

U. S. DEPARTMENT OF LABOR

Employees' Compensation Appeals Board

In the Matter of DEBORAH J. SPENCER and DEPARTMENT OF VETERANS AFFAIRS,
VETERANS ADMINISTRATION MEDICAL CENTER, Cleveland, OH

*Docket No. 99-1805; Submitted on the Record;
Issued October 2, 2000*

DECISION and ORDER

Before DAVID S. GERSON, WILLIE T.C. THOMAS,
A. PETER KANJORSKI

The issue is whether appellant has met her burden of proof in establishing that her right hand condition was causally related to her employment.

On May 28, 1998 appellant, then a 36-year-old secretary, filed a claim stating that on May 8, 1998 her right hand locked and became swollen as she used a faulty computer mouse. In a July 28, 1998 decision, the Office of Workers' Compensation Programs denied appellant's claim on the grounds that she had not met her burden of proof in establishing that her conditions of bilateral carpal tunnel syndrome and left ulnar neuropathy were causally related to her employment. In an August 20, 1998 letter, appellant, through her attorney, requested a hearing before an Office hearing representative. In an April 15, 1999 decision, the Office hearing representative found that appellant had filed a claim for a traumatic injury, not an occupational injury. She further found that appellant had not established that her right hand condition was causally related to the use of her computer mouse on May 8, 1998.

The Board finds that appellant has not established that her right hand condition was causally related to her employment.

A person who claims benefits under the Federal Employees' Compensation Act¹ has the burden of establishing the essential elements of her claim. Appellant has the burden of establishing by reliable, probative and substantial evidence that her medical condition was causally related to a specific employment incident or to specific conditions of employment.² As part of such burden of proof, rationalized medical opinion evidence showing causal relation must be submitted.³ The mere fact that a condition manifests itself or worsens during a period of

¹ 5 U.S.C. §§ 8101-8193.

² *Margaret A. Donnelly*, 15 ECAB 40, 43 (1963).

³ *Daniel R. Hickman*, 34 ECAB 1220, 1223 (1983).

employment does not raise an inference of causal relationship between the condition and the employment.⁴ Such a relationship must be shown by rationalized medical evidence of causal relation based upon a specific and accurate history of employment incidents or conditions which are alleged to have caused or exacerbated a disability.⁵

Appellant filed her claim for compensation on a CA-1 form for a traumatic injury. At the February 3, 1999 hearing, appellant indicated that her duties including typing, doing spreadsheets, processing, setting up databases and performing other tasks on the computer. She testified that her condition had been developing over time but the pain in her right hand became intolerable on May 8, 1998 as she worked with a broken computer mouse. She also noted that she had filed a traumatic claim for problems in her left hand. However, in the context of this case, it is irrelevant whether appellant's claim was initially filed as a traumatic injury case and subsequently expanded into a claim for an occupational condition. In either situation, appellant has not submitted sufficient medical evidence to establish a causal relationship between her employment and her right hand condition.

In a June 10, 1998 report, Dr. Sung I. Shin, a Board-certified plastic surgeon, indicated that appellant complained of burning and shooting pain while operating the computer. Dr. Shin indicated that appellant's range of motion of the right wrist and metacarpal joint was restricted due to subjective pain but there was no evidence of mechanical interference. He noted appellant had positive Tinel's signs and Phalen's signs in both hands. Dr. Shin diagnosed compression neuropathy including radial tunnel syndrome and carpal tunnel syndrome, bilaterally. In a June 19, 1998 report, Dr. R. Rolon-Torres indicated that an electromyogram (EMG) showed bilateral median nerve entrapment mononeuropathy at or distal to the wrist, which was consistent with moderate carpal tunnel syndrome. Dr. Rolon-Torres noted that the right side was more affected than the left side. He also reported that the EMG showed left ulnar neuropathy distal to the dorsal ulnar cutaneous sensory nerve which was consistent with Guyon's canal syndrome. While the medical evidence submitted by appellant showed a diagnosis of bilateral carpal tunnel syndrome and left ulnar neuropathy, the physicians did not discuss the cause of these conditions. The medical evidence of record does not state whether or explain how appellant's employment, either on May 8, 1998 or in the time period before that date, caused the diagnosed conditions. Appellant, therefore, has not met her burden of proof in establishing that her right arm condition was causally related to her employment.

⁴ *Juanita Rogers*, 34 ECAB 544, 546 (1983).

⁵ *Edgar L. Colley*, 34 ECAB 1691, 1696 (1983).

The decisions of the Office of Workers' Compensation Programs dated April 15, 1999 and July 28, 1998 are hereby affirmed.

Dated, Washington, DC
October 2, 2000

David S. Gerson
Member

Willie T.C. Thomas
Member

A. Peter Kanjorski
Alternate Member