

This is the story of my experiences with the Military and the VA system. I want to make it clear that I am not against the any of the military or the VA. I only hope that through my experiences and many others that we can initiate much needed change.

“ALL I WANT IS WHAT I DESERVE”

by Anthony Neff

I am a 22 year old disabled Army veteran from Frederick, Maryland. All my life I grew up with the dream and ambition of following in my family's tradition and joining the Armed Forces. That chance came for me in October of 2002. I was in my junior year of high school at Thomas Johnson High School in Frederick, when I was contacted by my Army recruiter. Not long after we had first spoken I was signing papers and preparing for the service. Though I still had over nine months in the Delayed Entry Program I was dedicated from Day One. I would spend my mornings before school doing physical training with my recruiter; afternoons assisting at the office, and learning the Army values. After my Graduation in 2003 I spent the two months of summer vacation with my family, preparing myself for the life I was about to take on.

I officially entered the Army on August 13th, 2003. Just over nine weeks later, in October, 2003, I completed basic training at Ft. Knox, Kentucky. It's true what they say about the hills, they are big, and they do hurt. From there I was reassigned to the Ordnance Training Brigade at Aberdeen Proving Grounds, here in Maryland. I had chosen the job title of 44b, or Metal Worker. It was my specialty in high school. I had been certified as an arc welder, and had a good knowledge of the craft. The training lasted 16 weeks, but because of my experience I completed it without difficulty, even finishing some classes ahead of everyone else. I ended up graduating as the honor graduate in February, 2004, and officially becoming part of the U.S. Army Ordnance Corps.

My first duty station was Camp Hovey, South Korea. I was assigned to the 2nd Infantry Division, 2nd Brigade Combat Team, 2nd Forward Support Battalion, Bravo Company, Service and Recovery Section. I know it's a mouthful. Much of my time there was spent

as any other service member does when not in a war zone. We worked on our daily jobs, trained in the field and went on some practice missions. Then in April of 2004, we received word that our brigade, for the first time in 50 years, was going to be deploying. No other time in history had any unit been deployed on two hardship tours back to back. Not to mention that 2ID had not been deployed out of Korea in over 50 years. So history was being made, and I felt honored to be a part of it. Our training began immediately and in August, 2004 we were on our way to Kuwait to continue training for our deployment into Iraq.

Once in Kuwait, one wondered how any human being would want to live there. It was hot, from what I could see there was no shade available, and not to mention sand everywhere. We all discovered as our time there progressed that you get sand in places that you never knew existed. After spending about 20 days training and adapting to the environment we set off on a three day convoy through Iraq to our final destination, Camp Al taqaddum Air Base, right in the center of the Sunni Triangle, a few miles from Fallujah and Ramadi. A great vacation spot to take the kids. Our particular mission there was to support our unit in combat operations as well as the 1st and 2nd Marine divisions. My particular section's duties were to evaluate and fix broken vehicles, mostly damaged by explosive devices ("IEDs"), gunfire, and combat operations. Some vehicles were beyond repair, but we did what we could. We also were credited in developing a shield system that went behind the gunner in a turret to give him/her added protection when in the vehicle. While I was there, I also volunteered to help support the Marine Divisions with Post security. This included patrols, and being stationed at the perimeter of the installation in a shack surrounded by sandbags for 8-10 hours or more. With limited equipment, we monitored particular sectors of the area and reported any suspicious activity or enemy action to the base command, and acted accordingly based upon the rules of engagement set by our command. I will not go in to detail about the possible causes of my injury, but it wasn't long after I had been in Iraq that I was injured. In fact, it was the day after Christmas. Talk about "Happy Holidays."

I woke up on the 26th of December with intense pain in my lower back, and a very sharp pain all down my left leg, with numbness and tingling, and it even extended into my right leg. As a welder my job in Iraq included lifting heavy sheets of metal, armor plating, large vehicle parts and armor, and of course, constant bending and moving. I was also a gunner since I carried an automatic weapon, or M249 (SAW). So I can add the jolting and knocking around that comes with being up in the gun turret of a vehicle. There were many possibilities for my injury, even including physical training, and being knocked down on more than one occasion by an enemy attack.

I was carried from my room by two fellow soldiers to the company aid station. There was only one nurse on duty there. The only thing she could do is give me a shot of Toradol and have me return at a later date. The shot worked enough where I was able to walk. And luckily that day, David Letterman came to our camp. So it turned out to be a day of rest for me. But the next day the pain was back and increasing in intensity. It was then that I saw the PA at the aid station who gave me more medication, and sent me to the main part of the base to the hospital run by the Navy.

On my way there by ambulance I noticed that on my paperwork the cause of injury as written by the nurse was, "soldier played football twice the other day and lifts small car parts, etc," despite all I had told the nurse of my activities. I would later dispute this and to this day I am not sure if it was ever corrected. Once I was admitted to the hospital an x-ray was taken of my lower back to hopefully determine the cause. I waited on a bed for the results. The doctor, a Navy captain, came in and told me that the x-ray was inconclusive: there was cloudiness in the area of my lower back on the film. His diagnosis was that the x-ray machine was not working properly, and that I most likely only had pulled a muscle or something minor. I was sure that this was not anything minor. I had pulled muscles before. I knew that this was something dealing with my nerves, particularly the sciatic nerve, which I knew was a main nerve that if damaged could lead to paralysis of my legs. I voiced my opinion, but was told I was going to be fine. All I needed was a few days rest and I would be able to return to duty. He admitted me for about a week and put me on pain medication, and bed rest.

After a few days on the medication, and anti-inflammatory drugs, I was able to stand and move with the assistance of crutches. Continuing on the medication, I was soon returned to my unit on a light duty profile and continued pain medication, which ranged from Ibuprofen to Percocet, and other drugs. I was taken off the crutches soon after returning to my unit. As I continued on this regimen I still experienced pain, and continued to only receive another light duty profile and more medication. This seems to be the Army's answer for everything. They all go through extensive training, but I thought that they would implement some other form of treatment besides Ibuprofen. It wouldn't be until I returned to the States nine months later that I would receive additional treatment.

It was a struggle each and every day. Small tasks, like taking a shower and picking up items would cause me discomfort and pain. Not to mention wearing my heavy protective vest and pounds of other related gear. No matter what I did to dull the pain it remained with me. Some days were worse than others. I told myself that it was nothing just as the doctors had told me. I needed to be up and moving, and exercising. It was the only way I was told I would get better.

In July of 2005, my unit finally redeployed to the states, to Ft. Carson, Colorado. After a short, three day break with family we started a post deployment assessment as well as in-process into Ft. Carson. This included everything from hearing, visual, mental, and physical exams. Hearing and visual were easily completed. The mental or Post Traumatic Stress Disorder assessment lasted anywhere from thirty seconds to a maximum of three minutes. Or so it seemed from my observations. There were over 500 soldiers at a time processing through each station. I remember my mental health exam being very brief. There were a few questions, "do I have nightmares, thoughts of suicide, etc." of course my answer was, "No." I had just gotten back! I was more excited than anything. I had made it back alive and I had seen my family. And when in Iraq there was no time to really think about things. I hardly ever slept for a full night. It was a war zone, and at any moment we could be attacked. At any moment and I would have to get up and protect my fellow soldiers. There was no time for nightmares -- I was *in* one. Research has

shown that PTSD can show up immediately, but is more likely to show up long after the service member returns. We still have Vietnam veterans in this country suffering from PTSD.

After a full day of testing and evaluations, the last station was to see a provider, or doctor. Here they would ask medical questions and address any problems we were experiencing. I told my provider my story and that I was still experiencing extreme pain. It had stabilized, but was hindering my ability to enjoy my life. He referred me for an MRI scan immediately. He was surprised that the medical staff had not evacuated me to a facility or camp with better capabilities.

The scan was done within a few days in a trailer outside the main hospital. I had to wait a little over a week for the results to be determined, but once they were I was called back into the provider's office. At this point he handed me a large brown envelope and told me that my condition was beyond the capabilities of the installation, and that I was being referred to an outside civilian care center. He gave me the address to The Spine Center in Colorado Springs, CO. This center was only a short drive outside Ft. Carson. What scared me most was that he would not tell me what was wrong. So there I was, 20 years old, just returned from just under two years overseas, with an injury too complicated for the Army to fix. Needless to say I was extremely scared for the fact that the balance of my life and career was in that envelope and I had no idea what it said.

I arrived at the Spine Center and was greeted promptly by the staff there and checked in. It wasn't long before I was called back into an exam room. A nurse came in and took my vitals and asked me questions regarding my health, and the history of why I was there and what happened to me. As I told her I remember her eyes widening as if in horror. I think I even saw a tear.

Once her evaluation was done she left, and I was then greeted by Doctor Bee, a spinal doctor. He took the envelope from me and went into another room to look at them. He came back in and told me that I had two severely herniated discs, or bulging discs. I also

had some nerve damage related to my sciatic nerve. It appeared to be pinched due to the bulging discs. He also noticed that there was a large amount of swelling. He told me it was my body's natural defense to fight it. I told him of the x-ray taken nine months earlier in Iraq, at the hospital on my camp. He said that I should have been immediately sent for an MRI and for treatment. It Turns out the cloudiness seen on the x-ray image was fluid. The only option given to me was outpatient surgery to repair the discs and give me relief from the nerve pain. Another common alternative is steroid injections done in a three series shot over time. Though due to the swelling already occurring in my lower back we decided on surgery, and scheduled it for September 25th, 2005.

The Surgery went very well. I was able to walk only a few hours after surgery which the doctor said was incredible. I'm sure it was because of the pain medication. I do not remember it, but apparently I had to use the facilities. After a few hours in the recovery room, I was discharged under the care of family on six weeks of convalescent leave. I spent two weeks in a hotel room, where I spent most of the time in bed occasionally getting up and walking up and down the halls with one of my family members. I was allowed to go home to Maryland for the remaining four weeks of leave. I continued my recovery there, walking and exercising under doctors' orders.

After the six weeks I returned to Dr. Bee for a follow up appointment. We concluded that the surgery went well, and that my incision was healing nicely. He then told me that this type of procedure can take up to two years to fully heal. I was returned to my unit on post with a strict limited duty profile to see how I would adapt. I experienced pain in my lower back and legs, though not as extreme as before the surgery. I was placed on a physical training program that had me at first walking a pre determined route, later jogging, and small stretching exercises to get back into shape.

Around February of 2006 I started experiencing an increase in pain and was placed on a physical therapy program that consisted of a bike ride and stretching assisted by a TENS unit. After approximately eight sessions I was experiencing an increase in pain and discomfort, especially after my therapy. And even with heat therapy I had no relief. My

unit moved me into a supply area, in which my duties were to simply enter information into a computer and catalog items.

Small parts were not a problem to move, though the larger ones were handled by the other soldiers with me. I was soon reassigned to Ft Hood in May of 2006, still on a limited duty profile, that was considered what is commonly referred to as a "Dead Man's," profile. No training, no heavy lifting, no marching, and due to the controlled substances I was on and their effects I could not be in a maintenance shop.

I did not like this at all. I could not work as I wanted. I was working on getting a promotion, and wanted to be in the shop with my section. The pain was there all the time but all I wanted was to try to continue my career. It angered me that I could not get any answers. A large majority of the doctors I saw would not even make contact with me and barely answered my questions. They all had that special screen for their computers that doesn't allow you to see what they are typing. Most would mumble something as I spoke and stare at the screen. For all I knew they were playing Solitaire.

So each appointment would come to an end just as the others. I would receive more medication and another profile. Why I was sent to Fort Hood I am not sure, as it violated many of the Army's regulations.

I began working in the office filing paperwork for my section over a period of about four months, during which I saw multiple doctors for my pain. All of whom renewed my profile and prescribed me some sort of medication be it acetaminophens, steroids, anti-inflammatory, or non steroids. It wasn't until August of 2006 that I finally saw a doctor or provider who appeared to know what he was doing, and told me that I needed to go see a doctor in orthopedics for better treatment and answers about my career, and if I would recover.

I was sent for another MRI by orthopedics and shortly after returned to them for the results. The doctor made her diagnosis and told me that I had Lumbar Disc Disease,

commonly known as Degenerative Disc Disease. She then upgraded my profile to a “No Activity” profile and initiated my Medical Board proceedings. I was returned to work as the work I was doing was considered not threatening to my condition.

Over the next three months, I continued on a regimen of medications and filling out paperwork for my medical board. Along with my health records and evidence of surgery from the Spine Center, my packet was sent off for a review and rating decision. This would ultimately determine if I was going to be discharged from the Army or if I was going to be referred for more treatment. I was told that it could take up to six weeks for my packet to return.

To my surprise *two days later* I was called in to the office and handed my decision packet. I was to be discharged honorably by medical separation with a **10% disability**. A severance pay was calculated in based upon my rate of pay and years in service, that came to just over \$12,000. I was disgusted that it was returned so quickly as if it wasn't even looked at. I learned later on that this seemed to be the usual decision no matter what the condition.

(We all saw the special on CNN recently where the veteran had over a quarter of his skull missing and his face deformed along with the loss of fingers and I believe one of his hands. His rating decision was also 10%.)

I had the opportunity to appeal the decision, which required traveling to another post and appearing before a medical board and presenting my case. I was too upset with everything that I had been through, from the misdiagnosis, all the medication and lack of proper treatment, I decided to sign for the 10% disability and begin out processing the Army.

Even my commanders and soldiers in my unit were disgusted. But there was nothing they could do for me. Even if there was, I was not told of it. I felt I was being an inconvenience to them just by their attitudes. After a few short weeks of turning in

equipment and paperwork I was officially discharged from the United States Army on December 18th 2006. I was never referred for any treatment. The only thing besides my discharge papers that I received was an appointment for a claim with the Department of Veterans Affairs. I received no advice for my condition, no matter how many times I asked. The answer was medication and that I was going to be alright. At that point in time I was happy to be out of the Army. But I was also depressed as the military had been my life, and now everything was cut short. And though I received excellent training in preparation for the civilian life and job world, there was and still is a void in me. I would do anything to be able to be back in the service.

As I began civilian life again back in my home town of Frederick, Maryland, I started to miss the military life even more. Finding a job wasn't easy either as I was still experiencing pain and discomfort. I worked as a car salesman for a short time, and up until the middle of September, 2007 as a car wash supervisor. During this time I had also begun my processing with the Department of Veterans Affairs. It was just as much a nightmare as the medical treatment I received in the Army.

I began treatment in the VA in January of 2007. My initial claim was filled out by a service officer in Fort Hood, for my lower back and pain in my left leg. My initial exams and appointment came very quickly and I admit the staff was very pleasant and understanding, with only a few unpleasant experiences. Overall I was pleased with the system. I received my disability claim decision after only a few months with an overall rating of 50% disability which entitled me to \$712 a month. **But since I had received a severance pay from the military I had to pay it back.** And in the short time in between being discharged from the military and starting a new job near the end of January I had spent all but a small portion of it. **Most was spent on bills like truck payment and insurance, clothes and housing items, and my cell phone.** It was pre-determined that \$501 was to be withheld until June of 2008 to pay back the severance pay, leaving me with **\$212 a month.**

Since I was making far less than what I was making in the military I asked for a decrease in payment on the severance pay. I was quickly denied. I also initiated a claim for possible hearing and vision loss, and Post-Traumatic Stress Disorder or PTSD. All of which were scheduled quickly and all of which were quickly denied.

I understand the hearing and vision results as I cannot argue with scientific proof. But the PTSD exam was very short as the examining official was in a hurry. At that time I was happy to be out of the military and though I was experiencing depression, anxiety, and a heightened sense of awareness. It also affected my social life as I found it hard to adapt and felt alone inside. I had told the doctor that my treatment for me was surrounding myself with family and good friends. I thought that I didn't need extensive psychological treatment. This would prove to be wrong later on.

I continued to see the doctors at my local VA hospital for pain in my lower back and leg, as I had appealed the first decision. After an MRI in June 2007, I was sent to see a neurologist who determined that I did have degenerative disc disease and that the discs were beginning to become herniated again just as before.

He was also noticing a formation of scar tissue on the left side of my spine, and a moderate to severe stenosis of my spinal canal, which sounded bad to me of course. He then confirmed my suspicions and told me that I was going to need another surgery to possibly attempt to fix the problem, and it would involve the same procedure as before. But due to the system being backed up I was told that it could be up to six months before I was able to be scheduled for it. And as the months went on since January my pain was increasing.

Since I left the military I occasionally used a cane to walk if the pain became too much. I experienced episodes where I had so much pain that I could not move and by the end of July I found myself using the cane on a full time basis.

Through the end of August to the end of September I made several trips to the ER because the pain was so severe. This emergency room however was 45 minutes away as I could not go to a local emergency room because I would have to pay out of pocket for the treatment and have to file with the VA for reimbursement. My family did not have the assets for this.

At the end of September, I saw my primary care provider at a local VA outpatient clinic. She had been monitoring my situation since I first filed for disability. She noticed that I was having a sudden increase in pain and feared that my condition had worsened. She prescribed more pain medication for me to include a medication to offer relief from my nerve damage. She also recommended that I leave my job as my condition was getting worse and did not want me injuring myself even further.

Along with this evidence she recommended that I be placed on 100% disability as of October 1st up to my surgery which is still not scheduled through my recovery. I was also put in to receive a TENS unit, heating pad, and a larger cane. All of which I received promptly. From that time up until November I followed the doctor's orders of limited movement and treatment with my medication and therapy tools.

By the beginning of October, I had begun to use the cane full time as I found it difficult to walk without assistance. In November my primary care physician, noticing the increase in pain referred me for another MRI. Shortly after in the beginning of December I went for my MRI. I have yet to know the results. I have an appointment with the neurologist at the end of January.

It was at this time also that I was offered a wheelchair for assistance. I gladly accepted and have been using ever since. My PMC also referred me to an anesthesiologist for pain management. This doctor was very tentative and understanding of my condition and answered all of my questions. He suggested a series of steroid injections into my lower back. These injections are given in a series of three over a period of time. Some patients experience relief and some don't.

For my condition however we were not sure if I would get any relief and if I did it would only be temporary. I still needed surgery. I decided to try the injections. The first of which is a simple epidural outside the spine towards the side causing discomfort. In my case it was the left side. I felt immediate relief from the injection in mid December. I was also given a shot of Fentanyl, which is many times stronger than morphine. I felt the effects of the injection and had little pain over a week. But shortly after the pain returned as it was before.

The next injection done on January 7th, 2008, and was much more painful as I received no pain medication and the injection is right at the spine. He also used the steroids this time. I had never experienced that much pain before. The doctor though told me that the pain was a good thing and that I would feel relief shortly. I can honestly say I feel a small amount of relief, but I still have to use a cane and my wheelchair.

Over this period of time I have also been in constant contact with the VA to find out about my rating, which I was to understand was 100%. Though anytime I would call, I would be either sent to another state other than Maryland's regional office in Baltimore, put on hold for untold amounts of time. I could not get any answers other than my records were at the hospital or they were working on it. And in this time I have also been on a large amount of medication that includes, Tramadol, Gabapentin, Naproxen, morphine, acetaminophen, hydroxazine, and paroxetine. I was also given paroxetine, or Paxil, for depression, and anxiety, as I had begun seeing a mental health specialist for my PTSD claim.

It wasn't until recently that I learned that I have nightmares and scream and yell in my sleep. I do not remember the nightmares but often wake up in a cold sweat. I find it difficult to fall asleep, and once I am it is not for long, as the pain wakes me and I have to move to another position. And then the battle begins yet again to fall asleep.

Some nights are better than others, but the only way I get any relief is with my heating pad and a TENS unit. I have told my mental health specialist of everything that I have gone through. All signs of PTSD. Since October I have been on these medications, and because of them I cannot drive let alone operate any machinery. It also became painful to drive. **And because I was only receiving the small amount of \$212 a month I was unable to keep up with payments on my truck and had to cancel the lease. That truck was everything to me. It took me a very long time to save up enough to afford it. And even though it is a material possession I am still upset about it.**

It is now January of 2008. I have yet to be scheduled for my surgery I was told I needed back in June of 2007. I have lost everything because I cannot work, and have not been able to work since the 1st of October. I experience pain and discomfort all of the time. Not to mention the large amount of medications, including narcotics, non-narcotics and controlled substances that I take three times a day. This hinders my ability to enjoy life. **I am 22 years old and going through all of this.**

The medication alone is bad enough. I have lost everything I worked for. I can't even go out with family or friends for more than a few hours without having to return home to use my heating pad and to lie down until the pain goes back to a manageable level. And every day since October I have tried everything to speed up my claim, even having my doctor submit additional reports. I am represented by the DAV. But my representative has done all he can and continues to do so every day.

I wait each day for the mail to come to see if there is anything regarding my claim. I have just about given up on calling. And due to the fact that I cannot work, and only receive \$212 a month I am grateful that I have a loving family, because I would be another statistic of a homeless veteran living on the street. That is if they ever get the statistics right on the amount of homeless vets.

It is a hard battle that I do not intend to quit on. I know there are more veterans out there waiting for treatment, some worse than me, but we are all entitled to proper care and

treatment as we have given so much. I work with many organizations and groups that fight for better care and to increase funding to the VA for better facilities and equipment.

The VA is backlogged with over 400,000 claims, which we all feel is unacceptable and there is no excuse but failed leadership. Hopefully with the new secretary we will see changes. Though many of our wounds can be healed there are many that will be there for the rest of our lives. I believe that every service member from every war experiences some form of PTSD. I am tired of hearing that claims have been denied and even that PTSD is merely an attempt by veterans to get more money. **All I want is what I deserve.** I gave so much for this country as a young man with dreams and aspirations, and in spite of all that has happened I would still do it all over again. All I want is to get my life back: to begin anew in hopes that I will someday be well enough to return to the United States Army. It's who I am and always will be.

I come from a family with a strong military background, and the spirit of this nation runs in my veins. My great grandfather, rest his soul, served in the Army during World War II. My grandfather served 30 yrs in the Air Force and served in Vietnam. To this day, he still works for the government with the White House Communications Center under Boeing. My Mother and my aunt both served in the Air Force as well. So I believed it was my destiny to carry on my families name and honor my country and those before me who gave the ultimate price. And I will continue to fight though not on the battlefield, but for the veterans of the past, the veterans of the present, and the veterans of the future. After all, we are the strongest nation in this world protected by the bravest men and women who fight voluntarily for all of us.

Don't we deserve to be honored and given the best in and out of service to our country?

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