of any condition that may reasonably be expected to interfere with the successful performance of military duty or training or limit geographical assignment.'"

k. On 2 July 2020, the Board concluded the applicant's medical condition had existed prior to service, failed medical enlistment standards, was not permanently aggravated by his service, and was not compatible with continued service. On 18 November 2020, the applicant concurred with the board's findings by marking the first of four options: "I concur with these proceedings and request to be discharged from the US Army without delay."

l. 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 his own, he simply had a medical condition which was, unfortunately, not within enlistment standards.

m. It is the opinion of the ARBA Medical Advisor the requested changes to his DD 214 are unwarranted.

#### BOARD DISCUSSION:

1. After reviewing the application, all supporting documents, and the evidence found within the military record, the Board found that relief was not warranted. The Board carefully considered counsel's statement, the applicant's record of service, documents submitted in support of the petition and executed a comprehensive and standard review based on law, policy and regulation. Upon review of the applicant's petition, available military records and medical review, the Board concurred with the advising official finding the requested changes to his DD 214 are unwarranted. The opine noted, the

applicant suffered a service-related injury while in basic combat training, leading to my discharge due to the resulting inability to walk within the expected timeframe.

2. The Board determined there is insufficient evidence to support the applicant's contentions for an upgrade of uncharacterized character of service. The Board noted that an uncharacterized discharge is not derogatory; it is recorded when a Soldier has not completed more than 180 days of creditable continuous active duty prior to initiation of separation. It merely means the Soldier has not served on active duty long enough for his or her character of service to be rated as honorable or otherwise. Evidence of record shows, at the time of separation, documentation supports the narrative reason for separation properly identified on the DD Form 214. As such, the Board determined under liberal consideration changes to the applicant's narrative reason are not warranted. Furthermore, the Board determined there was insufficient evidence of an error or injustice which would warrant a change in the separation code or reentry code. Based on this, the Board denied relief.

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.

[REDACTED]

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 (AR) 635-200 (Active Duty Enlisted Administrative Separations), sets forth the basic authority for the separation of enlisted personnel.

a. Paragraph 5-11 provides that Soldiers who were not medically qualified under procurement medical fitness standards when accepted for enlistment or who became medically disqualified under these standards prior to entrance on active duty or active-duty training or initial entry training will be separated. A medical proceeding, regardless of the date completed, must establish that a medical condition was identified by appropriate medical authority within six months of the Soldier's initial entrance on active duty, that the condition would have permanently or temporarily disqualified the Soldier for entry into the military service had it been detected at that time, and the medical condition does not disqualify the Soldier from retention in the service under the provisions of Army Regulation 40-501, chapter 3. The characterization of service for Soldiers separated under this provision of regulation will normally be honorable but will be uncharacterized if the Soldier is in an entry level status.

b. Paragraph 3-7a states that an honorable discharge is a separation with honor and entitles the recipient to benefits provided by law. The honorable characterization is appropriate when the quality of the member's service generally has met the standards of acceptable conduct and performance of duty for Army personnel or is otherwise so meritorious that any other characterization would be clearly inappropriate.

c. Paragraph 3-9 (Uncharacterized separation) states a separation will be described as an entry level separation if processing is initiated while a member is in entry level status.

d. Section II of the Glossary defines entry level status, for Regular Army members, is the first 180 days of active duty.

3. AR 601-210 (Regular Army and Reserve Components Enlistment Program), governs eligibility criteria, policies, and procedures for enlistment and processing of persons into the Regular Army, the U.S. Army Reserve, and Army National Guard for enlistment per DODI 1304.26. It also prescribes the appointment, reassignment, management, and mobilization of Reserve Officers' Training Corps cadets under the Simultaneous Membership Program. Chapter 4 provides the criteria and procedures for waiverable and non-waiverable separations. Table 3-1, defines reentry eligibility (RE) codes:

a. RE-1 Applies to: Person completing his or her term of active service who is considered qualified to reenter the U.S. Army. Eligibility: Qualified for enlistment if all other criteria are met.

b. RE-3 Applies to: Person who is not considered fully qualified for reentry or continuous service at time of separation, but disqualification is waiverable. Eligibility: Ineligible unless a waiver is granted.

c. RE-4 Applies to: Person separated from last period of service with a non-waiverable disqualification. This includes anyone with a DA imposed bar to reenlistment in effect at time of separation or separated for any reason (except length of service retirement) with 18 or more years of active Federal service. Eligibility: Ineligible for enlistment.

4. AR 635-5-1 (Separation Program Designator (SPD) Codes) provides the specific authorities (regulatory or directive), reasons for separating Soldiers from active duty, and the SPD codes to be entered on the DD Form 214. It identifies the SPD code of "JFW" as the appropriate code to assign enlisted Soldiers who are discharged under the provisions of Army Regulation 635-200, by reason of Failed medical/physical/procurement standards. The SPD Code/RE Code Cross Reference Table shows that a Soldier assigned an SPD Code of "JFW" will be assigned an RE Code of "3." SPD code of "JFF" as the appropriate code to assign enlisted Soldiers who

are discharged under the provisions of AR 635-200 with a narrative reason of "Secretarial Authority." The Secretary of the Army will determine RE code for separations under Secretarial authority. SPD code may be used when HQDA message or other directive authorizes voluntary separation in an individual case or category of cases.

5. Section 1556 of Title 10, U.S. Code, requires the Secretary of the Army to ensure that an applicant seeking corrective action by the Army Review Boards Agency (ARBA) be provided with a copy of any correspondence and communications (including summaries of verbal communications) to or from the Agency with anyone outside the Agency that directly pertains to or has material effect on the applicant's case, except as authorized by statute. ARBA medical advisory opinions and reviews are authored by ARBA civilian and military medical and behavioral health professionals and are therefore internal agency work product. Accordingly, ARBA does not routinely provide copies of ARBA Medical Office recommendations, opinions (including advisory opinions), and reviews to Army Board for Correction of Military Records applicants (and/or their counsel) prior to adjudication.

//NOTHING FOLLOWS//