

SAF/MRB  
3351 CELMERS LANE  
JBA NAF WASHINGTON, MD 20762-6435

Dear XXXXXXXX:

Reference your application submitted under the provisions of DoDI 6040.44 (Section 1554, 10 USC), PDBR Case Number PD-2018-00553.

After careful consideration of your application and treatment records, the Physical Disability Board of Review determined that the rating assigned at the time of final disposition of your disability evaluation system processing was appropriate. Accordingly, the Board recommended no rating modification or re-characterization of your separation.

I have carefully reviewed the evidence of record and the recommendation of the Board. I concur with that finding and their conclusion that modification of your disability rating or characterization of your separation is not warranted. Accordingly, I accept the recommendation that your application be denied.

Sincerely,

Attachment:  
Record of Proceedings

RECORD OF PROCEEDINGS  
PHYSICAL DISABILITY BOARD OF REVIEW

NAME: XXXXXXXXXX  
BRANCH OF SERVICE: AIR FORCE

CASE: PD-2018-00553  
SEPARATION DATE: 20011228

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SUMMARY OF CASE: Data extracted from the available evidence of record reflects this covered individual (CI) was an active duty E4, Munitions Systems Journeyman, medically separated for “traumatic costochondritis-chronic” with a disability rating of 10%.

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CI CONTENTION: “Air Force rated me at 0%, VA has rated me at 10%, and then re-awarded me at 30%.” The complete submission is at Exhibit A.

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SCOPE OF REVIEW: The panel’s scope of review is defined in DoDI 6040.44. It is limited to review of disability ratings assigned to those conditions determined by the Physical Evaluation Board (PEB) to be unfitting for continued military service, and when specifically requested by the CI, those conditions identified by the Medical Evaluation Board (MEB) but determined by the PEB to be not unfitting or non-compensable. Any conditions outside the panel’s defined scope of review, and any contention not requested in this application, may remain eligible for future consideration by the Board for Correction of Military Records. The panel’s authority is limited to assessing the fairness and accuracy of PEB rating determinations and recommending corrections when appropriate. The panel gives consideration to VA evidence, particularly within 12 months of separation, but only to the extent that it reasonably reflects the severity of disability at the time of separation.

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RATING COMPARISON:

SERVICE PEB - 20011016			VARD - NA			
Condition	Code	Rating	Condition	Code	Rating	Exam
Chronic Traumatic Costochondritis	5003-5299	10%	No VA Examination Proximate to Separation in Evidence			
<b>COMBINED RATING: 10%</b>			<b>COMBINED RATING OF ALL VA CONDITIONS: NA</b>			

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ANALYSIS SUMMARY:

Traumatic Costochondritis. According to the service treatment record (STR) and MEB narrative summary (NARSUM), the CI’s condition began in 2000 after lifting a heavy trailer. She was initially seen for midsternal chest pain in January 2001 for presumed reflux, but medication provide no relief and she was then diagnosed with costochondritis.

The 24 September 2001 MEB NARSUM examination, 3 months prior to separation, noted complaints of continued chest pain despite treatment. Physical examination showed no apparent distress, clear lungs, and regular heart rate and rhythm without murmur. The examiner noted the CI had missed “numerous” days of work, and that after consultations with both internal medicine and an orthopedist, the CI’s condition was assessed as chronic and not responsive to various treatments. A bone scan of the sternal region in August 2001 was unremarkable. There was no VA Compensation and Pension examination proximate to separation.

The panel directed attention to its rating recommendation based on the above evidence. The PEB rated the costochondritis 10%, 5003-5299 (degenerative arthritis). Based on the STR evidence, panel members agreed the condition was not compensable under any of the restrictive lung disease codes 6840 (diaphragm paralysis), 6843 (traumatic chest wall defect, pneumothorax), or 6845 (chronic pleural effusion or fibrosis). The panel also agreed the condition was not compensable under code 5297 (ribs, removal of). However, panel members determined a 10% rating was justified for painful motion and functional loss as adjudicated by the PEB. After due deliberation, considering all the evidence and mindful of VASRD §4.3 (reasonable doubt), the panel concluded there was insufficient cause to recommend a change in the PEB adjudication for the traumatic costochondritis.

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BOARD FINDINGS: In the matter of the traumatic costochondritis and IAW VASRD §4.71a, the panel recommends no change in the PEB adjudication. There are no other conditions within the panel’s scope of review for consideration. Therefore, the panel recommends no modification or re-characterization of the CI’s disability and separation determination.

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The following documentary evidence was considered:

- Exhibit A. DD Form 294, dated 20180924, w/atchs
- Exhibit B. Service Treatment Record