



DEPARTMENT OF THE NAVY  
BOARD FOR CORRECTION OF NAVAL RECORDS  
2 NAVY ANNEX  
WASHINGTON DC 20370-5100

JRE  
Docket No: 7518-00  
23 January 2002



Dear [REDACTED]

This is in reference to your application for correction of your naval record pursuant to the provisions of title 10 of the United States Code, section 1552.

A three-member panel of the Board for Correction of Naval Records, sitting in executive session, considered your application on 17 January 2002. Your allegations of error and injustice were reviewed in accordance with administrative regulations and procedures applicable to the proceedings of this Board. Documentary material considered by the Board consisted of your application, together with all material submitted in support thereof, your naval record and applicable statutes, regulations and policies. In addition, the Board considered the advisory opinion furnished by designees of the Specialty Leader for Psychiatry dated 13 August 2001, a copy of which is attached, and the information you submitted in response thereto.

After careful and conscientious consideration of the entire record, the Board found that the evidence submitted was insufficient to establish the existence of probable material error or injustice. In this connection, the Board substantially concurred with the comments contained in the advisory opinion. It was not persuaded that you suffered from post traumatic stress disorder during your service in the Marine Corps, or that your misconduct was related or attributable to the effects of such a disorder. Accordingly, your application has been denied. The names and votes of the members of the panel will be furnished upon request.

It is regretted that the circumstances of your case are such that favorable action cannot be taken. You are entitled to have the Board reconsider its decision upon submission of new and material evidence or other matter not previously considered by the Board. In this regard, it is important to keep in mind that a presumption of regularity attaches to all official

records. Consequently, when applying for a correction of an official naval record, the burden is on the applicant to demonstrate the existence of probable material error or injustice.

Sincerely,

W. DEAN PFEIFFER  
Executive Director

Enclosure



Subj: REQUEST FOR COMMENTS AND RECOMMENDATIONS IN THE CASE  
[REDACTED]

martial. This request was granted on 26 May 1970, and on 05 June 1970 the patient was discharged from the Marine Corps.

d. Several references to a medical/psychiatric evaluation prior to discharge exist in the patient's service record. According to reviews of the patient's discharge performed in 1973 and 1977, the patient was evaluated by a physician on 11 May 1970. At the time this evaluation was performed, "no evidence of mental incompetence, psychosis, or disabling neurosis" was uncovered. The consultant's impression was that the patient had a "character disorder." No other evidence of this consultation has been found in the patient's service record or accompanying documentation.

e. On 03 December 1973, the Navy Discharge Review Board (NDRB) considered the patient's request for an upgrade of his discharge. The NDRB concluded that the discharge "should not be changed, corrected, or modified because it was properly and equitably issued."

f. On 22 April 1977, the patient applied for an upgrade of his undesirable discharge under the DoD Special Discharge Review Program (SDRP). The patient's request was granted, and on 16 June 1977, the SDRP upgraded the discharge to a "general discharge under honorable conditions." Subsequent communication from the NDRB, dated 07 November 1979, indicates that the NDRB was directed by the Naval Complaints Review Board (NCRB) to modify the SDRP's upgrade of the patient's discharge. The discharge was now classified as "general/SDRP," with the patient's service characterized as "other than honorable" due to his extended periods of UA.

g. On 27 October 1999, the patient submitted an application for correction of military records. At that time, he indicated that his discharge was characterized as "other than honorable." In his application, the patient contended that he had been granted an honorable discharge by the Department of the Navy, but that this decision was reversed by the Marine Corps. He requested an "upgrade" of his discharge. This request was denied by the Board for Correction of Military Records (BCNR). It is unclear from the BCNR's communication to the patient dated 01 May 2000 whether the "discharge, as issued under the SDRP" which was referenced was a general discharge under honorable conditions or a general discharge under other than honorable conditions.

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OF [REDACTED]

h. On 27 October 2000, the patient submitted a second application for correction of military records. In this application, he indicated that his discharge was characterized as "undesirable." In this second application, the patient contended that the disciplinary problems, which led to his undesirable discharge, were the result of psychological trauma sustained during his tour of duty in Vietnam.

i. According to documentation supplied by [REDACTED] RN, and [REDACTED] MD, the patient presently meets criteria for Posttraumatic Stress Disorder (PTSD). Mr. [REDACTED] indicated that the patient's persistently intrusive thoughts about Vietnam eventually led to his misbehavior and subsequent separation from the Marine Corps. Dr. Antonucci wrote that the patient "has the hx of reaction to the stressor acutely" but did not specify what manifestations of PTSD the patient experienced immediately following his return from Vietnam.

3. THE FOLLOWING OPINIONS ARE SUBMITTED

a. According to documentation submitted by the patient, he presently meets criteria for chronic PTSD. His combat experiences in Vietnam exposed him to a real threat of bodily harm and possible death, as well as engendering feelings of helplessness and fear. According to documentation from Mr. Charette and Dr. Antonucci, the patient continues to revisit those traumatic experiences and manifest hyperarousal and avoidance behaviors.

b. Mr. [REDACTED] and Dr. [REDACTED] indicate in their documentation that the patient manifested symptoms of PTSD immediately following his return from Vietnam, and that these symptoms led to the patient's undesirable discharge in 1970. No documentation of a psychiatric evaluation prior to the patient's discharge has been made available, making it difficult to corroborate this assertion. The only evidence of an examination is the statement, attributed to the Regimental Surgeon, that "no evidence of mental incompetence, psychosis, or disabling neurosis" was uncovered.

c. There also exist items in the patient's record contradicting the assumption that PTSD was a significant factor in the patient's misbehavior. Prior to his 127-day

