U. S. DEPARTMENT OF LABOR

Employees' Compensation Appeals Board

In the Matter of IRIS M. VEGA and DEPARTMENT OF THE AIR FORCE, BARKSDALE AIR FORCE BASE, La.

Docket No. 96-1134; Submitted on the Record;
Issued January 28, 1998

DECISION and ORDER

Before GEORGE E. RIVERS, WILLIE T.C. THOMAS, A. PETER KANJORSKI

The issue is whether appellant has established a recurrence of disability commencing August 4, 1992 causally related to her February 6, 1991 employment injury.

In the present case, appellant filed a claim alleging that she sustained a right arm injury in the performance of duty on February 6, 1991 as a result of opening heavy cases. The Office of Workers' Compensation Programs accepted the claim for a right forearm strain. Appellant returned to work on April 15, 1991.[1] On August 12, 1992 appellant filed a notice of recurrence of disability, indicating that the date of recurrence was August 4, 1992. By decision dated May 27, 1993, the Office denied the claim on the grounds that the medical evidence was insufficient to establish the claim. An Office hearing representative affirmed the denial by decision dated November 2, 1994. Appellant requested reconsideration, and by decision dated November 22, 1995, the Office denied modification of its prior decisions.

The Board has reviewed the record and finds that appellant has not established a recurrence of disability commencing August 4, 1992.

A person claiming a recurrence of disability due to an accepted employment-related injury has the burden of establishing by the weight of the substantial, reliable, and probative evidence that the disability for which she claims compensation is causally related to the accepted injury. This burden of proof requires that a claimant furnish medical evidence from a physician who, on the basis of a complete and accurate factual and medical history, concludes that the disabling condition is causally related to the employment injury and supports that conclusion with sound medical reasoning.[2]

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[1] Appellant was a part-time employee at the time of injury and returned to part-time employment.

[2] *Robert H. St. Onge*, 43 ECAB 1169 (1992); *Dennis J. Lasanen*, 43 ECAB 549 (1992).

In this case, the medical evidence is not sufficient to establish that appellant had a disabling condition commencing on or after August 4, 1992 causally related to her employment injury of February 6, 1991. In a report dated August 4, 1992, Dr. Michael T. Acurio, an orthopedic surgeon, stated that appellant had reported pulling her wrist while mopping the floor at work.[3] Dr. Acurio did not discuss the February 6, 1991 employment injury. In a report dated August 10, 1992, Dr. Donald S. Brian, an orthopedic surgeon, stated that appellant had developed some right wrist and shoulder pain from lifting and mopping. Dr. Brian indicated that appellant would stay off work and would return to physical therapy. He does not discuss the prior employment injury.

In a report dated August 23, 1994, Dr. Brian provided a history, noting that appellant reported pulling some heavy cases at work on February 6, 1991 resulting in an acute onset of pain. Dr. Brian stated that appellant experienced a recurrence of right wrist pain on August 4, 1992 while pulling a mop. He concluded that appellant "suffers from sympathetic dystrophy involving her right upper extremity -- this first manifested itself following an on-the-job injury in February of 1991. To my knowledge there has been no other injury to the upper right extremity and all of the treatment and therapy required since February 1991 have been related to aggravations of the original injury."

The Board notes that the diagnosis of sympathetic dystrophy has not been accepted as employment related. Dr. Brian had provided a diagnosis of sympathetic dystrophy since a February 22, 1991 report, but he did not provide a reasoned opinion as to causal relationship with employment. In the August 23, 1994 report, Dr. Brian stated that appellant had a sympathetic dystrophy that first manifested itself following an employment injury, without providing a reasoned opinion describing the specific employment activities on February 6, 1991 and explaining causal relationship between the employment injury and the reflex sympathetic dystrophy. Moreover, with respect to disability commencing August 4, 1992, Dr. Brian does not clearly explain the nature and extent of an aggravation on or after August 4, 1992. The Board notes that the contemporaneous medical evidence refers to lifting and mopping activities in private employment; if an aggravation is produced by an independent cause not related to appellant's federal employment, there would be no compensability under the Federal Employees' Compensation Act.[4]

The remainder of the medical evidence of record is of little probative value on the issue presented. In a report dated May 24, 1993, Dr. Albert W. Pearsall, IV, an orthopedic surgeon, indicated that appellant had significant right shoulder and hand problems, for which the etiology was unclear. In a September 21, 1993 report, Dr. Clinton G. McAlister, an orthopedic surgeon, diagnosed a reflex sympathetic dystrophy without an opinion as to causal relationship. The physical therapy reports are of no probative medical value as they were not prepared by a physician under the Act.[5] It is, as noted above, appellant's burden to establish her claim. The

[3] The record indicates that appellant's federal employment had been terminated in October 1991. In August 1992 appellant was working for a private contractor.

[4] *See Robert W. Meeson*, 44 ECAB 834 (1993).

[5] *Barbara J. Williams*, 40 ECAB 649, 657 (1989).

Board finds that the evidence of record is not of sufficient probative value to establish a recurrence of disability in this case.

The decision of the Office of Workers' Compensation Programs dated November 22, 1995 is affirmed.

Dated, Washington, D.C.
January 28, 1998

George E. Rivers
Member

Willie T.C. Thomas
Alternate Member

A. Peter Kanjorski
Alternate Member