DEPARTMENT OF HOMELAND SECURITY
BOARD FOR CORRECTION OF MILITARY RECORDS

Application for Correction of
the Coast Guard Record of:

BCMR Docket No. 2024-068

[redacted]
(former) AET3/E-4

FINAL DECISION

This proceeding was conducted by the Board for Correction of Military Records of the Coast Guard (hereinafter "Board") according to the provisions of 10 U.S.C. § 1552 and 14 U.S.C. § 2507. The Chair docketed the application on June 25, 2024, and assigned the case to a staff attorney to prepare the decision pursuant to 33 C.F.R. § 52.61(c).

This final decision, dated July 31, 2025, is approved and signed by the three duly appointed members who were designated to serve as the Board in this case.

INTRODUCTION

The applicant, a former Coast Guard Avionics Electrical Technician, Third Class (AET3/E-4), was Honorably discharged with separation pay on February 5, 2023, due to physical disability (a right hip condition). He has requested that the Board add various other musculoskeletal conditions to his Informal Physical Evaluation Board (IPEB) findings, increase the disability rating assigned by the IPEB, and change his separation to a medical retirement. Alternatively, he has requested that the Board direct the Coast Guard to re-process him through the Physical Disability Evaluation System (PDES).

SUMMARY OF THE RECORD

The applicant joined the Coast Guard as a Seaman (SN/E-3) on October 20, 2015. He was promoted to AET3/E-4 on November 3, 2017.

Medical records submitted by the applicant show that he initially presented with right hip pain in September 2019, which had been resistant to over-the-counter medications and rest. Despite regular physical therapy (PT), the pain persisted, and after a Magnetic Resonance Imaging scan (MRI), the applicant was diagnosed with a right labral tear and underwent surgery in July 2020.

Despite post-surgical PT, the applicant reported in March 2021 that he was no longer improving, and symptoms were worse than before the surgery. Imaging results included enthesopathy of the right hip in addition to a labral tear, instability, and impingement, and the applicant was scheduled for an additional surgery, to take place on July 14, 2021.

In April 2021, the applicant was referred to a Medical Evaluation Board (MEB) for his right hip condition. The MEB Narrative Summary (NARSUM) noted that the applicant had been on temporary light duty (TLD) since his July 2020 surgery and continued to have pain despite six months of post-operative PT. The MEB then noted that based on the applicant's consultation with specialists, it had been determined that an additional surgical procedure was warranted, which had been scheduled for July 2021. The MEB concluded by stating that it expected the applicant would be fit for full duty after a three- to six-month recovery from the upcoming surgery.

On April 19, 2021, the applicant signed a form titled "Evaluee's Statement Regarding the Findings of the Medical Board Report." The form indicated that the MEB had found the applicant did not satisfy medical retention standards. The form also included the following statement: "I believe that all my impairments have been evaluated adequately by the Medical Board Report." The applicant signed the form and also initialed a section waiving his right to submit any statement rebutting the MEB's findings and recommendations.

In a May 11, 2021, endorsement to the MEB report, the applicant's Commanding Officer (CO) recommended that the applicant be found not fit for duty and separated from the Coast Guard. The CO explained that the applicant's normal duties included aircraft maintenance, pre- and post-flight inspections, and routine deployments, but that in his limited capacity, the applicant's current duties consisted of answering phones and simple office work. The CO asserted that the applicant was unable to perform the prescribed duties of his rate and rank. As such, the CO stated it was his firm belief that separation was in the best interests of the Coast Guard and the applicant.

On July 14, 2021, the applicant underwent the previously scheduled, second right hip procedure. A record documenting a PT visit one week later stated that the applicant was optimistic he would respond more positively to the second surgery. It was also noted the applicant was utilizing a brace locked at 90 degrees, and the provider's recommendation was to begin PT again one week after symptoms subsided. A record dated July 30, 2021, stated that the applicant was progressing as expected and had no complaints.

As noted above, the applicant began receiving PT for his right hip symptoms in September 2019, and he continued attending PT regularly up through his second surgery in July 2021. During this period, the applicant also reported and received PT for other

musculoskeletal symptoms, unrelated to the right hip. For example, the applicant reported left foot plantar fasciitis in September 2019 and was referred for custom insoles. Beginning in March 2020, he reported left knee pain when performing deadlifts, bilateral shoulder pain with bench presses and push-ups, and thoracic spine pain. After increased right shoulder pain was noted in September 2020, the applicant underwent an MRI in December 2020 which assessed a right acromioclavicular (AC) joint contusion. In March 2021, an acute onset of left shoulder pain was noted, which was caused by bench pressing. The applicant continued to report bilateral shoulder and left knee pain through June 2021.

In a treatment record dated September 8, 2021, the applicant's visit to "rheum" (presumably the rheumatology department) was documented, during which the applicant reported pain in the right hip, bilateral feet, and other joints. He reported a slow worsening of pain over the last several years, with a recent exponential increase, which had caused him to largely stop exercising, only doing "what he was able to." A physical examination showed full range of motion in all joints with the exception of the right groin and hip, as well as some decreased left hip rotation. The provider, Dr. V.K., provided an assessment of bilateral hip pre-osteoarthritis and hip dysplasia, fibromyalgia type pain sensitivity due to poor sleep, and "probably early midfoot osteoarthritis," but no evidence of an inflammatory arthropathy. Dr. V.K. recommended warm pool activity and other physical activity, low dose nerve pain medication, vitamin and thyroid bloodwork, and orthotics and supportive shoes.

The applicant underwent a right hip MRI in January 2022, which concluded that a small residual/recurrent labral tear "would be difficult to exclude," among other abnormal findings. Dr. R.M., the physician who reviewed the MRI, noted the applicant's report that his symptoms were exacerbated by flexion, extension, bending, PT, and working out. Dr. R.M. suggested cortisone injections if symptoms persisted.

On March 18, 2022, an update to the April 2021 MEB NARSUM was completed. The update discussed treatment records which showed that as of late January 2022, the applicant continued to suffer from right hip pain, for which corticosteroid injections and continued PT were recommended. The update stated further that the applicant was expected to be on limited duty for the duration of his recovery, which could take up to six months.

On July 19, 2022, an IPEB assigned a 10 percent rating for the applicant's right hip condition and determined he was unfit for continued duty by reason of physical disability.

On September 12, 2022, the applicant's assigned Coast Guard counsel, P.L., indicated that he had reviewed the IPEB's findings and disposition and had counseled the applicant regarding their acceptance or rejection. On October 5, 2022, the applicant accepted the IPEB's tentative findings and recommended disposition and waived his right to a formal hearing.

In an email dated October 25, 2022, P.L. requested an update on the applicant's case, noting that the applicant had "accepted the findings with a high degree of stress because his wife and children are living remotely due to their jobs, and [the applicant] is hoping that as soon as the separation paperwork is processed he can cancel his lease and move back to be with his family."

On December 9, 2022, separation orders were issued with an effective date of February 5, 2023.

The applicant was discharged on February 5, 2023, with a disability severance payment in the amount of $40,677.00. His DD Form 214 (Certificate of Discharge or Release from Active Duty) (hereinafter "DD 214") indicates that he received an Honorable characterization of service and the narrative reason for separation was "Disability, severance pay."

In a Rating Decision dated May 19, 2023, the U.S. Department of Veterans Affairs (VA) granted service connection for various conditions, including the following: bilateral pes planus with plantar fasciitis and metatarsalgia, with a 30 percent disability rating; bilateral shoulder strain, tendonitis, and joint instability, with a 20 percent rating for each shoulder; right hip femoral acetabular impingement syndrome, with a 10 percent rating; left hip strain, with a 10 percent rating; and bilateral knee strain, with a 10 percent rating for each knee. The VA decision made the awards of disability compensation effective February 6, 2023, the day after the applicant's discharge.

APPLICATION

In his May 2024 submission, the applicant requested that the Board "sit as the first formal PEB in [his] case." He requested that in addition to the 10 percent disability rating assigned for his right hip, the Board assign a 20 percent rating for each shoulder, 10 percent for the left hip, and 10 percent for the left knee, for a combined 50 percent rating (consistent with his VA ratings), which would entitle him to a medical retirement. Alternatively, he asked the Board to remand his case for further processing and adjudication of the issues raised in his application.

In an attached brief, the applicant contended, through counsel, that he had accepted the IPEB's findings due to the stress and hardship caused by his lengthy geographic separation from his family between June 2, 2021, and December 15, 2022, when he began terminal leave prior to separation.

The applicant argued, however, that due to staffing shortages at the Coast Guard clinic where he was stationed, he had received inadequate care and interaction with staff, thus adversely impacting the documentation of his conditions and processing of his MEB. Specifically, the applicant contended that his PT records documented various potentially

unfitting conditions that should have been addressed by the MEB and addendum. He pointed to PT records documenting bilateral shoulder pain from March 2020 through June 2021, and stated that at the time of his April 2021 MEB, there was ample evidence that this shoulder pain would limit his ability to pull, reach, push, carry, perform repetitive hand movements, and access confined spaces, as required to perform his duties as an AET3. He also pointed to a September 2021 diagnosis of bilateral hip arthritis and instability due to dysplasia. The applicant also pointed to PT records showing he reported left knee pain on multiple occasions.

The applicant discussed the VA's May 2023 decision granting service connection and assigning disability ratings for both shoulders, both hips, and the left knee, effective from the date of his discharge. Based on the VA decision, the applicant argued that the significance of his bilateral shoulder, left hip, and left knee conditions at the time of his discharge was evident, and thus, that the Board should correct the IPEB's findings by granting the same ratings as the VA had for the same conditions.

The applicant next discussed the National Defense Authorization Act (NDAA) of 2023, which had required the Coast Guard to improve MEB processing times and provide certainty regarding separation dates. The applicant noted that to implement the NDAA, the Coast Guard issued ALCOAST 124/23 on March 29, 2023, the month after his discharge. This ALCOAST provided that a member may be placed in excess leave status after 270 days from the initiation of a MEB, and that an IPEB must conclude within 210 days of its initiation. The applicant argued that this policy change was enacted to prevent the precise circumstances he faced, and yet he had not been able to benefit from it and was forced to accept the IPEB findings to ease the financial burden and stress caused by his 18-month separation from his family.

Appended to the application was a letter from the applicant's Coast Guard counsel, P.L., dated May 18, 2023. P.L. recalled that the applicant was referred to the MEB in April 2021 for his right hip condition, but between April 2021 and September 2022, began experiencing severe pain throughout his body, including in the shoulders, hips, knees, and feet. P.L. recalled that he informed the applicant that he was likely entitled to a rating much higher than 10 percent, but that during this time, the applicant lived approximately three hours from his wife and children, and was unable to visit them, except on weekends. Ultimately, P.L. stated it was his opinion that the applicant did not have an opportunity to meaningfully challenge the IPEB due to the Coast Guard's unreasonable delay in processing him through the PDES.

VIEWS OF THE COAST GUARD

In a memorandum dated April 4, 2025, a Coast Guard Judge Advocate (JA) recommended that the Board deny relief in this case and adopted the facts and analysis

provided in a separate memorandum prepared by the Coast Guard Personnel Service Center (PSC). In that memo, dated October 10, 2024, the PSC acknowledged the applicant's argument that he did not receive adequate medical care or interaction with clinical staff due to reduced resources and personnel, which resulted in an incomplete submission of his MEB, and pressure to accept the IPEB findings due the stress of his long geographic separation from family. The PSC emphasized, however, that the applicant was afforded two opportunities to contest the MEB and IPEB findings by submitting a rebuttal and requesting a formal hearing, respectively, but had not done so. The PSC also noted that the applicant was provided legal counsel to assess the IPEB findings and had chosen to waive his right to a formal hearing and accept the findings.

APPLICANT'S RESPONSE TO THE VIEWS OF THE COAST GUARD

The applicant, through counsel, submitted a response to the Coast Guard's views on July 23, 2025. Therein, the applicant acknowledged that he did not contest the findings of the MEB or IPEB. He noted, however, that the Coast Guard had not contested the evidence he submitted showing that he suffered additional injuries to his shoulders, hips, knees, and feet during the period between his April 2021 MEB and his receipt of the IPEB findings in September 2022. The applicant then reiterated that he had limited access to adequate medical care during this period due to the shortage of clinic staff. He also reiterated that he felt compelled to accept the IPEB findings due to substantial hardship and financial loss caused by the Coast Guard's unreasonable delay. He noted that this situation was cured by the 2023 NDAA March 2023 ALCOAST, which he had not benefited from.

The applicant then argued the Board should seek a medical advisory opinion regarding the unfitting nature of his medical conditions before adjudicating his case. Notwithstanding this argument, the applicant went on to request that the Board sit "as the first formal medical board regarding the medical conditions … that were erroneously omitted from his case when it was initially submitted to the IPEB."

APPLICABLE LAW AND POLICY

Board Proceedings

The Board may correct errors or remove injustices in a service member's records pursuant to 10 U.S.C. § 1552(a). "Error" means a mistake of a significant fact or law and includes a violation by the Coast Guard of its own regulations. *See Reale v. United States*, 208 Ct. Cl. 1010, 1011 (1976) ("'Error' means legal or factual error."); *Ft. Stewart Schools v. Federal Labor Relations Authority*, 495 U.S. 641, 654 (1990) ("It is a familiar rule of administrative law that an agency must abide by its own regulations."). Injustice, when not also error, is treatment by the military authorities that "shocks the sense of justice." *Sawyer v. United States*, 18 Cl. Ct. 860, 868 (1989) citing *Reale v. United States*, 208 Ct. Cl. 1010, 1011, cert. denied, 429 U.S. 854, 50 L. Ed. 2d 129, 97 S. Ct. 148 (1976). The Board has

authority to determine whether an injustice exists on a "case-by-case basis." Docket No. 2002-040 (DOT BCMR, Decision of the Deputy General Counsel, Dec. 4, 2002).

10 U.S.C. Chapter 61

Title 10, Chapter 61 (10 U.S.C. §§ 1201-1217) covers "Retirement or Separation for Physical Disability." Per § 1201, the Secretary may retire with retired pay a member who is found unfit due to physical disability when certain requirements are met, including that the disability in question warrants at least a 30 percent rating under the VASRD. Per § 1203, when the rating is less than 30 percent, such a member may be separated with severance pay. The amount of severance pay is governed by § 1212, which provides, in relevant part, that the amount is generally computed by multiplying the member's creditable years of service by twice the amount of monthly basic pay at the member's rank at separation.

Coast Guard Policy

Physical Disability Evaluation System, COMDTINST M1850.2D (May 2006) (hereinafter "*PDES Manual*") was in effect during the applicant's service and discharge. Article 1.D. provides a general overview of the PDES, as follows:

1. Medical Evaluation Board (MEB). A member is introduced into the PDES when a commanding officer (or medical officer or higher authority as described in chapter 3) questions the member's fitness for continued duty due to apparent physical and/or mental impairment(s) and directs that an MEB be convened to conduct a thorough examination of the member's physical and/or mental impairment(s). The results of this examination, prepared in MEB format, should be as detailed as possible so as to provide a complete portrait of the member's physical and mental impairments for subsequent review.

2. Commanding Officer Endorsement. The MEB will then be sent to the evaluee's unit for action set forth in articles 1.C.6 and 3.I. The unit commanding officer will prepare an endorsement. This endorsement shall reflect the commanding officer's observations of the evaluee's working ability and any impact the injury or disease has on the evaluee's ability to perform the military duties associated with his or her office, grade, rank, or rating. The commanding officer shall fully evaluate the more intangible aspects such as motivation and ability to adapt.

3. Evaluee Response to MEB. A copy of the MEB shall also be provided to the evaluee, who will be given an opportunity to comment on the report. To help the evaluee in reviewing the report, the evaluee's commanding officer will arrange assistance by a qualified individual capable of explaining the meaning of the report and the evaluee's rights.

4. Convening Authority Review. The commanding officer then forwards the entire record, properly endorsed, including the evaluee's statement, if any, to Commander (CGPC-adm-1).

5. Commander (CGPC-adm) Referral to IPEB. CGPC-adm will then review the record and, if it is sufficient, refer the MEB to the IPEB. If an MEB is insufficient, CGPC-adm will hold the case in abeyance pending receipt of the required information.

6. IPEB Action. The IPEB reviews the record of each case referred to it and evaluates the fitness and disability of the evaluee. IPEB findings and recommended disposition must be unanimous (article

4.A.6.). The findings and recommended disposition are initially only sent to the evaluee. If the evaluee elects counsel, the decision will be provided to the assigned legal counsel as well.

7. Evaluee Response to IPEB. Elected counsel, if chosen by the evaluee, will examine the records and review the case, the findings, and recommended disposition with the evaluee. Counsel shall explain to the evaluee the full implications of the IPEB's findings and recommended disposition, the evaluee's rights, and alternative IPEB courses of action that should be considered. The evaluee must then make a decision on the findings and recommended disposition based on the counseling provided (see articles 4.A.13 and 4.A.14 for available options). The time frame for responding is not later than 30 calendar days from the date of receipt of notification of findings from CGPC.

8. FPEB Action and Evaluee Response. Upon receiving a case, the FPEB arranges for the presence of the evaluee and witnesses. This board provides the full and fair hearing which, if demanded by an evaluee, is required by 10 USC §1214. An audio recording is made of the testimony and proceedings, witnesses are heard under oath or affirmation, and other evidence may be received to establish the evaluee's fitness or unfitness for duty and the degree of disability, if applicable. The evaluee is given a copy of the audio recording, if requested, and the findings, amplifying statement, and recommended disposition. The evaluee is allowed not more than 21 calendar days from the date of receipt of the FPEB findings, recommended disposition, and amplifying statement, to review and, if desired, to submit a rebuttal to the President, FPEB. If no rebuttal is submitted within the 21 calendar day period, the case is forwarded to Commandant (G-LGL) for review.

9. PRC Action and Evaluee Response. If an evaluee has rebutted the findings and recommended disposition of an IPEB or FPEB, the entire record is reviewed by the PRC. The PRC, in reviewing the record, ensures that the correct Department of Veterans Affairs Schedule for Rating Disabilities (VASRD) diagnostic code(s) has been assigned, there is no pyramiding of impairments, a correct percentage of disability has been assigned to the VASRD descriptive diagnosis(es), and there is a preponderance of evidence of record to support the findings and, if found unfit, the disability rating. If the IPEB or FPEB findings and recommended disposition are approved by the PRC, or if only minor changes are made, the record is forwarded to Commandant (G-LGL) for a determination of legal sufficiency and for action by CGPC. If the PRC does not approve the findings and recommended disposition of the IPEB or FPEB, it will take action as provided in article 6.C. Substitute findings and disposition will be sent to the evaluee, who has the opportunity to rebut or appeal the substitution within 21 calendar days from the date of receipt from CGPC. The PRC will consider the evaluee's comments and will either modify the substitute findings and recommended disposition to accommodate the evaluee, or adhere to substitute findings or disposition and so notify the evaluee of the decision and the right to request a hearing before a PDAB. If a rebuttal statement is not received within the 21 calendar day period, the evaluee will be deemed to have concurred with the substitute finding. (chapter 7)

10. PDAB. The PDAB is the final board in the disability system. It will review the record of a case presented to it and will hear statements, in person, of the evaluee and counsel if they wish to make such statements. The PDAB will not normally call witnesses or hear other testimonies which are not already contained in the record. The PDAB's decision is forwarded to Commandant (G-LGL) for legal sufficiency review. If legally sufficient, the record is forwarded to the final approving authority. If legally insufficient, the record is returned to the PDAB with recommended corrective action. Upon completion of Commandant (G-LGL)'s review, the record is returned to the PDAB for completion of necessary endorsements, then forwarded to the final approving authority.

11. Legal Review. When an evaluee accepts the findings and recommended disposition of an IPEB, FPEB, or PRC, the record is forwarded to Commandant (G-LGL) for legal review. If legally sufficient, the record is forwarded to the final approving authority. If legally insufficient, the record is returned to the IPEB, FPEB, PRC, or PDAB with recommended corrective action. A case involving a flag officer is forwarded for review to the Director of Health and Safety (CG-11); then to Commandant (G-LGL) for legal review and transmittal to the final approving authority (articles 1.E. and 1.F).

12. Final Action. Policy and procedure regarding final action in physical disability evaluation cases is published in article 17.B. of the Personnel Manual, COMDTINST M1000.6 (series).

Per Article 2.C.2.a. of the *PDES Manual*, "[t]he sole standard in making determinations of physical disability as a basis for retirement or separation shall be unfitness to perform the duties of office, grade, rank, or rating because of disease or injury incurred or aggravated through military service."

FINDINGS AND CONCLUSIONS

The Board makes the following findings and conclusions based on the applicant's military record, his submission, the Coast Guard's submission, and applicable law and policy:

1. The Board has jurisdiction under 10 U.S.C. § 1552(a), as the applicant is seeking correction of an alleged error or injustice in his military records. The applicant has exhausted all other administrative remedies, as required by 33 C.F.R. § 52.13(b), because there is no other currently available forum or procedure provided by the Coast Guard for correcting the alleged error or injustice that the applicant has not already pursued.

2. The application is timely, as it was filed within three years of the applicant's discovery of the alleged error or injustice, as required by 10 U.S.C. § 1552(b).

3. The applicant requested an in-person hearing before the Board. The Chair, acting pursuant to 33 C.F.R. § 52.51, denied the request and recommended disposition of the case without a hearing. The Board concurs in that recommendation.[1]

4. "The Board begins its consideration of each case presuming administrative regularity on the part of the Coast Guard and other Government officials. The Applicant has the burden of proving the existence of an error or injustice by a preponderance of the evidence." 33 C.F.R. § 52.24(b). Absent evidence to the contrary, the Board presumes that Coast Guard officials have carried out their duties "correctly, lawfully, and in good faith." *Arens v. United States*, 969 F.2d 1034, 1037 (Fed. Cir. 1992); *Sanders v. United States*, 594 F.2d 804, 813 (Ct. Cl. 1979).

5. The applicant asked that the Board perform the function of an IPEB and increase his 10 percent rating for his right hip to a 50 percent rating encompassing both shoulders, both hips, and the left knee, thus entitling him to a medical retirement under 10 U.S.C. § 1201. In the alternative, the applicant has requested that the Board direct the Coast Guard to re-process his case through the PDES to address all of his medical conditions.

[1] *Armstrong v. United States*, 205 Ct. Cl. 754, 764 (1974) (stating that a hearing is not required because BCMR proceedings are non-adversarial and 10 U.S.C. § 1552 does not require them).

6. The Board initially notes that "[t]he sole standard in making determinations of physical disability as a basis for retirement or separation shall be unfitness to perform the duties of office, grade, rank, or rating because of disease or injury incurred or aggravated through military service."[2] In this case, while the applicant was treated for bilateral shoulder, bilateral foot, and left knee pain, and diagnosed with left hip osteoarthritis and instability, there is no documentation in the record suggesting that these conditions rendered him unable to adequately perform his Coast Guard duties. The applicant was referred to a MEB by an authorized official based on the impact of his right hip condition. There is no indication, however, that the applicant's CO, a medical officer, or other authorized official saw fit to convene a MEB for the applicant's reported bilateral shoulder, left knee, or left hip pain, or for any other condition.

7. Upon review of the PT and other medical records, while the applicant reported pain with fluctuating severity in the shoulders, feet, left knee, and left hip, he never required surgeries for these conditions, as he did for the right hip condition. In addition, the records suggest the applicant remained active throughout the relevant period, reporting the onset of pain while deadlifting or performing bench presses on multiple occasions. According to a July 2021 PT note, the applicant remained an "avid gym-goer." While the applicant reported having to discontinue jogging and other exercises in September 2021, January 2022 records indicate he returned to exercising, having reported at that time that certain movements, PT, and "working out" exacerbated his right hip pain.

8. The applicant has contended that he accepted the IPEB's findings due to the stress of his separation from his family. This does not explain the applicant's acceptance and waiver of any rebuttal to the MEB findings, however, which were issued in April 2021, before the applicant's separation from his family began. Notably, the applicant's acceptance and waiver included an acknowledgement that he "believe[d] that all [his] impairments ha[d] been evaluated adequately by the Medical Board Report." As of April 2021, when he executed this acceptance and waiver, the applicant had reported left knee and bilateral shoulder pain to his medical providers for the previous year. Nonetheless, he accepted the MEB findings without rebuttal and did not otherwise contend that these or any other conditions, aside from the right hip, rendered him unfit for duty. Upon review, the Board also finds no indication in the record of a severe or sustained increase in the applicant's shoulder, knee, left hip, or other musculoskeletal symptoms between the April 2021 MEB and his discharge.

9. Regarding the rating decision issued by the VA in May 2023, the Board notes that the existence of a physical defect or condition that is ratable under the VA Schedule for Rating Disabilities (VASRD) does not of itself provide justification for, or entitlement to, separation or retirement from military service because of physical

[2] *PDES Manual*, Art. 2.C.2.a.

disability.[3] In this regard, the Board notes that the nature and purpose of VA benefits decisions differs significantly from that of the PDES. While the VA assesses whether a condition is related to a veteran's service, and the condition's severity, it does not address the threshold question of whether any particular condition renders the veteran unfit for continued military service. For the PDES, this question is central, and a finding of unfitness is a prerequisite to the assignment of any rating under the VASRD.

10. Under the circumstances outlined above, the Board finds that the Coast Guard's decision to process the applicant for separation based only on his right hip condition was reasonable and did not amount to an error or injustice. The medical evidence did not suggest that at the time of his PDES processing, the applicant's other symptoms and conditions were severe or expected to permanently render him unable to perform his duties. In addition, while the PDES Manual contemplates a general health medical examination occurring prior to or in association with the MEB, there is no requirement that each medical condition be discussed by the MEB, in detail, when not found to impair the evaluee's fitness for continued duty. In this case, the Board finds it was reasonable for the MEB and IPEB to address only the applicant's right hip condition.

11. The Board sympathizes with the applicant's experience of separation from his family during the long PDES process. It is also unfortunate that the applicant's discharge occurred shortly before the change in policy referenced in the application. The applicant's separation from family, however, was a choice he made, albeit likely a difficult one. Neither the difficulty of that choice, nor the subsequent policy change, mean that the Coast Guard's actions constituted an error under then-existing policy. Nor do they mean that an injustice occurred, particularly when the applicant was afforded the due process attendant to the PDES, including an opportunity to submit a rebuttal to the MEB findings, and/or to request reconsideration of the IPEB findings or reject them in favor of a FPEB hearing.

12. In summary, the Board finds that the applicant has not overcome the presumption that the Coast Guard acted correctly, lawfully, and in good faith. While the applicant made a difficult choice, the Board does not find the Coast Guard committed an error or injustice warranting the relief requested. As such, the application must be denied.

(ORDER AND SIGNATURES ON NEXT PAGE)

[3] Id., Art. 2.C.2.i.

ORDER

The application of former Coast Guard member [redacted] is denied.

July 31, 2025

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