

RECORD OF PROCEEDINGS
PHYSICAL DISABILITY BOARD OF REVIEW

NAME: XXXXXXXXXXXX
BRANCH OF SERVICE: ARMY

CASE: PD-2023-00010
SEPARATION DATE: 20080404

SUMMARY OF CASE: Data extracted from the available evidence of record reflects this covered individual (CI) was an active duty E4, Health Care Specialist, medically separated for "chronic right knee pain status post [s/p] meniscal transplant" with a disability rating of 10%.

CI CONTENTION: No specific contention was made. 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 - 20090318			VAR D - 20081023			
Condition	Code	Rating	Condition	Code	Rating	Exam
Chronic Right Knee Pain			Regenerative Joint Disease (RJD) Right	5260	10%	20080526
COMBINED RATING: 10%			COMBINED RATING OF ALL VA CONDITIONS: 50%			

ANALYSIS SUMMARY:

Right Knee Pain. According to the service treatment record (STR) and MEB narrative summary (NARSUM), the CI underwent medial meniscal surgery in February 2007, where the entire meniscus was removed. However, in October 2007 a cadaveric meniscal transplant was performed, as well as excision of lateral patellar osteophytes and lateral release.

At the 12 December 2007 physical therapy (PT) range of motion (ROM) study, the CI reported right knee pain stiffness and weakness, with pain at a 5/6 out of 10. The examiner recorded severe swelling and an extensor lag gait deviation. The CI could flex the right knee to 115 degrees (normal 140) and extend it to -15 degrees (normal 0) after repetition. During the 18 January 2008 MEB examination (recorded on DD Forms 2807-1 and 2808), 3 months prior to separation, it was noted that the CI wore a right knee brace, but still had full ROM albeit with medial joint pain.

Controlled by: DAF
 Controlled by: SAF/MRBD
 CUI Categories: SP-MIL/SP-PRVCY
 Limited Dissemination Control: N/A
 POC: SAF.MRBD.Worldlow@us.afmil

The 28 January 2008 MEB NARSUM examination, 3 months prior to separation, noted complaints of pain, with increased weight bearing. Physical examination showed full ROM of his knees, however, he had medial joint pain of the right knee and increased pain with squatting and standing from a squat position. At the 26 May 2008 VA Compensation and Pension (C&P) examination, 1 month after separation, the CI reported pain in the right knee, rated as a 6-7 out of 10. Physical examination showed tenderness along the right medial joint line and significant effusion. The ROM study showed 2 degrees of hyperextension and 135 degrees of flexion. Diagnostic testing to elicit pain and instability were negative.

The panel directed attention to its rating recommendation based on the above evidence. The PEB rated the right knee condition 10%, coded 5259 (cartilage, semilunar, removal of, symptomatic), citing medial joint pain of the right knee, otherwise normal, and full ROM. The VA also rated the right knee condition 10%, coded 5260 (leg, limitation of flexion), based on the C&P examination, citing slight non-compensable limitation of motion, but also with tenderness and degenerative changes which support the assigned 10% evaluation.

There was no limitation of motion which supported a rating under the diagnostic codes for limitation of flexion or extension (5260, 5261). However, the persistence of pain after meniscal surgery warranted a 10% rating under the 5259 code. There was no history or evidence of dislocated meniscus or loose body causing frequent locking with recurrent effusions (5258), to support a rating under that code. There was no fracture, nonunion or malunion of the femur or tibia to support consideration under the respective codes for knee impairment related to long bone conditions (5255, 5262). There was therefore no VASRD §4.71a 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 condition 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 20230110, w/atchs
- Exhibit B. Service Treatment Record
- Exhibit C. Department of Veterans Affairs Record

6/1/2023

AR20230007851, XXXXXXXXXXXX.

XXXXXXXXXXXXXXXXXX

Dear XXXXXXXXXXXX:

The Department of Defense Physical Disability Board of Review (DoD PDBR) reviewed your application and found your separation disability rating and your separation from the Army for disability with severance pay to be accurate. I have reviewed the Board's recommendation and record of proceedings (copy enclosed), and I accept its recommendation. I regret to inform you that your application to the DoD PDBR is denied.

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 correspondence has been provided to the counsel listed on your application, XXXXXXXXXXXX.

Enclosure