

1. Applicant's Name: [REDACTED]**a. Application Date:** 26 October 2023**b. Date Received:** 18 December 2023**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 conditions). The applicant requests an upgrade to honorable, along with a narrative reason, separation program designator (SPD) code, and reentry (RE) code change.

b. Applicant Contention(s)/Issue(s):

(1) The applicant requests relief contending, in effect, the applicant was discharged after failing a urinalysis. This was a result of taking oxycodone due to sustaining a head injury during an airborne exercise that was later service connected as a Traumatic Brain Injury (TBI). The applicant was not aware of the existence of the TBI during the timeframe in which these circumstances occurred. Had the applicant been fully aware of the nature of the applicant's symptoms and the cause, the applicant would have voiced concern for the applicant's mental health early and sought treatment. The TBI, as well as other traumatic events in and around the same period, significantly impacted the applicant's ability, drive, and desire to perform the applicant's duties and responsibilities. The symptoms associated with the applicant's TBI and Post-Traumatic Stress Disorder (PTSD) compelled the applicant to absurd actions, resulting in the applicant's premature discharge.

(2) The applicant's discharge status does not truly reflect the applicant's character or the totality of the applicant's service. Further, it sheds no light on the circumstances surrounding the applicant's decline in performance, both preceding and following the applicant's TBI. The applicant's discharge was improper due to culturally induced fear and its effects on the applicant's already broken mental psyche leading up to the applicant's discharge. The applicant's discharge was also inequitable. Another Soldier took the same type of pill on the same day and failed the same urinalysis. However, this Soldier received no punishment, and the Soldier was allowed to finish out the Soldier's service honorably. There is substantial doubt that the applicant would have received the same discharge under the current policies, as the current policies recognize PTSD and TBI are serious and common injuries among service members and affect Soldiers' behavior and performance.

c. Board Type and Decision: In a records review conducted on 12 November 2025, and by a 3-0 vote, the Board determined the discharge is inequitable based on the applicant's length of service and post-service accomplishments outweighing the applicant's one-time abuse of oxymorphone / oxycodone. Therefore, the Board voted to grant relief in the form of an upgrade of the characterization of service to Honorable and changed to the separation authority to AR 635-200, paragraph 14-12a, the narrative reason for separation to Misconduct (Minor Infractions), with a corresponding separation code of JKN, and the reentry code to RE-3. 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: Misconduct (Drug Abuse) / AR 635-200, Paragraph 14-12c (2) / JKK / RE-4 / General (Under Honorable Conditions)

b. Date of Discharge: 22 June 2015

c. Separation Facts:

(1) Date of Notification of Intent to Separate: 5 May 2015

(2) Basis for Separation: Between on or about 22 January 2015 and on or about 26 January 2015, the applicant wrongfully used oxymorphone and between on or about 22 January 2015 and on or about 26 January 2015, the applicant wrongfully used oxycodone.

(3) Recommended Characterization: General (Under Honorable Conditions)

(4) Legal Consultation Date: On 11 May 2015, the applicant declined the opportunity to speak with an attorney.

(5) Administrative Separation Board: NA

(6) Separation Decision Date / Characterization: 27 May 2015 / General (Under Honorable Conditions)

4. SERVICE DETAILS:

a. Date / Period of Enlistment/Reenlistment Under Review: 4 June 2012 / 6 years

b. Age at Enlistment / Education / GT Score: 20 years / HS Graduate / 125

c. Highest Grade Achieved / MOS / Total Service: E-4 / 11B1P / Infantryman / 3 years, 19 days

d. Prior Service / Characterizations: None

e. Overseas Service / Combat Service: None

f. Awards and Decorations: NDSM, GWOTSM, ASR

g. Performance Ratings: NA

h. Disciplinary Action(s) / Evidentiary Record:

(1) DA Form 4856 (Developmental Counseling Form) reflects the applicant was counseled on 18 February 2015 for failing a urinalysis that was administered on 26 January 2015. The results of the urinalysis showed the applicant had illegally used some form of narcotic; the details of which remained unclear. The applicant willingly admitted to using the narcotic oxycodone, which the applicant acquired from a neighbor of a friend. (Provided by the applicant)

(2) Memorandum, subject: Positive Drug Testing Results, 24 February 2015, reflects the applicant tested positive for oxycodone / oxymorphone during a unit urinalysis conducted on 26 January 2015. (Provided by the applicant)

(3) Commander's Report, 11 May 2015, reflects the applicant's record of other disciplinary action, including non-judicial punishment, were attached as enclosure 2 but the information was not included and the applicant's AMHRR did not contain these documents.

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:

(a) DA Form 3349 (Physical Profile), 7 August 2014, which shows the applicant had a concussion, post traumatic headache, neck strain, dizziness, and fatigue. The applicant was issued a temporary profile with an expiration date of 6 September 2014. The profiling officer stated the applicant needed recovery from concussion symptoms.

(b) 21 pages of medical records, which state the applicant received medical care on 6 August 2014 due to a jump injury. The applicant was diagnosed with a concussion. The applicant's diagnosis history shows, in pertinent part, the applicant was diagnosed with a concussion with brief loss of consciousness (under 1 hour), alcohol abuse, neck strain, nicotine dependence, opioid related disorders, and post-traumatic headache.

(c) Department of Veterans Affairs (VA) rating decision, 19 April 2023, which reflects the applicant was service connected for TBI, to include alcohol use disorder and chronic post-traumatic headaches.

(d) A letter from the applicant's therapist, 3 November 2023, which states the applicant was receiving counseling services with a working diagnosis of generalized anxiety disorder, major depressive disorder, recurrent, mild, and PTSD.

(e) A letter, 8 November 2023, which confirms the applicant was a patient at the Polytrauma Rehabilitation Center Psychiatry Clinic since 30 August 2023. The Neuropsychiatrist stated the applicant's current working diagnosis was generalized anxiety disorder, alcohol use disorder, and major depressive disorder. The applicant was prescribed medications such as mirtazapine and naltrexone for treatment of anxiety, depression, and alcohol cravings.

(2) AMHRR provided: None

5. APPLICANT-PROVIDED EVIDENCE: DD Form 293, Applicant Statements, Character References/Witness Statements (6), Developmental Counseling Statements (5), Certificates of Training (4), Article – Fallen Soldier Training Exercise Accident, DA Form 3349, Article – Fallen Soldier – Operation Enduring Freedom, Positive Drug Testing Results Memorandum, Medical Records (21 pages), VA Rating Decision, Letter from Therapist, Letter from a Neuropsychiatrist, Day Shift LQF JOP Report, Personal Growth Plan, Job Description, DD Form 214

6. POST SERVICE ACCOMPLISHMENTS: The applicant is employed as a Surveyor and Bid Coordinator and received the Employee Spotlight of the Week.

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 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 waivable and nonwaivable separations. Table 3-1, defines reentry eligibility (RE) codes:

- 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.
- RE-3 Applies to: Person who is not considered fully qualified for reentry or continuous service at time of separation, but disqualification is waivable. Eligibility: Ineligible unless a waiver is granted.
- RE-4 Applies to: Person separated from last period of service with a nonwaivable 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 active Federal service. Eligibility: Ineligible for enlistment.

g. Army Regulation 635-200 provides the basic authority for the separation of enlisted personnel.

(1) Chapter 3, Section II provides the authorized types of characterization of service or description of separation. It states:

a. An honorable discharge is a separation with honor and is appropriate when the quality of the Soldier'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.

b. A general discharge is a separation from the Army under honorable conditions and is issued to a Soldier whose military record is satisfactory but not sufficiently meritorious to warrant an honorable discharge.

(2) Chapter 14 establishes policy and prescribes procedures for separating members for misconduct. Specific categories include minor disciplinary infractions, a pattern of misconduct, and commission of a serious offense, to include abuse of illegal drugs, convictions by civil authorities and desertion or being absent without leave. Action will be taken to separate a member for misconduct when it is clearly established that rehabilitation is impractical or unlikely to succeed. A discharge under other than honorable conditions is normally appropriate for a Soldier discharged under this chapter. However, the separation authority may direct a general discharge if such is merited by the Soldier's overall record. Paragraph 14-12c(2) terms abuse of illegal drugs as serious misconduct. It continues; however, by recognizing relevant facts may mitigate the nature of the offense. Therefore, a single drug abuse offense may be combined with one or more minor disciplinary infractions or incidents of other misconduct and processed for separation under paragraph 14-12a or 14-12b as appropriate.

(3) 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 "JKK" as the appropriate code to assign enlisted Soldiers who are discharged under the provisions of Army Regulation 635-200, Chapter 14-12c(2), Misconduct (Drug Abuse).

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, along with a narrative reason, SPD code, and RE code change. The applicant's AMHRR, the issues, and documents submitted with the application were carefully reviewed.

b. The applicant requests a narrative reason, SPD code, and RE code change. The was separated under the provisions of AR 635-200, Chapter 14-12c (2), with a general (under honorable conditions) discharge and a RE code of "4." The narrative reason specified by Army Regulations for a discharge under this chapter is "Misconduct (Drug Abuse)" and the separation code is "JKK." AR 635-8, Separation Documents governs the preparation of the DD Form 214 and dictates the entry of the narrative reason for separation, entered in block 28 and separation code, entered in block 26 of the form, will be as listed in table 2-2 or 2-3 of AR 635-5-1, Separation Program Designator (SPD) Codes. The regulation stipulates no deviation is authorized. There is no provision for any other reason or SPD code to be entered under this regulation. RE-4 Applies to: Person separated from last period of service with a nonwaiverable 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 active Federal service. Eligibility: Ineligible for enlistment.

c. The applicant contends the applicant was discharged after failing a urinalysis after taking oxycodone due to sustaining a head injury during an airborne exercise that was later service connected as a TBI. The symptoms associated with the applicant's TBI and PTSD compelled the applicant to absurd actions, resulting in the applicant's premature discharge. The applicant was not aware of the existence of the TBI during the timeframe in which these circumstances occurred. Had the applicant been fully aware of the nature of the applicant's symptoms and the cause, the applicant would have voiced concern for the applicant's mental health early and sought treatment. The TBI, as well as other traumatic events in and around the same period, significantly impacted the applicant's ability, drive, and desire to perform the applicant's duties and responsibilities. The applicant's AMHRR is void of evidence pertaining to a mental health issue. The applicant provides medical documents pertaining the applicant's mental and physical conditions.

d. The applicant contends the discharge status does not truly reflect the applicant's character or the totality of the applicant's service. Further, it sheds no light on the circumstances surrounding the applicant's decline in performance, both preceding and following the applicant's TBI. The applicant's discharge was improper due to culturally induced fear and its effects on the applicant's already broken mental psyche leading up to the applicant's discharge.

e. The applicant contends the discharge was inequitable because another Soldier took the same type of pill on the same day and failed the same urinalysis. However, this Soldier received no punishment, and the Soldier was allowed to finish out the Soldier's service honorably. Applicable regulations state each case must be decided on an individual basis, considering the unique facts and circumstances of the case.

f. The applicant contends there is substantial doubt that the applicant would have received the same discharge under the current policies, as the current policies recognize PTSD and TBI are serious and common injuries among service members and affect Soldiers' behavior and performance.

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: Opioid Related Disorder, Alcohol Use Disorder, Generalized Anxiety Disorder (GAD), Alcohol Use Disorder, Major Depressive Disorder (MDD), PTSD.

(2) Did the condition exist, or experience occur during military service? **Yes.** The Board's Medical Advisor found documentation of an ASAP evaluation and diagnoses as well as records pertaining to a mild TBI. The applicant is 100% service connected for Delusional Disorder and 50% for migraines.

(3) Does the condition or experience actually excuse or mitigate the discharge? **No.** The Board's Medical Advisor applied liberal consideration and opined that there are no mitigating BH conditions. In-service records showed applicant was treated for a concussion/mild TBI in Aug 2014, but during the Chapter MSE, applicant denied any continued problematic symptoms. Applicant was diagnosed with Opioid Related Disorder and Alcohol Use Disorder. The applicant is service connected through the VA for migraines and mental health-related diagnoses. However, there is insufficient evidence of a brain injury of the severity such that it would have impaired judgment or the ability to distinguish right from wrong. The applicant provides a lengthy and compelling account of the events surrounding opioid use, and substance abuse can be a natural sequela to mental health conditions associated with traumatic or stressful events. However, there is insufficient evidence of a medically mitigating condition.

(4) Does the condition or experience outweigh the discharge? **No.** Despite the Board's application of liberal consideration, the Board considered the opinion of the Board's Medical Advisor, a voting member, that the available evidence did not support a conclusion that the applicant's GAD, MDD, PTSD outweighed the basis for applicant's separation – drug abuse – for the aforementioned reason(s).

b. Prior Decisions Cited: N/A

c. Response to Contention(s):

(1) The applicant contends the discharge status does not truly reflect the applicant's character or the totality of the applicant's service. Further, it sheds no light on the circumstances surrounding the applicant's decline in performance, both preceding and following the applicant's TBI. The applicant's discharge was improper due to culturally induced fear and its effects on the applicant's already broken mental psyche leading up to the applicant's discharge. The Board considered this contention and while the assertion behavioral health conditions were considered, there was insufficient evidence to support the level of impairment to mitigate the drug abuse. However, the totality of the applicant's service record, to include the applicant's length of service and post-service accomplishments, the Board voted that these factors outweighed the one-time drug use and relief was warranted.

(2) The applicant contends the applicant was discharged after failing a urinalysis after taking oxycodone due to sustaining a head injury during an airborne exercise that was later service connected as a TBI. The symptoms associated with the applicant's TBI and PTSD compelled the applicant to commit absurd actions, resulting in the applicant's premature discharge. The Board considered this contention during proceedings, but ultimately did not address the contention due to an upgrade being granted based on the totality of the applicant's service record outweighing the one-time drug use misconduct.

(3) The applicant contends the discharge was inequitable because another Soldier took the same type of pill on the same day and failed the same urinalysis. However, this Soldier received no punishment, and the Soldier was allowed to finish out the Soldier's service honorably. The Board considered this contention during proceedings but ultimately could not address it as each case is unique, and the specific circumstances around the alleged comparable case were not available for review.

(4) The applicant contends there is substantial doubt that the applicant would have received the same discharge under the current policies, as the current policies recognize PTSD and TBI are serious and common injuries among service members and affect Soldiers' behavior and performance. The Board considered this contention during proceedings, but ultimately did not address the contention due to an upgrade being granted based on the totality of the applicant's service record outweighing the one-time drug use misconduct.

d. The Board determined the discharge is inequitable based on the applicant's length of service and post-service accomplishments outweighing the applicant's one-time abuse of oxymorphone / oxycodone.

e. Rationale for Decision:

(1) The Board voted to change the applicant's characterization of service to Honorable because the applicant's length of service and post-service accomplishments outweighing the applicant's one-time abuse of oxymorphone / oxycodone. Thus, the prior characterization is no longer appropriate.

(2) The Board voted to change the reason for discharge to Misconduct (Minor Infractions) under the same pretexts, thus the reason for discharge is no longer appropriate. The SPD code associated with the new reason for discharge is JKN.

ARMY DISCHARGE REVIEW BOARD CASE REPORT AND DIRECTIVE

AR20240002746

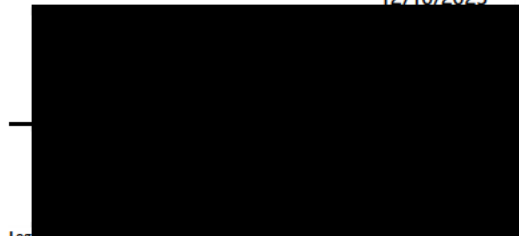
(3) The Board voted to change the RE code to RE-3.

10. BOARD ACTION DIRECTED:

- a. Issue a New DD-214: Yes
- b. Change Characterization to: Honorable
- c. Change Reason / SPD Code to: Misconduct (Minor Infractions)/JKN
- d. Change RE Code to: RE-3
- e. Change Authority to: AR 635-200, paragraph 14-12a

Authenticating Official:

12/10/2025



Leg

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