

RECORD OF PROCEEDINGS
PHYSICAL DISABILITY BOARD OF REVIEW

NAME: XXXXXXXXXXXXXXXX
BRANCH OF SERVICE: AIR FORCE

CASE: PD-2022-00078
SEPARATION DATE: 20070628

SUMMARY OF CASE: Data extracted from the available evidence of record reflects this covered individual (CI) was an active duty E5, Explosive Ordnance Disposal Craftsman, medically separated for “chronic right knee pain, status post [s/p] anterior cruciate ligament [ACL] repair” with a disability rating of 10%.

CI CONTENTION: He is still not able to perform physical activities due to degenerative disability in his knee, and requested review of additional conditions not identified by the Medical Evaluation Board (MEB) and Physical Evaluation Board (PEB). The complete submission is at Exhibit A.

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 PEB to be unfitting for continued military service, and when specifically requested by the CI, those conditions identified by the 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.

RATING COMPARISON:

SERVICE PEB – 20070426			VARD - 20080317			
Condition	Code	Rating	Condition	Code	Rating	Exam
Right Knee Pain, S/P ACL Repair	5099-5003	10%	Right Knee ACL Tear, S/P Repair	5010-5260	10%	20080205
COMBINED RATING: 10%			COMBINED RATING OF ALL VA CONDITIONS: 10%			

ANALYSIS SUMMARY:

Right Knee Pain. According to the service treatment record (STR) and MEB narrative summary (NARSUM), the CI’s right knee pain began in December 2003 when he slipped down stairs and twisted his knee. He was diagnosed with a knee sprain and questionable meniscal injury. In March 2004, an MRI revealed a large predominantly vertical posterior horn tear of the medial meniscus associated with a moderate joint effusion; there was no identifiable osteochondral defect. In October 2005, the CI was diagnosed with an ACL tear for which he had reconstruction surgery and subsequent physical therapy (PT). He had an additional arthroscopy in November 2006, and the postoperative diagnosis was “grade I softening diffusely of the cartilage of the patella, trochlea, medial and lateral compartments, with a small area of grade II change in the weightbearing area of the medial tibial plateau. Anterior cruciate ligament graft intact but slightly vertically oriented.”

At the 22 February 2007 MEB NARSUM examination, 4 months prior to separation, the CI reported he was doing “no better” after surgery. Physical examination showed full range of motion (ROM) and no swelling, induration, erythema, warmth, popliteal cysts or crepitus. There was no joint line tenderness and anterior/posterior drawer tests were negative. Lachman’s testing did not demonstrate anterior or posterior instability. The 13 March 2007 MEB PT ROM examination documented right knee ROM from 0-130 degrees (normal 0-140), without pain.

During the 5 February 2008 VA Compensation and Pension (C&P) examination, 7 months after separation, the CI rated his right knee pain at 7-8/10, but stated that on average it was 3/10. He was usually pain-free while sitting still. Physical examination showed right knee flexion from 0-135 degrees, with no pain, weakness or loss of motion with repetition. The examiner noted no joint line tenderness, a negative McMurray test, and minimal instability.

The panel directed attention to its rating recommendation based on the above evidence. The PEB rated the right knee condition 10%, analogously coded 5099-5003 (degenerative arthritis), citing DoD and VASRD guidelines and duty limitations which included no jumping, squatting, kneeling, bending, or stooping. The VA rated the right knee condition 10%, dual-coded 5010-5260 (traumatic arthritis-leg, limitation of flexion), based on the C&P examination, citing painful or limited motion of a major arthritic joint. Panel members agreed that while there was no compensable limitation of flexion or extension (5260 or 5261), there was evidence of painful motion with functional loss supporting a 10% rating (based on §4.59, §4.40 and §4.45). Code 5259 (cartilage, semilunar, removal of, symptomatic) was applicable, but the maximum 10% rating under that code provided no benefit to the CI. There was no fracture, nonunion or malunion of the femur or tibia to support consideration under the respective codes (5255,5262) for knee impairment related to long bone conditions. Thus, there was no rating higher than the 10% adjudicated by the PEB under any applicable code. 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 right knee condition.

BOARD FINDINGS: In the matter of the right knee pain 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.

The following documentary evidence was considered:

- Exhibit A. DD Form 294, dated 20220810, w/atchs
- Exhibit B. Service Treatment Record
- Exhibit C. Department of Veterans Affairs Record

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-2022-00078.

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,