

RECORD OF PROCEEDINGS  
PHYSICAL DISABILITY BOARD OF REVIEW

NAME: XXXXXXXXXX  
BRANCH OF SERVICE: ARMY

CASE: PD-2022-00103  
SEPARATION DATE: 20020630

**SUMMARY OF CASE:** Data extracted from the available evidence of record reflects this covered individual (CI) was an active duty E4, Infantryman, medically separated for "recurrent right (dominant) shoulder instability" with a disability rating of 0%.

**CI CONTENTION:** The PEB did not consider neuritis of the upper radicular nerve group (8610). The record shows a decreased ability to sense, muscle atrophy, and loss of reflexes because the nerve was very painful. 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 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.

**RATING COMPARISON:**

SERVICE PEB - 20020313			VARD - 20020904			
Condition	Code	Rating	Condition	Code	Rating	Exam
Recurrent Right (Dominant) Shoulder Instability	5202	0%	Recurrent Right Shoulder Dislocation...	5299-5202	20%	20020717
<b>COMBINED RATING: 0%</b>			<b>COMBINED RATING OF ALL VA CONDITIONS: 20%</b>			

**ANALYSIS SUMMARY:**

**Right Shoulder Instability.** According to the service treatment record (STR) and MEB narrative summary (NARSUM), the CI's right shoulder condition began in February 2001 after a fall. Electrodiagnostic studies revealed evidence of a Bankart lesion, and a Hill-Sachs lesion all consistent with shoulder instability.

During the 13 November 2001 MEB examination (recorded on DD Forms 2807-1 and 2808), 7 months prior to separation, the CI reported right shoulder dislocations in February and May 2001. Physical examination showed anterior spontaneous shoulder dislocation and slightly positive drop arm test. The 6 December 2001 MEB NARSUM examination, 6 months prior to separation, noted complaints of right shoulder instability and pain. Right shoulder range of motion (ROM) showed forward elevation of 150 degrees (normal 180), limited by apprehension and pain. Right shoulder examination revealed positive anterior apprehension, anterior relocation, and anterior augmentation. Load and shift of the shoulder was positive and there was evidence of an inferior sulcus. The examination revealed instability in three directions and primarily anterior-inferior. At the 17 July 2002 VA Compensation and Pension (C&P) examination, 1 month after separation, the CI reported 6/10 right shoulder pain with flare-ups where the shoulder dislocated. This occurred as frequently as weekly. Physical examination showed forward flexion to 150 degrees, shoulder adduction (likely the examiner meant abduction) to 90 degrees. Rotating the right shoulder caused it to begin to dislocate. Also, with the shoulder abducted to 90 degrees, it appeared to begin anterior dislocation. Any attempt past 90 degrees produced great pain and recurrent dislocation.

The panel directed attention to its rating recommendation based on the above evidence. The PEB rated the right shoulder instability 0%, coded 5202 (humerus, other impairment of), citing flexion to 150

degrees. The VA rated the right shoulder instability 20%, analogously coded 5299-5202, based on the C&P examination, citing infrequent episodes of dislocation of the scapulohumeral joint with guarding of arm movements only at shoulder level.

Panel members agreed that a 20% rating was justified for recurrent episodes of infrequent dislocation of the humerus and guarding of movement only at shoulder level (code 5202). The ROM examinations demonstrated motion above shoulder level which did not support a higher rating under diagnostic code 5201 (arm limitation of motion). There was no dislocation or nonunion of the clavicle or scapula to justify a higher rating under the 5203 codes (clavicle or scapula, impairment of). After due deliberation, considering all the evidence and mindful of VASRD §4.3 (reasonable doubt), the panel recommends a disability rating of 20% for the right shoulder instability, coded 5202.

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**BOARD FINDINGS:** In the matter of the right shoulder instability, the panel recommends a disability rating of 20%, coded 5202 IAW VASRD §4.71a. There are no other conditions within the panel's scope of review for consideration. The panel recommends the CI's prior determination be modified as follows, effective the date of medical separation:

<b>CONDITION</b>	<b>VASRD CODE</b>	<b>PERMANENT RATING</b>
Right Shoulder Instability	5202	20%

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The following documentary evidence was considered:

- Exhibit A. DD Form 294, dated 20221026, w/atchs
- Exhibit B. Service Treatment Record
- Exhibit C. Department of Veterans Affairs Record



DEPARTMENT OF THE ARMY ARMY  
REVIEW BOARDS AGENCY 25118TH STREET  
SOUTH, SUITE 385 ARLINGTON, VA 22202-3531

AR20230008316, XXXXXXXXXXXXXXX

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Dear XXXXXXXXXXXXXXX:

The Department of Defense Physical Disability Board of Review (DoD PDBR) reviewed your application and found that your disability rating should be modified but not to the degree that would justify changing your separation for disability with severance pay to a permanent retirement with disability. I have reviewed the Board's recommendation and record of proceedings (copy enclosed) and I accept its recommendation. This will not result in any change to your separation document or the amount of severance pay. A copy of this decision will be filed with your Physical Evaluation Board records. I regret that the facts of the case did not provide you with the outcome you may have desired.

This decision is final. Recourse within the Department of Defense or the Department of the Army is exhausted; however, you have the option to seek relief by filing suit in a court of appropriate jurisdiction.

A copy of this decision has also been provided to the Department of Veterans Affairs.