## U. S. DEPARTMENT OF LABOR

## Employees' Compensation Appeals Board

In the Matter of MARSHA VAZMINA <u>and</u> U.S. POSTAL SERVICE, YOUNGSTOWN POST OFFICE, Youngstown, Ohio

Docket No. 96-876; Submitted on the Record; Issued March 9, 1998

## **DECISION** and **ORDER**

## Before GEORGE E. RIVERS, BRADLEY T. KNOTT, A. PETER KANJORSKI

The issue is whether appellant has met her burden of proof in establishing that her chalazion<sup>1</sup> of the upper eyelid was causally related to factors of her employment.

On September 2, 1995 appellant, a mail processor, filed a claim for a chalazion which she related to dust and dirt at the employing establishment. She noted that this was the second occasion that she had developed a chalazion. In a January 5, 1996 decision, the Office of Workers' Compensation Programs rejected appellant's claim on the grounds that fact of injury was not established.

The Board finds appellant has not met his burden of proof.

A person who claims benefits under the Federal Employees' Compensation Act<sup>2</sup> has the burden of establishing the essential elements of his claim. Appellant has the burden of establishing by reliable, probative and substantial evidence that his medical condition was causally related to a specific employment incident or to specific conditions of employment.<sup>3</sup> As part of such burden of proof, rationalized medical opinion evidence showing causal relation must be submitted.<sup>4</sup> The mere fact that a condition manifests itself or worsens during a period of employment does not raise an inference of causal relationship, between the condition and the employment.<sup>5</sup> Such a relationship must be shown by rationalized medical evidence, of causal

<sup>&</sup>lt;sup>1</sup> "An eyelid mass that results from chronic inflammation of a meibomian gland and shows a granulomatous reaction to liberated fat when subjected to histopathological examination; sometimes called meibomian or tarsal cyst." *DORLAND'S ILLUSTRATED Medical Dictionary* (25th ed., 1974).

<sup>&</sup>lt;sup>2</sup> 5 U.S.C. §§ 8101-8193.

<sup>&</sup>lt;sup>3</sup> Margaret A. Donnelly, 15 ECAB 40, 43 (1963).

<sup>&</sup>lt;sup>4</sup> Daniel R. Hickman, 34 ECAB 1220, 1223 (1983).

relation based upon a specific and accurate history of employment incidents or conditions which are alleged to have caused or exacerbated a disability.<sup>6</sup>

Appellant submitted several medical reports in support of her claim. In an August 23, 1994 report, Dr. Lyn E. Yakubov, a Board-certified ophthalmologist, stated that appellant was seen on July 19, 1995, with a chalazion of the right upper eyelid, which had been present for two and a half weeks. She indicated that the chalazion was incised and drained on July 24, 1995. She commented that this condition can occur and be aggravated with chronic exposure to environmental conditions including dust and other particles in the air, including work areas. In a November 27, 1995 report, Dr. Randall M. Maceyko, an osteopath, indicated that in an October 7, 1995 eye examination he found a chalazion of the right upper eyelid. He noted that he referred appellant to Dr. Yakubov for removal of the chalazion which was performed on November 24, 1995. He reported that since the spring of 1994 appellant had had two chalazions removed from the right evelid and one removed from the left eyelid. He indicated that appellant started at the employing establishment in May 1993. He related that appellant stated that the employing establishment was a dusty environment and related her repeated chalazions to the dusty environment at work. Dr. Maceyko stated that he tended to agree with appellant. In a December 1, 1995 report, Dr. Yakubov reported that appellant was seen on November 24, 1995, again for a chalazion of the right upper eyelid, which was incised and drained. She noted that this was appellant's third incident of chalazion since April 1994 with no prior history or incident. She stated that a change in work environment for the past two years, in which appellant indicated that dust and dirt particles existed may be a factor in the development of chalazia, since appellant stated that there had not been any other changes in her personal or social lifestyle. While the reports of Dr. Yakubov and Dr. Maceyko related appellant's repeated chalazions to dust and dirt in the environment at work, they did not describe in physiological detail how the dust or dirt in the employing establishment would cause the chalazions that appellant experienced at work. The physicians gave only a general statement that dust or dirt in the environment, could cause chalazions without specifically discussing how the dust or dirt in appellant's employing establishment would cause his chalazions. These medical reports therefore do not meet appellant's burden of proof in establishing how his condition was causally related to factors of his employment.

<sup>&</sup>lt;sup>5</sup> Juanita Rogers, 34 ECAB 544, 546 (1983).

<sup>&</sup>lt;sup>6</sup> Edgar L. Colley, 34 ECAB 1691, 1696 (1983).

The decision of the Office of Workers' Compensation Programs, dated January 5, 1996, is affirmed

Dated, Washington, D.C. March 9, 1998

> George E. Rivers Member

Bradley T. Knott Alternate Member

A. Peter Kanjorski Alternate Member