



PHOTOS BY JAMES J. LEE/STAFF

Pvt. Rob Van Antwerp, a 20-year-old wounded soldier in the Medical Hold Unit at Walter Reed Army Medical Center in Washington, cuts the hair of his roommate, Pvt. Marcin Pozoga, to pass time. Van Antwerp, a soldier with the 101st Airborne Division, was hit in a suicide bomb attack Nov. 17, 2005, in Bayji, Iraq.

at Walter Reed since November 2005. He is one of 704 outpatient soldiers who are injured or ill and are waiting to make their way through the red tape of the medical evaluation board process at the medical center, according to officials there. The board determines if the soldiers will remain in the Army, or if they will receive a lump-sum separation payment, medical retirement with benefits for life, or nothing at all. They remain in the medical hold unit until their paperwork is complete.

A soldier goes before a physical evaluation board if a medical evaluation board — a team of doctors — determines he is not able to do his job because of his injury. The physical evaluation board then determines again if the soldier should stay in the military and, if not, how much the Defense Department will compensate the soldier. If the soldier receives a disability rating of 30 percent or higher, he gets a disability retirement check based on years of service, rank and the rating percentage. He and his family will also receive medical benefits for life. If the rating is lower than 30 percent, he gets a one-time severance payment.

Since the wars in Iraq and Afghanistan began, the number of

soldiers wading through the paperwork, physicals and appointments has doubled at Walter Reed. According to a Defense Department directive, it should take a total of 120 days from start to finish, but the average stay for Walter Reed soldiers is 270 days. The soldiers navigate a complicated system with the help of counselors with little more experience — or rank — than they have, and who lack training, according to a March 2006 Government Accountability Office report.

On March 2, 2006, Col. Robert Norton, deputy director, Government Relations, for the Military Officers Association of America, told the Senate Committee on Veterans Affairs that since October 2003, medical evaluation boards have averaged 67 days and physical evaluation boards have taken between 87 and 280 days.

“Taken together, the convalescence, [medical evaluation board] and [physical evaluation board] processes appear to average between nine and 15½ months for Army soldiers,” he said.

‘We’re trying to do what’s best’

But Col. Ronald Hamilton, commander of the medical center brigade at Walter Reed, beamed when asked about the work done



Pvt. Martin Jackson is a former 1st Armored Division soldier who injured his back in Balad, Iraq, and is now a patient at Walter Reed.

through the medical evaluation board.

“I think it’s being handled extremely well,” he said. “There are some outliers, where it takes longer than we would expect it to, but we’re not saying, ‘You’re at 365 days — we need to process you out.’ We’re trying to do what’s best for each soldier.”

He came to Walter Reed in June and said he’s proud of the work being done, though he acknowledged changes need to be made to handle the influx of wounded troops. Officials “didn’t anticipate the amount of patient care” the war would bring, he said. The Defense Department has reported 11,116 service members wounded in action from October 2001 to Feb. 10, 2007, who were not returned to duty in theater.

Army-wide, the Government Accountability Office reported that the physical evaluation board caseload grew from 7,218 physical evaluation board cases in fiscal 2001 — before the wars began — to 13,748 cases in fiscal 2005. The number of soldiers waiting to go through the process nationwide averages 5,000.

Col. Andy Buchanan, head of the Physical Disability Agency, which handles the soldiers’ cases, said disability cases spend an average of 37 to 42 days within the Physical Disability Agency. Because Walter Reed receives the extreme cases — multiple injuries, amputations and head injuries — the process can take longer.

“It is a really fair process,” Buchanan said. “I don’t think we rush people through. I don’t think we let them sit around.”

But he said the system is complex, and talked about ways he hopes to improve it: Easy-to-understand pamphlets that break the process down, a requirement



Spc. Cari Uyttewaal is a soldier who was with Department of Nursing at Walter Reed and is now a patient in the Medical Hold Unit at Walter Reed.

that doctors say specifically why a soldier is being rated a certain way rather than a simple “unfit for duty,” and a five-day required “adjudicator course” for everyone involved in the process.

An Army official who requested anonymity proposed that part of the problem may be that soldiers just don’t understand what part of the system they’re in: They think they’re in the medical evaluation board process, but they’re actually still in recovery.

The soldiers say that’s not the case.

In a classroom at Walter Reed Army Medical Center, the first sergeant for the medical holding company lined up three soldiers to talk about their experience with the physical evaluation board. Soldiers going through the physical evaluation board process report to the medical holding company for accountability, to be assigned jobs that work with their injuries, and to have a first sergeant and company commander who can speak up for them when they’re having problems.

In August 2004, as Spc. Karl Unbehagan, 29, reported to his new unit at Fort Benning, Ga., he developed intense migraine headaches. Doctors told the infantry soldier he was not used to the humid weather. A couple of months later, they ran a CAT scan.

“I had a tumor in the third ventricle of my brain,” Unbehagan explained, pointing to the shunt that runs from the scar on his head down to his stomach to relieve the pressure in his brain. “They realized it had nothing to do with the weather.”

The physical evaluation board rated him at zero percent, saying the tumor was a pre-existing condition. Unbehagan has been in the Army for four years, and his doc-



Spc. Karl Unbehagan is a 3rd Infantry Division soldier who was diagnosed with a brain tumor and is now a patient in the Medical Hold Unit at Walter Reed.

tors found no proof the tumor existed before he joined, he said.

Rather than face the civilian world with no benefits, he talked with a free counselor from Disabled American Veterans who told him how to fight the discharge, reclassify as an electronics and satellite repair specialist, and stay in the Army. The process took eight months, which he spent in the medical hold company.

His board was restarted three times: First, his medical profile was lost. Then, somebody forgot to counsel him — a required part of the process. And finally, no one made his file active after he changed his job field, so no one saved him a slot at the repair school, he said.

Spc. Cari Uyttewaal, 24, is an operating-room technician who had been stationed at Walter Reed before beginning her physical evaluation board process. About a year ago, she began having back problems. Doctors discovered she had a herniated disc and recommended she be processed out of the Army because she could not stand for the 10-hour shifts required in the operating room.

But even a soldier who works in the system didn’t make it through without mishap.

“After five months, nothing had been done,” she said. “So my first sergeant transferred me [to the medical hold company] and said it would move faster.”

It took an additional five months before she accepted her informal physical evaluation and a 10 percent disability rating.

Pfc. Martin Jackson, 30, spent 16 months in Iraq as a supply sergeant with 4th Brigade, 27th Infantry Battalion. Two years ago, while running from a mortar round in Balad, Iraq, he tripped

See **WOUNDED** next page