U.S. Department of	
Homeland Security	
U.S. Coast Guard	
CGHQ-4808 (Rev. 4-08)	

COAST GUARD PHYSICAL DISABILITY EVALUATION BOARD FINDINGS AND RECOMMENDED DISPOSITION

1. EMPLID				SECTIO	NI-	– EVALUEE II	NFORM	ΙΑΤΙΟ	N			
2. NAME (LAST, FIRST, MIDDLE INITIAL) 3. GRADE OR RANK 4. BOARD TYPE IPEB 5. DATE 6. PBD: ADBD: 7. CREDITABLE ACTIVE DUTY SERVICE 8. AGE OF EVALUEE 9. STATUS (CHECK ONE) 0 ATE YEARS MONTHS DAYS YEARS MONTHS USCG USCG USCGR SECTION II - FINDINGS FINDINGS FINDINGS FINDINGS FINDINGS FINDINGS FINDINGS FINDINGS FINDINGS FINDINGS												
6. PBD: ADBD:	7. CREDITABLE AG		SERVICE		8. A		E		9. STATUS	G (CHECK (ONE)	
				DAYS								
			SECTION			<u> </u>				USCGA	CADET	
			SECTION		NGS							
	5		N N		E AY	PERFORMAN CE OF ACTIVE DUTY TRAINING OR IN LINE OF DUTY DURING WAR OR NATIONAL EMERGENCY (YES OR NO)					DISABILITY RESULT ARMED CONFLICT (YES OR NO)	
10.		11.	12.	13.		14.	15.	16.	17.	18.	19.	20.
23. YES NO PHYSICA	ON WOULD ADVERS	ELY AFFEC	F PHYSICAL OF SUBSTANTIA	R MENTAL H	EAL1	RMATION RELAT TH. IONSTATES THA	IVE TO H	HIS/HEF	R PHYSICA	AL OR MEN	TAL GULAR OI	
NEAR FU	TURE WILL NOT VIS							DO NOT	RENDER	AN EVALU	EE UNFIT	
											210 1102	
									•			
THE MEMORANDUM, "RECOM IAW THE PHYSICAL EVALUAT Init. I accept the IPE Init. I reject the IPEE Init. I conditionally a	MENDED FINDIN FION SYSTEM, CO EB findings and reco B findings and reco accept the IPEB find	GS OF INF MDTINST I ommended mmended c lings and re	ORMAL PHYS M1850.2D, CH disposition and isposition and commended c	SICAL EVAL I. 4. d waive my I demand a f disposition a	-UAT right forma	ΓΙΟΝ BOARD." t to a formal hea al hearing. ng as my reques	OTHER aring. at for reta	WISE,	PDES AG	CTION WII	L PROC	EED
	(Signature of Evalu	ee)					(Dat	e)				
	SI	ECTION V	– ADM-1 AI	OMINISTR	ATI	VE USE ONL	Y					
Me												
						NO						
Assigned Counsel Acknowle	edgement: NAME											
SECTION	ON VI – EVALUE	E RESPO	NSE TO FO	RMAL PH	YSI	CAL EVALUA		BOAR	D (FPEE	3)		
I hereby acknowledge receipt of Init. I intend to sub Init. I do not intend	f the recommended mit a rebuttal.	findings of al. Further,	the Formal Ph	nysical Evalu	uatio	n Board.		ng peri		, 		

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SECTION VII - SIGNA	TURE OF BOARD MEMBERS	
TYPED NAME AND GRADE OF BOARD PRESIDENT	SIGNATURE	DATE
TYPED NAME AND GRADE OF MEDICAL MEMBER	SIGNATURE	DATE
TYPED NAME AND GRADE OF MILITARY MEMBER	SIGNATURE	DATE
TYPED NAME AND GRADE OF RESERVIST OR OTHER MEMBER	SIGNATURE	DATE
SECTION VIII - REBUTTAL FO	LLOWING FORMAL BOARD HEARING	
REBUTTAL RECEIVED AND ATTACHED TO THE RECORD		
	PSED AND NO REBUTTAL HAS BEEN RECEIV	/ED
EVALUEE HAS INDICATED IN SECTION V THAT HE/SHE WIL		
RIGHT TO FILE A REBUTTAL IS FORFEITED. EVALUEE DID N ADJOURNMENT OF INTENT TO FILE REBUTTAL	NOT NOTIFY THE FPEB IN WRITING WITHIN 3	DAYS OF FINAL
ADJOORNIVIENT OF INTENT TO FILE REBUTTAL		
SECTION IX - ACTION OF T	HE PHYSICAL REVIEW COUNSEL	
DECISION		
OTHER		
NOTED ERROR OR OMISSION		
INCORRECT ASSIGNMENT OF VASRD CODE(S)		
PYRAMIDING OF IMPAIRMENTS		
INCORRECT PERCENTAGE OF DISABILITY ASSIGNED TO TH	E VASRD DESCRIPTIVE DIAGNOSIS/CODE(S)	
INSUFFICIENT EVIDENCE TO SUPPORT THE FINDINGS AND	RECOMMENDED DISPOSITION.	
SIGNATURE OF PHYSICAL REVIEW COUNSEL		DATE
		DATE
SECTION X - ACTION OF T	HE JUDGE ADVOCATE GENERAL	
THE PROCEEDINGS ARE IN ACCEPTED FORM AND ARE TECH		NO
THE FINDINGS ARE SUPPORTED BY THE EVIDENCE OF RECO		NO
THE RECOMMENDED DISPOSITION IS SUPPORTED BY THE E	120	NO
ADDITIONAL COMMENTS ARE ATTACHED	YES	NO
SIGNATURE OF JUDGE ADVOCATE GENERAL (OR DESIGNEE)		DATE
SECTION XI - ACTION OF THE FINAL AP	PROVING AUTHORITY (FOR THE COMMANDA	NT)
FINAL ACTION: The findings and recommendation	s of the Physical Disability Evaluation Board are approved.	
SIGNATURE AND TITLE OF THE FINAL APPROVING AUTHORITY (FOR THE COMMANDANT		DATE

COAST GUARD PHYSICAL DISABILITY EVALUATION BOARD FINDINGS AND RECOMMENDED DISPOSITION (Continuation Sheet)

GHQ-4808C (Rev. 4-08)	(Continuation Sheet)								
NAME (LAST, FIRST, MIDDLE INITIAL)	3. GRADE OR RAN	3. GRADE OR RANK 4. BOARD TYPE 5. DATE 6. EMPLID IPEB FPEB							
	FINDINGS (CON	ITINUED FROM (
FINDINGS		(Yes or No)	PROXIMATE RESULT OF PERFORMANCE OF ACTIVE DUTY TRAINING OR IN LINE OF DUTY DURING WAR OR NATIONAL EMERGENCY (YES OR NO)	PERMANENT (YES OR NO) MAY BE PERMANENT	(YES OR NO) DISABILITY IS COMBAT RELATED (YES OR NO)	DISABILITY RESULT OF INSTRUMENTATALITY OF WAR (YES OR NO)	DISABILITY RESULT OF ARMED CONFLICT (YES OR NO)	DISABILITY	
10.	11. 12	2. 13.	14.	15. 1	6. 17.	18.	19.	20	
			24 00						
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