RECORD OF PROCEEDINGS PHYSICAL DISABILITY BOARD OF REVIEW

NAME: XXXXXXXXX BRANCH OF SERVICE: AIR FORCE CASE: PD-2024-00028 SEPARATION DATE: 20091230

<u>SUMMARY OF CASE</u>: Data extracted from the available evidence of record reflects this covered individual (CI) was an active duty E4, Security Forces Journeyman, medically separated for "low back pain" with a disability rating of 10%.

<u>CI CONTENTION</u>: "All medical conditions were not considered during my Medical Evaluation Board (MEB)." The complete submission is at Exhibit A.

<u>SCOPE OF REVIEW</u>: 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 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 - 20090626			VARD - 20100414			
Condition	Code	Rating	Condition	Code	Rating	Exam
Chronic Low Back Pain	5299-5242	10%	Sacroiliitis, Lumbar Spine with Sciatic Radiculopathy	5236	10%	20090509
COMBINED RATING: 10%			COMBINED RATING OF ALL VA CONDITIONS: 50%			

ANALYSIS SUMMARY:

Low Back Pain. According to the service treatment record (STR) and MEB narrative summary (NARSUM), the Cl's low back pain began in December 2004 without any specific injury or trauma. An MRI in November 2008 revealed normal findings and surgery was not indicated.

The 30 March 2009 MEB NARSUM was authored by the CI's family practice provider and referred to his physical examination findings on 20 January 2009, 11 months prior to separation. At that time, the CI reported pain, rated 1-2/10. The examiner documented full range of motion (ROM) of the upper and lower extremities with 5/5 muscle strength. There was paraspinal muscle tenderness on the left side, and straight leg raise testing was negative.

At the 9 May 2009 VA Compensation and Pension (C&P) examination, 8 months before separation, the CI reported low back pain that she treated with medication. Physical findings revealed left sacroiliac tenderness, but gait and spinal curvature were normal with no evidence of muscle spasms or weakness. Straight leg raise testing was negative. Neurological examination showed normal lower extremity sensory and motor functions. Thoracolumbar ROM

measurements were recorded as pain-free with forward flexion to 90 degrees (normal) and a combined ROM of 240 degrees (normal). Upon repetition, there was no pain, fatigue, weakness, lack of endurance, incoordination, or additional loss of ROM.

The panel directed attention to its rating recommendation based on the above evidence. The PEB rated the low back condition 10%, analogously coded 5299-5242 (degenerative arthritis of the spine). The VA also rated the low back condition 10%, coded 5236 (sacroiliac injury and weakness), based on the C&P examination, citing "tenderness in the left sacroiliac area." Panel members agreed that while there was no compensable rating based on limited thoracolumbar ROM, a 10% rating was justified for the presence of tenderness during both the MEB and C&P examinations. There was no muscle spasm or guarding severe enough to result in an abnormal gait or spinal contour, thus a higher 20% rating was not justified. Also, there was no evidence of intervertebral disc syndrome with incapacitating episodes for a higher rating under that formula.

The panel noted that the MEB submitted "chronic low back pain with sciatic radiculopathy" to the PEB. By not explicitly addressing the radiculopathy, the PEB rendered a de facto "not unfitting" determination for this condition, and thus it is in the panel's scope of review as it was contended by the Cl. Panel members considered whether an additional disability rating was justified for peripheral nerve impairment due to radiculopathy. Based on the STR evidence, the panel agreed that while the Cl may have experienced radiating pain from the back condition, this is subsumed under the general spine rating criteria, which specifically states "with or without symptoms such as pain (whether or not it radiates)." There was no objective evidence of a radiculopathy with functional impairment (such as weakness) that directly impacted fitness for duty. Therefore, panel members concluded that an additional disability rating was not justified on this basis. 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 low back condition.

<u>BOARD FINDINGS</u>: In the matter of the low back 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 20240610, 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-2024-00028.

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.