



DEPARTMENT OF THE ARMY  
UNITED STATES ARMY PHYSICAL DISABILITY AGENCY  
6900 GEORGIA AVENUE, NW  
BUILDING 7 WRAMC  
WASHINGTON DC 20307-5001

AHRC-DZB

DEC 14 2010

MEMORANDUM FOR Presidents, U.S. Army Physical Evaluation Boards (PEBs)

SUBJECT: Instructions for Completing DA Form 7652, Physical Disability Evaluation System (PDES) Commander's Performance and Functional Statement

1. Purpose. To provide guidance to the PEBs on continued use of HQDA Ltr 635-08-1 to complete the DA Form 7652. The HQDA Ltr 635-08-1 expired on 8 December 2010. This letter authorized the DA Form 7652 and provided instructions for completing Section III and IV when the case was that of a Medical Corps Officer of a Judge Advocate General Corps Officer.

2. Guidance.

a. The DA Form 7652 remains on the U.S. Army Publishing Website forms link, though the HQDA Ltr 635-08-1 does not.

b. The PEBs will continue to require the DA Form 7652. The HQDA Ltr 635-08-1, attached, remains the instructions for completing the form with one clarification. At para 7b of the Letter, where it refers to, "first line medical supervisor," that means, "first line, clinical medical supervisor."

c. USAPDA will request MEDCOM to distribute this memorandum to the PEBLOs along with a copy of the HQDA Ltr 635-08-1 to provide units when requesting them to complete the DA Form 7652.

d. The DA Form 7652 will be added to the change authorizing the revised DA Form 199s.

3. Point of contact for this action is Ms. Frances Dennis, Policy Officer, (202) 782-3064.

FOR THE COMMANDER:

A handwritten signature in black ink, appearing to read "Daniel Cassidy", written over a horizontal line.

Encl as

Daniel Cassidy  
COL, IN  
Deputy Commander



DEPARTMENT OF THE ARMY  
WASHINGTON, D.C. 20310

HQDA Ltr 635-08-1

DAPE-MPE

8 December 2008

Expires 8 December 2010

**SUBJECT: DA Form 7652, Physical Disability Evaluation System (PDES) Commander's Performance and Functional Statement**

SEE DISTRIBUTION

**1. Purpose.** This letter prescribes use of electronic DA Form 7652, Physical Disability Evaluation System (PDES) Commander's Performance and Functional Statement, to obtain command and personnel information of Soldiers referred into the PDES under the duty-related process. This form will be incorporated into the next complete revision of AR 635-40.

**2. Proponent and exception authority.** The proponent of this Headquarters, Department of the Army (HQDA) Letter is the Deputy Chief of Staff, G-1. The proponent has the authority to approve exceptions to this letter that are consistent with controlling law and regulations. The proponent may delegate this approval authority, in writing, to a division chief within the proponent agency or its direct reporting unit or field operating agency, in the grade of colonel or the civilian equivalent. Activities may request a waiver to this letter by providing justification that includes a full analysis of the expected benefits and must include formal review by the activity's senior legal officer. All waiver requests will be endorsed by the commander or senior leader of the requesting activity and forwarded through their higher headquarters to the policy proponent. Refer to AR 25-30 for specific guidance.

**3. References.** Required and related publications and prescribed and referenced forms are listed in appendix A.

**4. Explanation of abbreviations and terms.** Abbreviations and special terms used in this HQDA Letter are listed in the glossary.

**5. Applicability.** This policy applies to Soldiers of the Active Army, the Army National Guard/Army National Guard of the United States, and the U.S. Army Reserve who are referred into the Physical Disability Evaluation System under the duty-related process. This policy is effective for two years from date of publication unless superseded by the publication of a complete revision (not a rapid action revision) of AR 635-40.

6. **Background.** To properly adjudicate cases, the Physical Evaluation Board (PEB) requires both performance and personnel information. This information is also needed to make certain administrative determinations that impact disability compensation and other benefits accorded to Soldiers who are separated or retired due to physical disability. Previously, this information was provided to the PEB by separate memorandum and certificate from the Soldier's unit commander and servicing personnel activity. Subsequent law and policy changes necessitated additional personnel information. To consolidate this information and reduce the number of separate documents, Fragmentary Order (FRAGO) 29 to Operation Order -7-55 (MEDCOM Implementation of the Army Medical Action Plan (AMAP) - USAMEDCOM) directed reformatting and presentation of this information as a HQDA form.

7. **Policy.**

a. The DA Form 7652 is required for all cases of Soldiers referred to the PEB under the duty-related process. Except as provided in subparagraphs *b* and *c* below, the Soldier's current unit commander is responsible for completion of the form. The unit commander should coordinate with the servicing personnel activity and the Soldier to complete Section II of the form.

b. When the case involves a Medical Corps (MC) officer with a clinical specialty area of concentration (AOC) and assigned to a clinical position, the officer's first line medical supervisor will complete Section III and Section IV. In Section IV, the first line medical supervisor will describe any additional duty limitations not otherwise addressed in Section III. The PEB must have a clear and specific description of how the MC officer's medical condition affects performance as a Soldier and more specifically as a physician. The Physical Evaluation Board Liaison Officer (PEBLO) will coordinate with the servicing personnel activity and the officer to complete Section II of the form.

c. When the case involves a Judge Advocate General Corps officer, Section III and Section IV will be completed by the officer's Staff Judge Advocate (SJA), Command Judge Advocate (CJA), or legal agency/section supervisor. The PEBLO will coordinate with the servicing personnel activity and the officer to complete Section II of the form.

**DAPE-MPE**  
**SUBJECT: DA Form 7652, Physical Disability Evaluation System (PDES) Commander's Performance and Functional Statement**

**Appendix A**  
**References**

**Section I**  
**Required Publications**

**AR 635-40**  
Physical Evaluation for Retention, Retirement, or Separation (Cited in paras 1 and 5.)

**Section II**  
**Related Publications**

This section contains no entries.

**Section III**  
**Prescribed Forms**

**DA Form 7652**  
Physical Disability Evaluation System (PDES) Commander's Performance and Functional Statement (Available at [www.apd.army.mil](http://www.apd.army.mil).)

**Section IV**  
**Referenced Forms**

This section contains no entries.

## **Glossary**

### **Section I Abbreviations**

#### **AMAP**

Army Medical Action Plan

#### **AOC**

area of concentration

#### **ARNG**

Army National Guard

#### **ARNGUS**

Army National Guard of the United States

#### **CJA**

Command Judge Advocate

#### **MC**

Medical Corps

#### **MEB**

Medical Evaluation Board

#### **PDES**

Physical Disability Evaluation System

#### **PEB**

Physical Evaluation Board

#### **PEBLO**

Physical Evaluation Board Liaison Officer

#### **SJA**

Staff Judge Advocate

#### **USAR**

U.S. Army Reserve

**DAPE-MPE**

**SUBJECT: DA Form 7652, Physical Disability Evaluation System (PDES) Commander's Performance and Functional Statement**

**Section II**

**Terms**

**Duty related process**

The process of referral for physical disability evaluation that consists of a Medical Evaluation Board (MEB) to document the Soldier's medical status and a Physical Evaluation Board (PEB) to determine the Soldier's fitness. If determined unfit, the PEB further determines the Soldier's eligibility for disability benefits and type of disability disposition according to the provisions of Title 10, United States Code, Chapter 61.

**Section III**

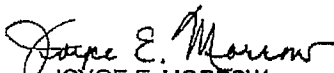
**Special Abbreviations and Terms**

This section contains no entries.

By Order of the Secretary of the Army:

GEORGE W. CASEY, JR.  
*General, United States Army*  
*Chief of Staff*

Official:

  
JOYCE E. MORFOW  
*Administrative Assistant to the*  
*Secretary of the Army*

**Distribution:**

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U.S. Army North  
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U.S. Army Special Operations Command  
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U.S. Army Space and Missile Defense Command/Army Forces Strategic Command  
Eighth Army  
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U.S. Army Criminal Investigation Command  
U.S. Army Installation Management Command  
U.S. Army Intelligence and Security Command  
U.S. Army Military District of Washington  
U.S. Army Medical Command  
U.S. Army Network Enterprise Technology Command/9th Signal Command (Army)  
U.S. Army Acquisition Support Center  
U.S. Army Corps of Engineers

DAPE-MPE

**SUBJECT: DA Form 7652, Physical Disability Evaluation System (PDES) Commander's  
Performance and Functional Statement**

U.S. Army Reserve Command

U.S. Army Space and Missile Defense Command

Superintendent, U.S. Military Academy, West Point

U.S. Army Records Management and Declassification Agency



**PHYSICAL DISABILITY EVALUATION SYSTEM (PDES)  
COMMANDER'S PERFORMANCE AND FUNCTIONAL STATEMENT**

For use of this form see HQDA Letter 635-08-1; The proponent agency is DCS, G-1.

**PRIVACY ACT STATEMENT**

**AUTHORITY:** 10 USC chapter 61 and 5 USC 301  
**PURPOSE:** To provide information to the PEB on the impact of a medical impairment on a Soldier's ability to perform duties and to provide administrative information that impacts disability adjudication and/or benefits if the Soldier is determined unfit.  
**ROUTINE USES:** See Purpose  
**DISCLOSURE:** Information is required in order to properly adjudicate the Soldier's case in the best interests of the Soldier and the Army.

**SECTION I: SOLDIER DEMOGRAPHIC INFORMATION**

1. DATE (YYYYMMDD)	2a. LAST NAME	2b. FIRST NAME	2c. MIDDLE NAME	3. PMOS
4. BASD	5. COMPONENT	6a. BIRTHDATE (YYYYMMDD)	6b. AGE	7. UNIT OF ASSIGNMENT

**SECTION II: ADMINISTRATIVE INFORMATION**

Instructions: The information in this section should be confirmed by the appropriate personnel activity and with the Soldier.

DATA ITEM	Yes	No	
1. Is Soldier charged or under investigation for an offense chargeable under the UCMJ, which could result in dismissal or punitive discharge?	<input type="checkbox"/>	<input type="checkbox"/>	
2. Is Soldier pending voluntary or involuntary administrative separation under AR 635-200 (enlisted) or AR 600-8-24 (officer)? Chapter _____, Para _____	<input type="checkbox"/>	<input type="checkbox"/>	If answer is YES, specify the chapter and paragraph.
3. Does Soldier have an approved voluntary retirement? Date retirement approved: _____	<input type="checkbox"/>	<input type="checkbox"/>	If answer is YES, list date retirement was approved.
4. Is officer within 12 months of mandatory retirement for age or years of service or approved for Selective Retirement? Date of officer's mandatory retirement: _____	<input type="checkbox"/>	<input type="checkbox"/>	If answer is YES, list mandatory retirement date.
5. REGULAR COMPONENT SOLDIERS ONLY: Does Soldier have prior service in the Selected or Individual Ready Reserve?	<input type="checkbox"/>	<input type="checkbox"/>	If answer is YES, specify type of service. Ex: Served as a member of the ARNG or a USAR Troop Program Unit.
6. RESERVE COMPONENT SOLDIERS ONLY: Is Soldier within 12 months of his or her mandatory removal date? Mandatory Removal Date: _____	<input type="checkbox"/>	<input type="checkbox"/>	If answer is YES, list mandatory removal date.
7. RESERVE COMPONENT SOLDIERS ONLY. If the answer to question to 6 is yes, will Soldier have 20 qualifying years of service at time of his or her mandatory removal date for purposes of eligibility for non regular retirement?	<input type="checkbox"/>	<input type="checkbox"/>	
8. ACTIVE COMPONENT ONLY. Is Soldier within 12 months of his or her Retention Control Point (RCP) and will Soldier be eligible for length of service retirement at the RCP? RCP date: _____	<input type="checkbox"/>	<input type="checkbox"/>	If answer is YES, list RCP date.
9. Was Soldier's retirement for length of service delayed by Stop Loss? MILPER MESSAGE _____	<input type="checkbox"/>	<input type="checkbox"/>	If answer is YES, list the applicable MILPER Stop Loss message.
10. If an enlisted Soldier, is the Soldier due an automatic advancement? (See AR 600-8-19 concerning promotable status of enlisted Soldiers in the PDES.) Date due automatic promotion: _____	<input type="checkbox"/>	<input type="checkbox"/>	If answer is YES, list date Soldier due next automatic advancement.
11. If an enlisted Soldier, is the Soldier on a semi-centralized or centralized promotion list?	<input type="checkbox"/>	<input type="checkbox"/>	
12. If an officer, is the Soldier on an approved promotion list?	<input type="checkbox"/>	<input type="checkbox"/>	
13. Has Soldier previously held higher rank? Highest rank held: _____	<input type="checkbox"/>	<input type="checkbox"/>	If answer is YES, list rank and explain the reason Soldier is not serving in highest rank previously held.

DATA ITEM (Continued)	Yes	No	
14. Was Soldier on 24 September 1975, a member of the Armed Forces, to include the Reserve components, the National Oceanic and Atmospheric Administration (NOAA and formerly the Coast and Geodetic Survey), the U.S. Public Health Service, or under a binding written agreement to become such a member? (NOTE: A Soldier who was a contracted cadet of a U.S. Service Academy or a contracted ROTC cadet or a member of an Armed Force of another country on that date is included in the meaning of Armed Forces.)	<input type="checkbox"/>	<input type="checkbox"/>	
15. Was Soldier's current referral to MEB/PEB the result of evaluation by an MOS/Medical Retention Board (MMRB)?	<input type="checkbox"/>	<input type="checkbox"/>	If answer is YES, attach MMRB results.

**SECTION III. PERFORMANCE INFORMATION**

You are entering information into a performance-based system. Focus your comments on chronic conditions. The PEB must understand the impact of your Soldier's conditions on his/her ability to perform duties in the primary MOS. Severe, acute physical conditions generally need little performance discussion because the PEB members easily understand the limitations.

Should the PEB determine the Soldier is not fit for either a mental disorder or residuals of a Traumatic Brain Injury (TBI), the PEB must gauge the Soldier's capacity to perform in the civilian sector. For these conditions, the PEB looks at the Soldier's current functioning in the military, without regard to whether the Soldier is performing in his/her PMOS.

In all cases of Medical Corps officers with a clinical specialty area of concentration and assigned to a clinical position, the officer's first line medical supervisor will complete Sections III and complete and sign in IV. In all cases of officers of the Judge Advocate General Corps (JAG), Sections III and IV will be completed by the officer's Staff Judge Advocate, Command Judge Advocate, or agency/section supervisor.

**SECTION III A. For each Soldier, regardless of condition(s).**

For each item, mark Yes, No, or N/Obs (not observed). In Section III D: fully explain every 'No.'

#	ITEM	Yes	No	N/Obs
1.	Soldier performs duties in MOS (to include assigned MOS duties in unit).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Soldier in appropriate TO&E or TDA position for grade and MOS.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Soldier's medical conditions/limitations affect unit accomplishing mission. <i>If Yes, fully explain in Section III D.</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.	I recommend retaining this Soldier.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**SECTION III B. For each Soldier with a mental disorder (including Post Traumatic Stress Disorder (PTSD), major depressive disorder, anxiety disorder, bipolar disorder, etc.).**

Consider Soldier's performance over the past several months. Indicate whether performance seems to be improving, worsening, or static. For example, where Soldier demonstrated periods of not completing tasks to time and quality standards, but is now completing tasks to standards indicate Soldier had issues but is now performing normally.

**SECTION III B (Continued)**

Use Section III D if additional space required and to provide additional discussion.

Describe/list *discrete, specific* duties/tasks Soldier can complete to standard (time and quality).

A.

B  No difficulties.

C  Not observed.

2 Describe *types of duties* Soldier does not complete to standard (time and quality).

A

B  No difficulties.

C  Not observed.

3 Indicate whether performance issues are due to (choose all that apply):

A  Soldier needs more time for each task;

B  Soldier performs duties/tasks with errors or incompletely.

C  Soldier does not complete the duties/tasks.

D  Soldier unable to complete 8 hour duty day.

E  No difficulties.

F  Not observed.

Considering 1-3 above, and Soldier's work performance during the time you have observed Soldier, choose most accurate description of Soldier's performance:

A  Periods of diminished attention or performance only when significantly stressed. If known, indicate type of stress eliciting performance issues. Indicate frequency (for example: once two months ago for two days before court appearance). Describe performance during this time.

B  Occasional decrease in work efficiency (performs more slowly and/or with more errors).

C  Intermittent periods where Soldier unable to perform occupational tasks.

D  Occasional difficulties with reduced reliability and productivity.

E  Not observed.

5 Effective work relationships with supervisors and/or co-workers.

A  Has effective work relationships with both supervisors and co-workers.

B  Difficulty establishing and/or maintaining effective work relationships with supervisors and/or co-workers. Discuss.

C  Does not establish and/or does not maintain effective relationships with supervisors and/or co-workers. Discuss.

D  Not observed.

**SECTION III C. If Soldier has a diagnosis of Traumatic Brain Injury (TBI), assess Soldier's performance.**

Use Section III D to provide additional discussion.

1. Task/duty completion (functional capacity).

Completing tasks/duties to standard.

A  Performs tasks/duties to standards.

B  Mild difficulties completing tasks/duties to standards. Discuss.

C  Moderate difficulties completing tasks/duties to standards. Discuss.

D  Severe difficulties completing tasks/duties to standards. Discuss.

E  Not observed.

2. Decision Making.

Based on your observations of Soldier's performance, can you gauge the quality of Soldier's decisions? If so, indicate whether Soldier:

- A  Makes reasonable decisions, including complex or unfamiliar ones. Discuss and include examples of Soldier's reasonable decisions.
- B  Makes reasonable decisions; occasionally makes (or avoids making) unreasonable complex or unfamiliar decisions. Discuss and include examples.
- C  Makes simple decisions but usually not complex or unfamiliar decisions. Discuss and include examples.
- D  Not observed.

3. Social Interactions.

Social interaction. Describe whether Soldier displays inappropriate social interactions. Discuss.

- A  Describe behaviors and indicate frequency (occasionally, frequently, most of the time; or you can indicate in %s.) Discuss.
- B  Not observed.

4. Performance issues due to Soldier's complaints of TBI residuals.

Where you have observed negative performance issues and Soldier attributes these performance issues to physical symptoms (e.g., headache; dizziness; insomnia, hypersensitive to sound or light) indicate the impact on Soldier's performance.

- A  Mild interference, e.g., able to complete with more time or completes work with more than the normal frequency of errors.
- B  Moderate interference, e.g., the result is the equivalent to missing work several hours a day. An example of the impact on performance and the frequency of this impact is: "headaches requiring rest period during most days."
- C  Not observed.

5. Workplace Interactions.

Does Soldier appear: irritable; impulsive; unpredictable; unmotivated; verbally aggressive; physically aggressive; belligerent; apathetic; moody; uncooperative; inflexible; unfeeling; or unaware of condition? If so, indicate how these characteristics appear to impact Soldier's workplace interactions:

- A  Do not interfere with workplace interaction. Discuss.
- B  Occasionally interfere with workplace interaction. Discuss.
- C  Frequently interfere with workplace interaction. Discuss.
- D  Interfere or preclude workplace interaction on most days. Discuss.
- E  Occasionally requires supervision (for safety of self or others.) Discuss.
- F  Not observed.

SECTION III D. COMMENT SECTION

**INSTRUCTIONS:**

Whenever possible, include more than "Soldier not performing because of profile limitations." Indicate specific duties Soldier currently performs and hours per week Soldier performs duties other than those within Soldier's PMOS. Describe Soldier's performance.

For III A, B, and C above, reference Item # and provide additional detail/discussion, as required. Use additional pages as required.

Continuation Page

SECTION IV: COMMANDER'S VALIDATION AND SIGNATURE

1. PRINTED NAME		2. RANK	3. BRANCH	4. TITLE
SIGNATURE		6. UNIT ADDRESS		
7. PHONE NUMBER	8. E-MAIL ADDRESS	9. DSN	10. FAX NUMBER	

SECTION III D. COMMENT SECTION (Continued)

**INSTRUCTIONS:**

Whenever possible, include more than "Soldier not performing because of profile limitations." Indicate specific duties Soldier currently performs and hours per week Soldier performs duties other than those within Soldier's PMOS. Describe Soldier's performance.

For III A, B, and C above, reference Item # and provide additional detail/discussion, as required. Use additional pages as required.