

IN THE CASE OF: ██████████

BOARD DATE: 27 June 2025

DOCKET NUMBER: AR20240009410

APPLICANT REQUESTS: reconsideration to reverse the U.S. Army Human Resources Command (AHRC) decision denying his request to be awarded the Purple Heart.

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

- DD Form 149 (Application for Correction of Military Record)
- Medical document – Clinical Practice Guidelines for the Treatment of Mild Traumatic Brain Injury – Military Acute Concussion Evaluation (MACE) dated 7 December 2011, which shows:
  - On 7 December 2011, the applicant was evaluated at about 1600, after an improvised explosive device (IED) blast went off and the vehicle door flew open then shut on his leg
  - He indicated that he was not dazed, confused, or saw stars
  - He indicated he did not hit his head, and he was wearing a helmet
  - The document also shows the applicant did not report loss of consciousness or unresponsiveness
  - The applicant's symptoms were balance problems, dizziness, difficulty concentrating and cloudy feeling
- Chronological Record of Medical Care dated 7 December 2011, which shows, the applicant was complaining of right knee pain after an IED blast which resulted in a door opening and slamming on his knee, and he was placed on 24 hours quarters

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:

- He requests reconsideration to be awarded the Purple Heart
- A memorandum in reply of the submission stated there was no record of the incident in the medical records; this may have been because the medical professionals did not place the information in the records upon return from deployment
- He was able to locate forms completed by the medics on site for the incident in his redeployment file
- The forms provide clarity and the understanding that this incident was merely not logged in to his medical records and supports the diagnosis of traumatic brain injury (TBI) and injuries that have followed
- The documents are in support of the previously filed ABCMR case docket number AR20230001098

3. A review of the applicant's service record shows:

- On 17 June 1999, the applicant enlisted in the Regular Army
- He served in Afghanistan from 1 October 2011 to 29 July 2012
- On 1 November 2011, Permanent Order Number 305-03 awarded the applicant the Combat Action Badge, date of incident 3 October 2011
- On 23 February 2021, the AHRC, Chief, Awards and Decorations Branch disapproved the applicant's request for award of the Purple Heart for injuries received while deployed in support of OEF; the AHRC official stated:
  - After a thorough review of the information provided and consultation with the AHRC Office of the Surgeon General, the forwarded recommendation for award of the Purple Heart does not meet the statutory guidance outlined in Army Regulation (AR) 600-8-22 (Military Awards), paragraph 2-8g.c.
  - "To qualify for award of the Purple Heart the wound must have been of such severity that it required treatment, not merely examination, by a medical officer"

4. On 19 July 2023, the Army Review Boards Agency (ARBA) Medical Advisor was asked to review the applicant's previous case. Documentation reviewed included the applicant's ABCMR application and accompanying documentation, the military electronic medical record (EMR – AHLTA and/or MHS Genesis), the Veterans Affairs (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:

- a. The applicant is applying to the ABCMR requesting a Purple Heart for a mild

traumatic brain injury (mTBI). He states:

(1) "This correction of awarding The Purple Heart to 1SG [Applicant] (then SSG [Applicant] at the time of the incident) is based on the attached memorandum from AHRC stating that Service Member (SM) had not been receiving treatment for TBI diagnosis from an improvised explosive device incident in 2011.

(2) The impact of the incident was unknown to the SM due to being knocked unconscious. SM was informed by prior unit members well after the incident who acknowledged and confirmed that he was in fact knocked unconscious from the IED explosion. The former unit members provided sworn statements to confirm their knowledge and involvement.

(3) SM has received a TBI diagnosis, treatment and counseling due to the incident from TBI clinics and supporting agencies prior to and after submission for the award. All guidelines and policies were verified for the awarding of The Purple Heart by SM's unit and medical professionals. After the verification, it was concluded that SM satisfies all requirements for the award."

b. The Record of Proceedings details the applicant's military service and the circumstances of the case.

c. Paragraph 2-8 of AR 600-8-22, Military Awards (15 September 2011), lists the criteria for the awarding of the Purple Heart. Paragraph 2b lists the circumstances under which the injury is eligible for a Purple Heart (enemy action, friendly fire, peace keeping, etc.). Paragraph 2e states the wound and medical care requirements for the award: "A wound is defined as an injury to any part of the body from an outside force or agent sustained under one or more of the conditions listed above. A physical lesion is not required, however, the wound for which the award is made must have required treatment by medical personnel and records of medical treatment for wounds or injuries received in action must have been made a matter of official record.

d. Clarification of the standards for awarding a Purple Heart for a combat related TBI were provided in Army Directive 2011-07 (Awarding the Purple Heart) issued 29 April 2011. While it makes clear a concussion/mTBI may be eligible for the awarding of a Purple heart, paragraph 3 continues to maintain the eligibility criteria of AR 600-8-22: When recommending and considering award of the purple heart, the chain of command will ensure the criteria in paragraph 2-8 of reference 8 is met, and that both diagnostic and treatment factors are present and documented in the Soldier's medical record by a medical officer. Paragraph 4c below defines medical officer. Paragraph 4c: "A medical officer is defined as a physician with officer rank." AR 600-8-22 requires the Soldier to be treated by a military physician or "treated by a medical professional other than a medical officer {e.g., a physician, corpsman, or combat medic} provided a

medical officer includes a statement in the member's medical record that the severity of the wound was such that it would have required treatment by a medical officer if one had been available to provide treatment" (paragraph 2-8c(3)).

e. Several statements from fellow Soldiers attest to the applicant having sustained a brief loss of consciousness following an IED attack on 7 December 2011. One statement included "For the next week or so, SSG [Applicant] did complain of headaches, and he rested more than usual, with dim or no light in his bunk."

f. From an 11 May 2022 Memorandum for Record submitted by CPT [captain] [REDACTED] a physician assistant: The SM outlined above deployed to Afghanistan in 2011 with history of a concussion with brief loss of consciousness on approximately 10 December 2011 following a close proximity IED blast while deployed overseas. He is presenting with headaches, dizziness and balance issues, memory loss with concentration difficulties, and irritability. Patient was referred to the TBI clinic where he did receive treatment for his TBI and his treatment was cut short due to the COVID-19 Pandemic.

g. While these statements validate that the applicant did sustain a TBI, they do not fulfill the requirement for contemporaneous medical documentation in the official record substantiating the injury required treatment by a medical officer. No such documentation was submitted with the application or found in the EMR.

h. From 23 February 2021 memorandum to the applicant from the Chief of the Awards and Decorations Branch at the United States Army Human Resources Command, the AHRC official stated, "after a thorough review of the information provided and consultation with the U.S. Army Human Resources Command Office of the Surgeon General, the forwarded recommendation for award of the Purple Heart does not meet the statutory guidance outlined in Army Regulation 600-8-22 (Military Awards), paragraph 2-8c. The medical documentation provided does not indicate diagnosis of and treatment for a qualifying injury."

i. It is the opinion of the ARBA medical advisor there is currently insufficient documentation in the official record to warrant reversal of AHRC's previous denial of the awarding of the Purple Heart in accordance with AR 600-8-22.

5. On 26 July 2023, ABCMR docket number AR20230001098 shows the Board members voted unanimously to deny the applicant's request for reversal of the AHRC, Award and Decorations Branch denial of award of the Purple Heart. The Board stated:

a. 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 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. The Board considered the witness statements provided by the applicant and the medical documentation. However, upon review of the applicant's petition, available military records, U.S. AHRC Decoration and Awards Branch Denial memorandum and the medical review, the Board concurred with the advising official finding there is currently insufficient documentation in the official record to warrant reversal U.S. AHRC's previous denial of the awarding of the Purple Heart in accordance with AR 600-8-22.

b. The Board agreed there was insufficient evidence that showed the applicant's name on the casualty listing or notification to his family that he had been wounded. There is no medical record showing the applicant received wounds caused by enemy forces that required treatment by medical personnel. Per the regulatory guidance on awarding the Purple Heart, the applicant must provide or have in his service records substantiating evidence to verify that he was injured, the wound was the result of hostile action, the wound must have required treatment by medical personnel, and the medical treatment must have been made a matter of official record.

c. Furthermore, the Board noted, in events involving TBI and other similar injuries, the applicant's record must show that the brain injury or concussion severe enough to cause either loss of consciousness or restriction from full duty due to persistent signs, symptoms, or clinical finding, or impaired brain function for a period greater than 48 hours from the time of the concussive incident. After reviewing the application and all supporting documents, the Board found insufficient medical evidence to meet the regulatory standard for the Purple Heart and thus recommended denying the request for reversal.

#### BOARD DISCUSSION:

1. After reviewing the application, all supporting documents, and the evidence found within the military record, the Board found that relief was warranted. The Board carefully considered the applicant's record of service, documents submitted in support of the petition, medical advisor's review, and executed a comprehensive review based on law, policy, and regulation. The evidence of record shows the applicant enlisted in the Regular Army on 17 June 1999, served in Afghanistan from 1 October 2011 to 29 July 2012 and received the Combat Action Badge on 3 October 2011. On 7 December 2011, the applicant was evaluated at about 1600, after an improvised explosive device (IED) blast went off and the vehicle door flew open then shut on his leg. The Board noted the two sworn statements attesting to the applicant combat injury, that he lost consciousness and was bedridden for a week. The Board also noted the statement from a physician assistant, which states he deployed to Afghanistan in 2011 with history of a concussion with brief loss of consciousness on approximately 10 December 2011

following a close proximity IED blast while deployed overseas. He is presenting with headaches, dizziness and balance issues, memory loss with concentration difficulties, and irritability. Patient was referred to the TBI clinic where he did receive treatment for his TBI. The Board did not concur with the medical advisor's review; they indicated there was sufficient enough documentation to support the award of the Purple Heart for his TBI. The Board determined the applicant met the criteria for award of the Purple Heart.

BOARD VOTE:

Mbr 1      Mbr 2      Mbr 3

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

BOARD DETERMINATION/RECOMMENDATION:

The Board determined the evidence presented is sufficient to warrant amendment of the ABCMR's decision in Docket Number AR20230001098 on 26 July 2023. As a result, the Board recommends that all Department of the Army records of the individual concerned be corrected by amending the applicant's record to show he was awarded the Purple Heart for injuries incurred on 10 December 2011, while deployed in Afghanistan.

8/15/2025

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

a. The Purple Heart is awarded to any member of an Armed Force of the United States under the jurisdiction of the Secretary of the Army, who, after 5 April 1917, has been wounded, killed, or who has died or may hereafter die of wounds received, under any of the following circumstances:

- In any action against an enemy of the United States
- In any action with an opposing armed force of a foreign country in which the Armed Forces of the United States are or have been engaged
- While serving with friendly foreign forces engaged in an armed conflict against an opposing armed force in which the United States is not a belligerent party
- As the result of an act of any such enemy or opposing Armed Forces
- As the result of an act of any hostile foreign force
- After 7 December 1941, certain rules apply to friendly fire
- On or after 7 December 1941, certain rules apply to Prisoners of War

b. To qualify for award of the Purple Heart the wound must have been of such severity that it required treatment, not merely examination, by a medical officer. A wound is defined as an injury to any part of the body from an outside force or agent. A physical lesion is not required.

(1) Treatment of the wound will be documented in the member's medical and/or health record.

(2) Award may be made for a wound treated by a medical professional other than a medical officer provided a medical officer includes a statement in the member's medical record that the severity of the wound was such that it would have required treatment by a medical officer if one had been available to provide treatment.

(3) A medical professional is defined as a civilian physician or a physician extender. Physician extenders include nurse practitioners, physician assistants, and other medical professionals qualified to provide independent treatment (to include Special Forces medics). Medics (such as combat medics – military occupational specialty 68W) are not physician extenders.

(4) A medical officer is defined as a physician with officer rank. The following are medical officers: (a) An officer of the medical corps of the Army; (b) An officer of the medical corps of the U.S. Navy; (c) An officer in the U.S. Air Force designated as a medical officer in accordance with Title 10, United States Code, section 101.

c. Examples of enemy-related injuries which clearly justify award of the Purple Heart are as follows:

- Injury caused by enemy bullet, shrapnel, or other projectile created by enemy action
- Injury caused by enemy emplaced trap, mine, or other improvised explosive device
- Injury caused by chemical, biological, or nuclear agent released by the enemy
- Injury caused by vehicle or aircraft accident resulting from enemy fire
- Smoke inhalation injuries from enemy actions that result in burns to the respiratory tract
- Concussions (and/or mild traumatic brain injury (mTBI)) caused as a result of enemy-generated explosions that result in either loss of consciousness or restriction from full duty due to persistent signs, symptoms, or clinical finding, or impaired brain function for a period greater than 48 hours from the time of the concussive incident

d. Examples of injuries or wounds which clearly do not justify award of the Purple Heart are as follows:

- Frostbite (excluding severe frostbite requiring hospitalization from 7 December 1941 to 22 August 1951)
- Trench foot or immersion foot
- Heat stroke
- Food poisoning not caused by enemy agents
- Exposure to chemical, biological, or nuclear agents not directly released by the enemy
- Battle fatigue, neuro-psychosis, and post-traumatic stress disorders
- Disease not directly caused by enemy agents
- Accidents, to include explosive, aircraft, vehicular, and other accidental wounding not related to or caused by enemy action
- Self-inflicted wounds, except when in the heat of battle and not involving gross negligence
- First degree burns
- Airborne (for example, parachute/jump) injuries not caused by enemy action.
- Hearing loss and tinnitus (for example: ringing in the ears, ruptured tympanic membrane)
- Mild traumatic brain injury (mTBI) that does not result in loss of consciousness or restriction from full duty for a period greater than 48 hours due to persistent signs, symptoms, or physical finding of impaired brain function

- Abrasions or lacerations (unless of a severity requiring treatment by a medical officer)
- Bruises or contusions (unless caused by direct impact of the enemy weapon and severe enough to require treatment by a medical officer).
- Soft tissue injuries (for example, ligament, tendon or muscle strains, sprains, and so forth)

2. Army Regulation 15–185 (Army Board for Correction of Military Records) prescribes the policies and procedures for correction of military records by the Secretary of the Army, acting through the Army Board for Correction of Military Records (ABCMR). In pertinent part, it states that 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 will decide cases based on the evidence of record. It is not an investigative agency.

//NOTHING FOLLOWS//