

U. S. DEPARTMENT OF LABOR
Employees' Compensation Appeals Board

In the Matter of VIOLETA A. KARAAN and U.S. POSTAL SERVICE,
POST OFFICE, Oakland, CA

*Docket No. 99-1866; Submitted on the Record;
Issued September 21, 2000*

DECISION and ORDER

Before MICHAEL J. WALSH, MICHAEL E. GROOM,
PRISCILLA ANNE SCHWAB

The issue is whether appellant has more than a 10 percent impairment of her left upper extremity or 10 percent of her right upper extremity for which she received a schedule award.

On March 5, 1992 appellant, then a 32-year-old distribution machine clerk, filed a notice of occupational disease and claim for compensation (Form CA-2) alleging that her right carpal tunnel syndrome was due to her federal employment.¹ The Office of Workers' Compensation Programs accepted the claim for right carpal tunnel syndrome, paid compensation and authorized surgery.

On June 6, 1996 appellant filed an occupational disease claim alleging that her left carpal tunnel syndrome was due to her federal employment.² On July 2, 1996 the Office accepted appellant's claim for bilateral carpal tunnel syndrome, paid compensation and authorized surgery. Appellant stopped work on August 1, 1996 and returned to a modified light-duty job on May 6, 1997.

On February 27, 1998 appellant filed a claim for a recurrence of disability.

On March 6, 1998 appellant filed an occupational disease claim alleging that her carpal tunnel was flaring up because of her job duties.³ The Office accepted this claim for bilateral carpal tunnel and left carpal tunnel release on June 5, 1998.

¹ This was assigned claim number A13-977054.

² This was assigned claim number A13-1099013. By letter dated July 2, 1996, the Office combined the two claims under the file number A13-1099013.

³ This was assigned claim number A13-1156512. The Office combined appellant's prior two claims, A13-977054 and A13-1099013, with her most recent claim, A13-1156512.

On September 17, 1998 appellant filed a claim for a schedule award.

In a report dated October 26, 1998, Dr. Noah D. Weiss, an attending Board-certified orthopedic surgeon, reported that appellant had reached maximum medical improvement as of September 16, 1998. Based upon a physical examination, he noted that appellant had a full range of motion, that her two point discrimination was intact and that she had a negative bilateral provocative testing for bilateral carpal tunnel syndrome. Regarding grip strength, he noted 25/25/25 in the right and 12/10/10 in the left which, he believed, were not legitimate maximum efforts.

On March 11, 1999 the Office medical adviser reviewed the case record and the October 26, 1998 report by Dr. Weiss. She stated that, pursuant to the American Medical Association, *Guides to the Evaluation of Permanent Impairment* (4th ed. 1993), Table 16 at page 57, entrapment neuropathy of the right wrist was mild which caused a 10 percent impairment of the right upper extremity. Utilizing the A.M.A., *Guides* (4th ed. 1993) Table 16 at page 57, entrapment neuropathy of the left wrist was also mild which caused a 10 percent impairment of the left upper extremity.

On March 17, 1999 the Office granted appellant a schedule award for a 10 percent impairment of the right upper extremity and a 10 percent impairment of the left upper extremity.

The Board finds that appellant has no greater than a 10 percent permanent impairment to the right upper extremity and no greater than a 10 percent impairment to the left upper extremity.

Under section 8107 of the Federal Employees' Compensation Act⁴ and section 10.304 of the implementing federal regulations,⁵ schedule awards are payable for permanent impairment of specified body members, functions or organs. The schedule award provisions of the Act set forth the number of weeks of compensation to be paid for permanent loss of the use of the members of the body listed in the schedule.⁶ However, neither the Act nor the regulations specify the manner in which the percentage of impairment shall be determined. For consistent results and to ensure equal justice for all claimants, the Office adopted the A.M.A., *Guides*⁷ as a standard for determining the percentage of impairment and the Board has concurred in such adoption.⁸

In the present case, the Office accepted that appellant sustained carpal tunnel in both arms as a result of her federal employment. By decision dated March 17, 1999, appellant was granted a schedule award for 10 percent loss of use of the right upper extremity and a 10 percent loss of use of the left upper extremity.

⁴ 5 U.S.C. § 8107.

⁵ 20 C.F.R. § 10.304.

⁶ 5 U.S.C. § 8107; *see also James A. England*, 47 ECAB 115, 117 (1995).

⁷ A.M.A., *Guides*, (fourth edition 1993).

⁸ *Thomas L. Iverson*, 50 ECAB ____ (Docket No. 98-446, issued August 5, 1999); *Leisa D. Vassar*, 40 ECAB 1287 (1989); *Francis John Kilcoyne*, 38 ECAB 168 (1986).

If appellant's physician does not use the A.M.A., *Guides* to calculate the degree of permanent impairment, it is proper for an Office medical adviser to review the case record and apply the A.M.A., *Guides* to the examination findings by the treating physician.⁹ In this case, Dr. Weiss did not provide an opinion regarding appellant's impairment pursuant to the A.M.A., *Guides*, but did provide physical findings and loss of grip strength. An impairment to the upper extremity caused by entrapment neuropathy can be evaluated by measuring the sensory and motor deficits, or by use of Table 16 at page 57 of the A.M.A., *Guides* which provides a diagnosis based impairment value for impairment due to entrapment neuropathy.

The Office medical adviser was the only physician of record who calculated appellant's impairment pursuant to the A.M.A., *Guides*. The Office medical adviser properly noted that Table 16 at page 57 of the A.M.A., *Guides* provided a permanent impairment value for mild median nerve entrapment neuropathy at the wrist of 10 percent. The Office medical adviser correctly calculated both appellant's right upper extremity and left upper extremity impairments pursuant to the A.M.A., *Guides* and there is no medical evidence of record that appellant has more than a 10 percent impairment of the right upper extremity and a 10 percent impairment of the left upper extremity. The Office therefore properly granted appellant a schedule award for a 10 percent impairment of the right upper extremity and a 10 percent impairment of the left upper extremity.

The decision of the Office of Workers' Compensation Programs dated March 17, 1999 is affirmed.

Dated, Washington, DC
September 21, 2000

Michael J. Walsh
Chairman

Michael E. Groom
Alternate Member

Priscilla Anne Schwab
Alternate Member

⁹ Paul R. Evans, Jr., 44 ECAB 646 (1993).