U. S. DEPARTMENT OF LABOR

Employees' Compensation Appeals Board

In the Matter of MICHAEL C. KNORR and DEPARTMENT OF THE TREASURY, OFFICE OF THE SECRET SERVICE, New York, NY

Docket No. 99-2059; Submitted on the Record;
Issued September 15, 2000

DECISION and ORDER

Before MICHAEL J. WALSH, WILLIE T.C. THOMAS, MICHAEL E. GROOM

The issue is whether appellant is entitled to more than 40 weeks compensation for complete loss of vision of the left eye.

On September 15, 1979 appellant, then a 29-year-old special agent, sustained an employment-related gunshot wound to the left eye that rendered him unable to perceive light. On July 22, 1997 he filed a claim for a schedule award. Following development of the claim, by decision dated November 30, 1998, the Office of Workers' Compensation Programs granted him a schedule award for a 25 percent impairment for partial loss of use of the left eye for the period August 13, 1998 to May 19, 1999, a total of 40 weeks of compensation. In a letter received by the Office on December 28, 1998, appellant requested reconsideration and submitted additional evidence. By decision dated February 25, 1999, the Office denied modification of the November 30, 1998 decision. The instant appeal follows.

The Board finds that appellant is entitled to 160 weeks compensation for loss of the left eye.

Under section 8107 of the Federal Employees' Compensation Act[1] and the implementing federal regulations,[2] schedule awards are payable for permanent impairment of specified body members, functions or organs.[3] Section 8107(c)(5) provides that the compensation schedule

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[1] 5 U.S.C. § 8107.

[2] *See* 20 C.F.R. § 10.304; 20 C.F.R. § 10.404 (1999).

[3] 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 under the law for all claimants, good administrative practice necessitates the use of a single set of tables so that there may be uniform standards applicable to all claimants. The American Medical Association, *Guides to the Evaluation of Permanent Impairment* have been adopted by the Office and the Board has concurred in such adoption, as an appropriate standard for evaluating schedule losses. *See James J. Hjort*, 45 ECAB 595 (1994).

award for total loss of an eye equals 160 weeks of compensation.[4] Section 8107(c)(14) further states that a loss of 80 percent or more of the vision of an eye is the same as for loss of the eye.[5]

The relevant medical evidence in this case includes numerous reports dating back to his initial hospitalization in 1979 that indicate that appellant has total visual loss in the left eye. By report dated December 17, 1998, Dr. George Char stated:[6]

> "This is to notify [that] from [a] medical standpoint [appellant's] left eye is completely blind. There is no visual field and no visual function in [the] left eye. Currently [he] has a phythsical left eye with prosthesis. [He] has no light perception in [the] left eye. [He] was last seen on August 13, 1998 whereby the left eye has no function and no visual field. [He] has been followed at George Washington University Ophthalmology Clinic since August 16, 1991.

The medical evidence in this case establishes that appellant has no vision in his left eye. While the Office properly found that he is entitled to a schedule award, the Office was incorrect in finding that he was only entitled to 40 weeks compensation for loss of his left eye. The schedule award is, therefore, modified to reflect appellant is entitled to an additional 120 weeks of compensation for loss of his left eye.

The decisions of the Office of Workers' Compensation Programs dated February 25, 1999 and November 30, 1998 are hereby affirmed as modified.

Dated, Washington, DC
September 15, 2000

Michael J. Walsh
Chairman

Willie T.C. Thomas
Member

Michael E. Groom
Alternate Member

[4] 5 U.S.C. § 8107(c)(5).

[5] 5 U.S.C. § 8107(c)(14).

[6] Dr. Char was writing for Dr. John S. Zacharia, a Board-certified ophthalmologist, who is acting chairman of the Department of Ophthalmology at George Washington University Medical Center.