

RECORD OF PROCEEDINGS
PHYSICAL DISABILITY BOARD OF REVIEW

NAME: XXXXXXXXXXXXX
BRANCH OF SERVICE: AIR FORCE

CASE: PD-2024-00021
SEPARATION DATE: 20041012

SUMMARY OF CASE: Data extracted from the available evidence of record reflects this covered individual (CI) was an active duty E3, Tactical Aircraft Maintenance Helper, medically separated for “status post (S/P) right thalamic stroke with headaches and paresthesia left arm and leg” with a disability rating of 10%.

CI CONTENTION: “Review all conditions” as well as additional conditions not identified by the Medical Evaluation Board (MEB) and/or 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 - 20040625			VARD - 20050830			
Condition	Code	Rating	Condition	Code	Rating	Exam
Right Thalamic Stroke with Headaches and Paresthesia, Left Arm and Leg	8009-8105	10%	Complicated Migraine thought to be Cerebral Thrombosis with Cerebral Infarction	8009-8100	10%	20050713
COMBINED RATING: 10%			COMBINED RATING OF ALL VA CONDITIONS: 10%			

ANALYSIS SUMMARY:

Right Thalamic Stroke with Headaches and Left Arm/Leg Paresthesia. According to the service treatment record (STR) and MEB narrative summary (NARSUM), on 28 June 2003, the CI fell to the ground during a picnic after developing left-sided weakness. A head CT was negative, but a brain MRI showed a right thalamic lesion that was felt to represent a small area of ischemia.

During the 25 February 2004 MEB neurology examination, 8 months prior to separation, the CI reported that during his episode of left-sided weakness and sensory loss, he also experienced a severe headache that had developed gradually. Since that time, he did not have any subsequent headaches, persistent weakness, or any new neurological symptoms, but continued to have sensory complaints of left-sided numbness and paresthesia. The neurologist noted that a full ‘stroke in the young’ evaluation was performed, but did not reveal any hypercoagulable state, vascular lesion, or intercardiac lesion to explain the CI’s symptoms.

The 24 May 2004 MEB NARSUM examination, 5 months before separation, documented CI complaints of persistent left arm and left leg paresthesias, which occasionally bothered him during physical activities such as pushups. He experienced headaches about 1-2 times a month at the most, that were “well treated” with medication. The headaches were “less severe” than the one at initial onset of neurological symptoms. Physical findings revealed normal blood pressure, fluent speech, and normal facial strength and sensation. The CI reported a tingly sensation with any light touch on his left arm and left leg. Reflexes as well as gait were normal.

At the 13 July 2005 VA Compensation and Pension (C&P) examination, 9 months after separation, the CI reported altered sensation in the left side of the body with no other complaint. Physical examination was unremarkable.

The panel directed attention to its rating recommendation based on the above evidence. The PEB rated the right thalamic stroke 10%, dual coded 8009-8105 (brain vessels hemorrhage-Sydenham’s chorea). The VA also rated the condition 10%, dual coded 8009-8100 (brain vessels hemorrhage-migraine headaches), based on the C&P examination, citing “characteristic prostrating attacks averaging one in two months over the last several months.” Panel members agreed that a 10% rating, but no higher, was justified under code 8105 for mild symptoms, which the STR documented as left extremity paresthesia. There was no evidence of impaired sensory function, motor weakness, abnormal movement, or impairment in speech pattern to warrant a 30% rating for moderate symptoms. The panel also considered whether a higher rating was warranted for the headaches occurring once or twice a month. Rating guidance under diagnostic code 8100 is based on the frequency of “prostrating attacks” over the “last several months.” The VASRD does not further define prostrating attacks, however commonly accepted definitions include “utter physical exhaustion or helplessness” (Webster's New World Dictionary of American English), “complete physical or mental exhaustion” or “extreme exhaustion or powerlessness” (Dorland's Illustrated Medical Dictionary). The CI’s report of “less severe headaches” did not meet the definition of prostrating headaches and no periods of incapacitation were reported. Thus, panel members agreed there was insufficient evidence to support a higher 30% rating for headaches. 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 thalamic stroke.

BOARD FINDINGS: In the matter of the right thalamic stroke and IAW VASRD §4.124a, 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 20240502, 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 XXXXXX:

Reference your application submitted under the provisions of DoDI 6040.44 (Section 1554, 10 USC), PDBR Case Number PD-2024-00021.

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.