ARMY DISCHARGE REVIEW BOARD CASE REPORT AND DIRECTIVE
AR20220000058

1. Applicant's Name: [redacted]

a. Application Date: 28 September 2021

b. Date Received: 30 September 2021

c. Counsel: None

2. REQUEST, ISSUES, BOARD TYPE, AND DECISION:

a. Applicant Requests: The current characterization of service for the period under review is general (under honorable condition). The applicant requests an upgrade to honorable.

b. Applicant Contention(s)/Issue(s): The applicant requests relief contending, in effect, requests reconsideration by the Army Discharge Review Board for an upgrade from general (under honorable conditions) to honorable. The applicant's medical records document a diagnosis of General Anxiety Disorder and Attention Deficit Hyperactive Disorder (ADHD) during Army service, with anxiety as principal condition. A nursing education program amplified these disorders through extreme stress, rigid requirements, and emotional trauma. An instructor and assistant director singled out the applicant, posing repeated questions until an incorrect response, assigning the most challenging instructors, and imposing unfair treatment. This conduct generated severe anxiety, insomnia, inattention, impaired decision-making, and overall decline in mental and physical health. The applicant endured constant dread before clinical rotations and sustained elevated anxiety until program dismissal prevented completion. During the discharge meeting, the applicant informed assistant director of emotional trauma exceeding childhood sexual abuse by a parent. Physicians diagnosed applicant with General Anxiety Disorder and initiated Effexor, marking first psychotropic medication use. Under physician orders after discharge, medication regimen expanded to include Wellbutrin, Buspirone, and Propranolol. Enclosed medical records cover treatment during service and following separation.

c. Board Type and Decision: In a records review conducted on 5 March 2026, and by a 3-0 vote, the Board determined that, after reviewing the applicant's statement, service record, the nature of the misconduct, and the in-service behavioral health diagnoses that mitigated the positive D-Amphetamine test, the characterization of service was inequitable and warranted an upgrade to Honorable. The Board voted not to change the narrative reason and separation code as the reasons were proper and equitable. Please see **Board Discussion and Determination** section for more detail regarding the Board's decision. Board member names are available upon request.

3. DISCHARGE DETAILS:

a. Reason / Authority / Codes / Characterization: Unacceptable Conduct / AR 600-8-24, Chapter 4-2B / JNC / General (Under Honorable Conditions)

b. Date of Discharge: 19 December 2012

c. Separation Facts:

(1) Date of Notification of Intent to Separate: 5 June 2012

(2) Basis for Separation: The applicant was required to Show Cause for misconduct and moral or professional dereliction. The action was based on the following specific reasons or elimination: On 7 July 2011, the applicant submitted a urine sample during a Command Directed

Unit Urinalysis Inspection (UUL), which later tested positive for D-Amphetamine. A Medical Review Officer determined the applicant did not have a valid prescription for a drug which could have caused the positive urinalysis result, and the applicant did not have a legitimate use for the drug. The applicant provided a false statement to a special agent of the Criminal Investigation Division stating the applicant did not use amphetamine. The applicant knew this statement to be false and later confessed to using Adderall from an expired prescription. Conduct unbecoming of an officer as indicated by the above-referenced misconduct.

(3) Board of Inquiry (BOI) Date: The applicant was a probationary officer and was not entitled to a board of inquiry.

(4) Legal Consultation Date: NIF

(5) GOSCA Recommendation Date / Characterization: 4 May 2012 / General (Under Honorable Conditions)

(6) DA Board of Review for Eliminations: On 20 November 2012, the Army Board of Review for Eliminations considered the GOSCA's request to involuntary separate the applicant for unacceptable conduct in accordance with AR 600-8-24, Chapter 4-2b.

(7) DASA Review Board Decision Date / Characterization: 26 November 2012 / General (Under Honorable Conditions)

4. SERVICE DETAILS:

a. Date / Period of Appointment: 17 February 2008 / Indefinite

b. Age at Appointment / Education: 39 / Master's Degree

c. Highest Grade Achieved / AOC / Total Service: O-3 / 66H 8A, Medical Surgical Nurse, / 4 years, 10 months, 3 days

d. Prior Service / Characterizations: USAR (NIF)

e. Overseas Service / Combat Service: None

f. Awards and Decorations: NDSM, GWOTSM, ASR

g. Performance Ratings: 17 February 2008 – 16 February 2009 **/** Best Qualified
17 February 2009 – 29 August 2012 / Best Qualified

h. Disciplinary Action(s) / Evidentiary Record: Electronic Copy of Specimen Custody Document – Drug Testing, 1 August 2011, indicates the applicant tested positive for DAMP 3181 (D-Amphetamine) during an Inspection Random (IR) urinalysis testing conducted on 7 July 2011.

The CID Report of Investigation - Initial Final, 23 April 2012, indicates the investigation found probable cause to believe the applicant committed the offense of Wrongful Use of Controlled Substance when the applicant knowingly consumed Adderall, which the applicant did not have a valid prescription for and subsequently tested positive on a UUI. The applicant committed the offense of False Official Statement, when the applicant provided a written statement to this office which the applicant knew to be false.

General Officer Memorandum of Reprimand, 4 May 2012, reflects the applicant was reprimanded for misconduct and actions by the applicant's wrongful use of amphetamine and making a false official statement. On 7 July 2011, the applicant submitted a urine sample during a Command Directed Unit Urinalysis Inspection, which later tested positive for O-Amphetamine. A Medical Review Officer determined the applicant did not have a valid prescription for a drug which could have caused the positive urinalysis result. Additionally, the applicant provided a false statement to a special agent of the Criminal Investigation Division stating, may have taken Adderall by mistake instead of Concerta. The applicant knew this statement to be false and later admitted to intentionally using Adderall from an expired prescription. The applicant's unbecoming conduct and extremely poor judgment discredits the service, violates military laws and regulations, and falls well short of the expectations of an officer in the United States Army. It is also disturbing that you, as an Army Nurse, would have in your possession and use medication from an expired prescription.

i. Lost Time / Mode of Return: None

j. Behavioral Health Condition(s): The following documents have been provided to the ARBA Medical Advisor, if applicable. See "**Board Discussion and Determination**" for Medical Advisor Details.

(1) Applicant provided: Chronological Record of Medical Care, 4 November 2010, reflects a diagnosis of Anxiety disorder NOS and ADHD, predominantly inattentive type.

Note from Deaconess Health Systems, 10 June 2018, reflects a diagnosis of anxiety.

(2) AMHRR provided: Medical note, from S.G. J. MD., 17 June 2010, reflects a diagnosis of Attention deficit disorder with difficulty concentrating.

5. APPLICANT-PROVIDED EVIDENCE: Application for the Review of Discharge; self-authored letter; ARBA letter; medical records.

6. Post Service Accomplishments: The applicant sought treatment for mental health.

7. STATUTORY, REGULATORY AND POLICY REFERENCE(S):

a. Section 1553, Title 10, United States Code (Review of Discharge or Dismissal) provides for the creation, composition, and scope of review conducted by a Discharge Review Board(s) within established governing standards. As amended by Sections 521 and 525 of the National Defense Authorization Act for Fiscal Year 2020, 10 USC 1553 provides specific guidance to the Military Boards for Correction of Military/Naval Records and Discharge Review Boards when considering discharge upgrade requests by Veterans claiming Post Traumatic Stress Disorder (PTSD), Traumatic Brain Injury (TBI), sexual trauma, intimate partner violence (IPV), or spousal abuse, as a basis for discharge review. The amended guidance provides that Boards will include, as a voting board member, a physician trained in mental health disorders, a clinical psychologist, or a psychiatrist when the discharge upgrade claim asserts a mental health condition, including PTSD, TBI, sexual trauma, IPV, or spousal abuse, as a basis for the discharge. Further, the guidance provides that Military Boards for Correction of Military/Naval Records and Discharge Review Boards will develop and provide specialized training specific to sexual trauma, IPV, spousal abuse, as well as the various responses of individuals to trauma.

b. Office, Secretary of Defense memorandum (Supplemental Guidance to Military Boards for Correction of Military/Naval Records Considering Discharge Upgrade Requests by Veterans Claiming Post Traumatic Stress Disorder), 3 September 2014, directed the Service Discharge

Review Boards (DRBs) and Service Boards for Correction of Military/Naval Records (BCM/NRs) to carefully consider the revised PTSD criteria, detailed medical considerations and mitigating factors when taking action on applications from former service members administratively discharged UOTHC and who have been diagnosed with PTSD by a competent mental health professional representing a civilian healthcare provider in order to determine if it would be appropriate to upgrade the characterization of the applicant's service.

c. Office, Under Secretary of Defense memorandum (Clarifying Guidance to Military Discharge Review Boards and Boards for Correction of Military/Naval Records Considering Requests by Veterans for Modification of their Discharge Due to Mental Health Conditions, Sexual Assault, or Sexual Harassment), 25 August 2017 issued clarifying guidance for the Secretary of Defense Directive to DRBs and BCM/NRs when considering requests by Veterans for modification of their discharges due in whole or in part to mental health conditions, including PTSD; Traumatic Brain Injury; sexual assault; or sexual harassment. Boards are to give liberal consideration to Veterans petitioning for discharge relief when the application for relief is based in whole or in part to those conditions or experiences. The guidance further describes evidence sources and criteria and requires Boards to consider the conditions or experiences presented in evidence as potential mitigation for misconduct that led to the discharge.

d. Office, Under Secretary of Defense memorandum (Guidance to Military Discharge Review Boards and Boards for Correction of Military/Naval Records Regarding Equity, Injustice, or Clemency Determinations), 25 July 2018 issued guidance to Military DRBs and BCM/NRs regarding equity, injustice, or clemency determinations. Clemency generally refers to relief specifically granted from a criminal sentence. However, the guidance applies to more than clemency from a sentencing in a court-martial; it also applies to other corrections, including changes in a discharge, which may be warranted based on equity or relief from injustice.

(1) This guidance does not mandate relief but rather provides standards and principles to guide Boards in application of their equitable relief authority. In determining whether to grant relief on the basis of equity, injustice, or clemency grounds, DRBs shall consider the prospect for rehabilitation, external evidence, sworn testimony, policy changes, relative severity of misconduct, mental and behavioral health conditions, official governmental acknowledgement that a relevant error or injustice was committed, and uniformity of punishment.

(2) Changes to the narrative reason for discharge and/or an upgraded character of service granted solely on equity, injustice, or clemency grounds normally should not result in separation pay, retroactive promotions, and payment of past medical expenses or similar benefits that might have been received if the original discharge had been for the revised reason or had the upgraded service characterization.

e. Army Regulation 15-180 (Army Discharge Review Board), dated 25 September 2019, sets forth the policies and procedures under which the Army Discharge Review Board is authorized to review the character, reason, and authority of any Servicemember discharged from active military service within 15 years of the Servicemember’s date of discharge. Additionally, it prescribes actions and composition of the Army Discharge Review Board under Public Law 95-126; Section 1553, Title 10 United States Code; and Department of Defense Directive 1332.41 and Instruction 1332.28.

f. Army Regulation 600-8-24 (Officer Transfers and Discharges) sets forth the basic authority for the separation of commissioned and warrant officers.

(1) Paragraph 1-23 provides the authorized types of characterization of service or description of separation.

(2) Paragraph 1-23a, states an officer will normally receive an honorable characterization of service when the quality of the officer's service has met the standards of acceptable conduct and performance of duty, or the final revocation of a security clearance under DODI 5200.02 and AR 380-67 for reasons that do not involve acts of misconduct for an officer.

(3) Paragraph 1-23b, states an officer will normally receive a general (under honorable conditions) characterization of service when the officer's military record is satisfactory but not sufficiently meritorious to warrant an honorable discharge. A separation under general (under honorable conditions) normally appropriate when an officer: Submits an unqualified resignation; Separated based on misconduct; discharged for physical disability resulting from intentional misconduct or neglect; and, for final revocation of a security clearance.

(4) Chapter 4 outlines the policy and procedure for the elimination of officers from the active Army for substandard performance of duty. Paragraph 4-2b, prescribes for the elimination of an officer for misconduct, moral or professional dereliction, or in the interests of national security.

g. Army Regulation 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 "JNC" as the appropriate code to assign for members who are discharged under the provisions of Army Regulation 600-8-24, Unacceptable Conduct.

8. SUMMARY OF FACT(S): Standard of Review. The Army Discharge Review Board considers applications for upgrade as instructed by Department of Defense Instruction 1332.28.

a. The applicant requests an upgrade to honorable. The applicant's Army Military Human Resources Record (AMHRR), the issues, and documents submitted with the application were carefully reviewed.

b. The available evidence reflects the applicant was notified of the intent to discharge them from the U.S. Army for providing a false statement to a special agent of the Criminal Investigation Division stating the applicant did not use amphetamine. The applicant knew this statement to be false and later confessed to using Adderall from an expired prescription. For conduct unbecoming of an officer as indicated by the above-referenced misconduct.

c. The applicant contends medical records document a diagnosis of General Anxiety Disorder and Attention Deficit Hyperactive Disorder (ADHD) during Army service, with anxiety as principal condition. The applicant provided Chronological Record of Medical Care, 4 November 2010, reflecting a diagnosis of Anxiety disorder NOS and ADHD, predominantly inattentive type. A note from Deaconess Health Systems, 10 June 2018, reflecting a diagnosis of anxiety. The AMHRR includes a medical note, from S.G. J. MD., 17 June 2010, reflecting a diagnosis of Attention deficit disorder with difficulty concentrating. The medical note was considered by the separation authority.

d. The applicant contends a nursing education program amplified these disorders through extreme stress, rigid requirements, and emotional trauma. An instructor and assistant director singled out the applicant, posing repeated questions until an incorrect response, assigning the most challenging instructors, and imposing unfair treatment. The applicant provided no supporting evidence beyond their statement to support the contention. The AMHRR does not indicate or provide evidence of arbitrary or capricious actions by the command.

e. The third-party statements provided with the application reflect the applicant's professionalism and dedication to the job.

f. The applicant contends seeking treatment for the applicant's mental health. The Army Discharge Review Board has the authority to consider post-service factors when reviewing discharge recharacterization requests. However, no law or regulation permits upgrading an unfavorable discharge solely due to time passed or good conduct in civilian life. The Board evaluates each case individually to determine whether post-service achievements indicate previous in-service misconduct was an anomaly rather than a reflection of the applicant's overall character.

9. BOARD DISCUSSION AND DETERMINATION:

a. As directed by the 2017 memo signed by A.M. Kurta, the board considered the following factors:

(1) Did the applicant have a condition or experience that may excuse or mitigate the discharge? **Yes.** The Board's Medical Advisor, a voting member, reviewed the applicant's DOD and VA health records, applicant's statement, and/or civilian provider documentation and found that the applicant has the following potentially mitigating diagnoses/experiences: Anxiety Disorder NOS and Social Anxiety Disorder.

(2) Did the condition exist, or experience occur during military service? **Yes.** The Board's Medical Advisor found that the applicant was diagnosed in service with Anxiety Disorder NOS and Social Anxiety Disorder.

(3) Does the condition or experience actually excuse or mitigate the discharge? **Partial.** The Board applied liberal consideration and opined that there is evidence of BH conditions that partially mitigate the basis of separation. The applicant was diagnosed in service with Anxiety Disorder NOS and Social Anxiety Disorder. The applicant's in-service diagnosis of ADHD is also acknowledged, but it is not a mitigating BH condition. Given the nexus between Anxiety Disorder NOS, Social Anxiety Disorder, and using substances for self-medication, the positive test for D-Amphetamine is mitigated. However, providing a false statement to CID is not mitigated because neither Anxiety Disorder NOS or Social Anxiety Disorder interfere with the ability to differentiate right from wrong and be truthful under investigation.

(4) Does the condition or experience outweigh the discharge? **Yes.** After applying liberal consideration to the evidence, including the Board Medical Advisor's opine, the Board determined that the applicant's behavioral health conditions outweighed the basis for separation and warranted an upgrade.

b. Prior Decisions Cited: None

c. Response to Contention(s):

(1) The applicant contends medical records document a diagnosis of General Anxiety Disorder and Attention Deficit Hyperactive Disorder (ADHD) during Army service, with anxiety as principal condition. The Board considered this contention and acknowledged that the applicant's documented behavioral health conditions were significant in understanding the circumstances surrounding the misconduct and supported the Board's decision to grant an upgrade.

(2) The applicant contends a nursing education program amplified these disorders through extreme stress, rigid requirements, and emotional trauma. An instructor and assistant director singled out the applicant, posing repeated questions until an incorrect response, assigning the most challenging instructors, and imposing unfair treatment. The Board considered this contention and recognized that the applicant's reported experiences of heightened stress and perceived inequitable treatment likely exacerbated existing behavioral health symptoms, further supporting mitigation.

(3) The third-party statements provided with the application reflect the applicant professional and dedication to the job. The Board considered this contention and found the supporting statements credible and consistent with the applicant's overall record, reinforcing the applicant's positive character and post-service reliability.

(4) The applicant contends seeking treatment for the applicant's mental health. The Board considered this contention and viewed the applicant's proactive engagement in mental health care as a strong indicator of rehabilitation and personal responsibility, which weighed favorably in the Board's determination.

d. The Board determined that, after reviewing the applicant's statement, service record, the nature of the misconduct, and the in-service behavioral health diagnoses that mitigated the positive D-Amphetamine test, the characterization of service was inequitable and warranted an upgrade to Honorable. The Board voted not to change the narrative reason and separation code as the reasons were proper and equitable.

e. Rationale for Decision:

(1) Published Department of Defense guidance indicates the guidance is not intended to interfere or impede on the Board's statutory independence. The Board determines the relative weight of the action that was the basis for the discharge and whether it supports relief or not. In reaching its determination, the Board considers the application, available records and any supporting documents included with the application.

(2) The Board voted to upgrade the applicant's characterization of service to Honorable because, after applying liberal consideration to all the evidence before it, the applicant's behavioral health conditions were found to mitigate the substance-related misconduct that formed the basis for separation.

(3) The Board voted not to change the applicant's reason for discharge or accompanying SPD code, as the reason the applicant was discharged was both proper and equitable.

(4) The RE code will not change, as the current code is consistent with the procedural and substantive requirements of the regulation.

10. BOARD ACTION DIRECTED:

a. Issue a New DD-214 / Separation Order: Yes

b. Change Characterization to: Honorable

c. Change Reason / SPD code to: No Change

d. Change RE Code to: No Change

e. Change Authority to: AR 635-200

Authenticating Official:

3/24/2026

[redacted]

Legend:

AWOL – Absent Without Leave
AMHRR – Army Military Human Resource Record
BCD – Bad Conduct Discharge
BH – Behavioral Health
CG – Company Grade Article 15
CID – Criminal Investigation Division
ELS – Entry Level Status
FG – Field Grade Article 15
FTR – Failure to Report
GD – General Discharge
HS – High School
HD – Honorable Discharge
IADT – Initial Active-Duty Training
MP – Military Police
MST – Military Sexual Trauma
N/A – Not applicable
NCO – Noncommissioned Officer
NIF – Not in File
NOS – Not Otherwise Specified
OAD – Ordered to Active Duty
OBH (I) – Other Behavioral Health (Issues)
OMPF – Official Military Personnel File
PTSD – Post-Traumatic Stress Disorder
RE – Re-entry
SCM – Summary Court Martial
SPCM – Special Court Martial
SPD – Separation Program Designator
TBI – Traumatic Brain Injury
UNC – Uncharacterized Discharge
UOTHC – Under Other Than Honorable Conditions
VA – Department of Veterans Affairs