ARMY BOARD FOR CORRECTION OF MILITARY RECORDS

RECORD OF PROCEEDINGS

IN THE CASE OF: [redacted]

BOARD DATE: 20 August 2025

DOCKET NUMBER: AR20240011197

APPLICANT REQUESTS: correction of his DD Form 214 (Certificate of Release or Discharge from Active Duty) to show award of the Purple Heart.

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

- DD Form 149 (Application for Correction of Military Record)
- Self-authored letter, undated
- Record Management System Automatic Record Brief
- Permanent Orders 332-4, 28 November 2006
- Permanent Orders 332-8, 28 November 2006
- Memorandum, Combat Action Badge, 11 July 2007
- Permanent Orders 296-093, 23 October 2007
- two-DA Form 7809 (Summary of Care by Non-Military Medical Provider), 14 September 2021
- DA Form 4187 (Personnel Action), 10 June 2022
- Narrative Summary MEBROC, Camp Atterbury, Indiana, 27 Mar 2024
- Memorandum, U.S. Army Human Resources Command, 19 September 2023, 10 April 2024
- Department of Veterans Affairs (VA), Rating Decision letter, 30 April 2024
- DA Form 199 (Informal Physical Evaluation Board (PEB) Proceedings), 8 May 2024
- Orders Number 131-13, 10 May 2024
- Department of the Army Orders 0008126962.00 dated 14 May 2024
- Department of VA letter, 5 August 2024
- DD Form 214
- two-Character Witness Statements, 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. His initial request for award of the Purple Heart was denied by the Human Resource Command (HRC) due to insufficient evidence of treatment. The determination was made without consideration to the understanding of his Traumatic Brain Injury (TBI). He fought the medical retirement administration for nearly three years to prove he sustained a TBI. He was medically retired from service with a 90% disability rating for the TBI he suffered during combat in Iraq of 2007.

b. He would like consideration of the entire body of evidence, medical opinions, and determination collected during his years in the Integrated Disability Evaluation System (IDES) process to determine if he qualifies for the Purple Heart.

3. The applicant provided a self-authored letter, undated, that states:

a. He recognizes the appeal packet and statement are far removed from the event that caused his TBI in 2007. He did not receive medical treatment because this was before a TBI diagnostic protocol was common practice. In 2006/2007 the Army did not recognize, the severity and impact that a TBI has on an individual's health. Invisible injuries, such as TBI were not eligible for the Purple Heart That missing knowledge gap prevented his chain of command from documenting the injuries. The documentation he has provided is consistent among medical professionals, the VA, and the Army of a TBI. On 10 June 2024 he was medically retired from the Army due to injuries secondary to his TBI.

b. He sustained a TBI during an attack on Joint Security Station Bridge in Iraq on 27 May 2007. He was in the command post with three other Soldiers when a suicide vehicle-borne improvised explosive device within 100 meters detonated on the bridge. The violence of the explosion was so massive his command reported it shaking the buildings 14-miles away. They were awarded the Combat Action Badge due to this attack.

c. Initially the VA required additional testing, evidence to connect his TBI to his service. Once his quality of life deteriorated, he began seeking treatment and submitted supplemental VA disability claims that in 2021 resulted in a service-connected disability rating.

d. The TBI changed his life. It is harder to do things he took for granted and interact with people. In the past few years, he began to experience relief through intensive support and treatment from a VA medical team including primary care, neurologists, psychiatry, counselors, physical therapy, and case management working together trying and adjusting treatments. Every day, he takes a combination of medications and undergoes a variety of preventative treatments, in an attempt to manage daily symptoms.

3. The applicant provides:

a. A memorandum, 11 July 2007, completed by the applicant that shows a narrative of the incident that occurred in Iraq on 27 May 2007.

b. Orders Number 296-093, 23 October 2007, that shows the applicant was awarded the Combat Action Badge, for a period of service on 27 May 2007, for actively engaging or being engaged by the enemy.

c. Two DA Form's 7809 (Summary of Care by Non-Military Medical Provider), 14 September and 5 November 2021 that shows the applicant was treated by a non-military physician for depression, post-traumatic stress disorder (PTSD), seizures, and high blood pressure.

d. A memorandum, 19 September 2023 issued by HRC that shows his migraines and PTSD secondary to MTBI are considered in in line of duty (LOD).

e. Narrative Summary issued by Camp Atterbury, Indiana, Medical Evaluation Board Remote Operating Center shows in part that the applicant was diagnosed with PTSD and migraines, he did not meet retention standards.

f. A memorandum issued by HRC, 10 April 2024, shows in part that the applicant was denied the Purple Heart due to not meeting the statutory guidance in Army Regulation 600-8-22 (Military Awards), paragraph 2-7c. His wounds were not severe enough to require additional treatment by a medical officer at the time of the injury, nor were they documented in his medical record

g. A VA rating decision letter, 30 April 2024 that shows the applicant was service connected at 70% for PTSD with persistent depressive disorder, generalized anxiety disorder, insomnia disorder, alcohol use disorder and TBI; and 50 percent for migraine including migraine variants.

h. A DA Form 199 (Information Physical Evaluation Board (PEB Proceedings) shows a PEB convened on 3 May 2024, the applicant was found unfit to continue active duty, and he received a rating of 90% for PTSD and migraines.

i. Order Number 131-13, 10 May 2024 placed the applicant on the Temporary Disability Retirement List (TDRL) effective 10 June 2024. It further states that his disability resulted from a combat related injury.

j. Two witness statements that shows the following:

(1) Sergeant First Class (Retired) J____ P____ Jr., undated states him and the applicant were in the building at the time the JSS Bridge was attacked. They removed their personal protective equipment (PPE) gear to cool down and take a break. The blast blew all the windows out and most of the wall. Everything and everyone were blown to the back of the building. There was equipment on the applicant, and he assisted another Soldier in removing the debris off the applicant.

(2) Lieutenant Colonel K____ C____, undated, states he was the applicant's battery commander at the time of the attack. He arrived from the bridge's east about an hour after the attack. He witnessed heavy equipment and storage containers had fallen from shelves and were scatted inside the building. The structure was no longer usable. The medic only evaluated the visible injuries at the time of the incident.

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

a. The applicant has prior service in the Illinois Army National Guard.

b. The applicant accepted the oath of office as a Reserve Commissioned Officer on 17 December 2005.

c. His DD Form 214 shows he entered active duty on 16 January 2006.

d. On 30 June 2013, he was honorably released from active duty. The DD Form 214 shows he completed 7 years, 5 months and 16 days of active service. It further shows in:

- item 13 (Decoration, Medal, Badges, Citations and Campaigns Ribbons Awarded or Authorized) – award of the Combat Action Badge; however, award of the Purple Heart is not listed
- item 18 (Remarks) – shows his service in Iraq from 15 January 2007 to 1 April 2008 and from 1 October 2008 to 23 December 2008

5. His service record is void of orders or a certificate showing he was awarded the Purple Heart.

BOARD DISCUSSION:

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 and executed a comprehensive and standard review based on law, policy and regulation. The Board determined there is sufficient evidence the applicant received wounds caused by enemy forces that required treatment by medical personnel. The governing regulation provides that for award of the Purple Heart, evidence provided must indicate he suffered, as a result of hostile action, a concussion or TBI so disabling as 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 incident. The Board noted that protocols have been developed to address medical care following TBIs and award of the Purple Heart. The Board agreed the witness statements and his medical documentation is sufficient evidence to grant relief.

BOARD VOTE:

Mbr 1	Mbr 2	Mbr 3	
XX	XX	XX	GRANT FULL RELIEF
:	:	:	GRANT PARTIAL RELIEF
:	:	:	GRANT FORMAL HEARING
:	:	:	DENY APPLICATION

BOARD DETERMINATION/RECOMMENDATION:

The Board determined the evidence presented is sufficient to warrant a recommendation for relief. As a result, the Board recommends that all Department of Army records of the individual concerned be corrected by awarding him the Purple Heart for wounds received in Iraq on 27 May 2007 and adding the medal to his DD Form 214 for the period ending 30 June 2013.

[redacted]

X //SIGNED//

CHAIRPERSON

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 600-8-22 (Military Awards), currently in effect, prescribes Army policy, criteria, and administrative instructions concerning individual and unit military awards. It provides that the Purple Heart is awarded for a wound sustained in action against an enemy or as a result of hostile action. Substantiating evidence must be provided to verify the wound was the result of hostile action, the wound must have required treatment by a medical officer, and the medical treatment must have been made a matter of official record. 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-placed trap or mine
- Injury caused by enemy-released chemical, biological, or nuclear agent.
- Injury caused by vehicle or aircraft accident resulting from enemy fire.
- Concussion injuries caused, as a result of enemy-generated explosions
- Mild TBI 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

3. Military Personnel (MILPER) Message Number 11-125, issued by the U.S. Army Human Resources Command, dated 29 April 2011, stated the Secretary of the Army had approved Army Directive 2011-07 (Awarding the Purple Heart). The directive provides clarifying guidance to ensure the uniform application of advancements in medical knowledge and treatment protocols when considering recommendations for award of the Purple Heart for concussions (including mild traumatic brain and concussive injuries that do not result in a loss of consciousness). The U.S. Army HRC has verified that award of the Purple Heart for a TBI injury is retroactive only to 11 September 2001.

4. 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//