

U.S. DEPARTMENT OF LABOR

Employees' Compensation Appeals Board

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In the Matter of THOMAS A. TRUNICK and U.S. POSTAL SERVICE,  
POST OFFICE, Youngstown, Ohio

*Docket No. 96-1965; Submitted on the Record;  
Issued June 18, 1998*

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DECISION and ORDER

Before GEORGE E. RIVERS, DAVID S. GERSON,  
WILLIE T.C. THOMAS

The issue is whether appellant sustained a recurrence of disability on May 2, 1995 causally related to his employment injury of March 28, 1994.

Appellant strained his left hamstring while in the performance of duty on March 28, 1994. He stopped work that day and received continuation of pay and compensation for temporary total disability. He returned to work for four hours a day beginning June 14, 1994. On November 8, 1994 he was released to return to his regular job duties. Appellant stopped work on May 2, 1995, however, and filed a claim of recurrence.<sup>1</sup> In decisions dated August 31, 1995 and May 21, 1996, the Office of Workers' Compensation Programs denied his claim of recurrence on the grounds that the evidence failed to establish the element of causal relationship.

The Board finds that the medical evidence is insufficient to establish that appellant sustained a recurrence of disability.

An individual who claims a recurrence of disability resulting from an accepted employment injury has the burden of establishing that the disability is related to the accepted injury. This burden requires furnishing 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 who supports that conclusion with sound medical reasoning.<sup>2</sup>

Appellant has submitted several form reports from his attending family practitioner, Dr. Ronald S. Paloski, but these reports are insufficient to establish his claim of recurrence. In a

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<sup>1</sup> A treatment note dated May 4, 1995 indicates that appellant was putting up drywall, but could not do it, that he got up from a sitting position after 45 minutes and had pain.

<sup>2</sup> *Dennis E. Twardzik*, 34 ECAB 536 (1983); *Max Grossman*, 8 ECAB 508 (1956); 20 C.F.R. § 10.121(a).

form report dated May 16, 1995, Dr. Paloski diagnosed a strained left hamstring muscle and indicated with an affirmative mark that this condition was caused or aggravated by the employment activity that occurred on March 28, 1994, when appellant felt a pull in the back of his left leg while bending over. In similar form reports dated June 19 and August 28, 1995, Dr. Paloski indicated that appellant had aggravated his injury of March 28, 1994.

The Board has held that when a physician's opinion on causal relationship consists only of checking "yes" to a form question, that opinion has little probative value and is insufficient to establish causal relationship.<sup>3</sup> Appellant's burden includes the necessity of furnishing an affirmative opinion from a physician, who supports his conclusion with sound medical reasoning. As Dr. Paloski did no more than check "yes" to a form question, his May 16, June 19 and August 28, 1995 opinions on the causal relationship between the recurrence of disability on May 2, 1995 and the employment injury of March 28, 1994 is of little probative value and is insufficient to discharge appellant's burden of proof.

In a narrative report dated September 27, 1995, Dr. Paloski reported that a consulting orthopedic surgeon, Dr. John L. Baumeier, had attributed appellant's recurrence in part to both myofascial pain syndrome and a postural deficit, with the right leg being shorter than the left by history. Because this report does not attempt to explain how the claimed recurrence of May 2, 1995 was causally related to the incident that occurred at work on March 28, 1994, it has no probative value to establish appellant's claim.

In a narrative report dated November 17, 1995, Dr. Paloski stated that appellant had consistently presented with "constant" pain in his left leg and a "sharp" pain in his left buttock when sitting or standing that radiates to the back of his left knee. Objectively, Dr. Paloski noted, appellant ambulated with an antalgic gait, favoring his left leg. Pain was noted to palpation of the left hamstring muscle at the lower border of the gluteus maximus muscle. Dr. Paloski reported: "I feel that his original injury was never completely resolved from March of 1994 and was self-aggravated upon his recurrence of symptoms in May of 1995." In a similar report dated December 4, 1995, Dr. Paloski stated as follows: "Please be advised that it is my medical opinion that [appellant] suffered from a recurrence of his original injury of [March 28, 1994] in May of 1995. I feel that this resulted from the fact that his original injury was never completely resolved, which resulted in the return of symptoms as previously noted."

Although these reports are supportive of appellant's claim, they lack the sound medical reasoning necessary to establish the element of causal relationship. It is not enough for Dr. Paloski simply to state his opinion or feeling. He must provide a well-reasoned medical discussion or explanation that demonstrates that his opinion on the relationship of appellant's recurrence to the employment injury of March 28, 1994 is medically sound and logical, not simply speculation on his part or an unsupported theory. References to progress notes and any other medical documentation that may bridge the gap between appellant's release to full and unrestricted duty on November 8, 1994 and his stoppage of work on May 2, 1995 would be helpful in this regard. Without such reasoning, his November 17 and December 4, 1995

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<sup>3</sup> E.g., *Lillian M. Jones*, 34 ECAB 379 (1982).

opinions offer little more than do the form reports he previously submitted and are insufficient to establish the element of causal relationship.<sup>4</sup>

The Board notes that Dr. Paloski should also address the issue raised by Dr. Baumeier's July 10, 1995 report. In that report, Dr. Baumeier diagnosed myofascial pain syndrome and a postural deficit, with the right leg being shorter than the left by history. He recommended that if some deficit at the right sacral base was confirmed by postural x-rays, "then leveling this [with a full shoe lift] should hopefully reduce [appellant's] reoccurrence of difficulties in the future." Radiological studies on August 2, 1995 confirmed shortening of the right lower extremity by 7/16 of an inch and a lowering of the sacral base by a quarter of an inch on the right. This evidence tends to implicate a possible neurological etiology to appellant's complaints. Indeed, a November 8, 1995 report from Dr. Kenneth M. Cardlin noted that appellant's symptomatology and physical examination was consistent with a nerve root syndrome, with symptoms having been fairly constant in nature and location with each episode. Dr. Paloski should account for this evidence if he is to explain how appellant's recurrence of disability in May 1995 was causally related to the strained hamstring muscle he suffered in March 1994.

Because the medical opinion evidence supporting appellant's claim of recurrence lacks sufficient rationale to establish the element of causal relationship, the Board finds that appellant has not discharged his burden of proof.

The May 21, 1996 decision of the Office of Workers' Compensation Programs is affirmed.

Dated, Washington, D.C.  
June 18, 1998

George E. Rivers  
Member

David S. Gerson  
Member

Willie T.C. Thomas  
Alternate Member

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<sup>4</sup> Medical conclusions unsupported by rationale are of little probative value. *Ceferino L. Gonzales*, 32 ECAB 1591 (1981); *George Randolph Taylor*, 6 ECAB 968 (1954).