

U. S. DEPARTMENT OF LABOR

Employees' Compensation Appeals Board

In the Matter of LIGTAS V. GOROSTIZA and U.S. POSTAL SERVICE,
SANCHEZ ANNEX STATION, Santa Clara, CA

*Docket No. 02-2098; Submitted on the Record;
Issued December 18, 2002*

DECISION and ORDER

Before MICHAEL J. WALSH, ALEC J. KOROMILAS,
WILLIE T.C. THOMAS

The issue is whether appellant sustained a knee condition in the performance of duty.

On April 24, 2002 appellant, then a 41-year-old mail carrier, alleged that his patella femoral syndrome was caused by his federal employment. He noted that "working for the [employing establishment] for 12 years standing and walking for 4 to 5 miles a day and sometimes working 6 days a week 10 hours a day" caused his condition.

On May 6, 2002 the Office of Workers' Compensation Programs advised appellant regarding the kind of evidence he would need to support his claim including a description of his job activities that he believed contributed to his condition.

In a report dated April 5, 2002, Dr. Tram N. Nguyen, appellant's treating physician and Board-certified in physical medicine and rehabilitation, stated that he treated appellant that day and noted that he had difficulty walking from heel to toe. He diagnosed patellofemoral pain syndrome and ordered physical therapy for four weeks. Dr. Nguyen excused appellant from work until April 7, 2002, at which time he would resume full-duty status. He noted "yes" to a question in the medical report indicating he believed that appellant's condition was work related and consistent with his account of the injury.

In a report dated April 24, 2002, Dr. Nguyen stated that he examined appellant on April 19, 2002 and noted left knee stress. He prescribed anti-inflammatory and pain relieving medications and released him to return to duty, restricting him to 8 hours a day, 40 hours a week. Dr. Nguyen again noted that appellant's condition was work related.

In a report dated May 6, 2002, Dr. Nguyen stated that appellant's x-rays revealed moderate degenerative joint disease with almost complete loss of medial joint space and moderate narrowing of the patellofemoral joint space. He diagnosed patellofemoral pain syndrome with moderate degenerative joint disease.

In a report dated May 12, 2002, appellant noted that his job requires standing for three hours a day, frequent knee bending and climbing stairs. He noted he walks four to five miles a day on his job. Appellant related left knee pain that worsens when working a 10-hour day.

On June 13, 2002 the Office advised Dr. Nguyen that additional medical information including a diagnosis that excludes pain and “a medically reasoned opinion on the causal relationship between” appellant’s knee condition and his federal employment.

By decision dated July 19, 2002, the Office denied appellant’s claim.

The Board finds that the case is not in posture for a decision.

An employee seeking benefits under the Federal Employees’ Compensation Act¹ has the burden of establishing the essential elements of his or her claim, including the fact that the individual is an “employee of the United States” within the meaning of the Act, that the claim was timely filed, that an injury was sustained in the performance of duty as alleged and that any disability and/or specific condition for which compensation is claimed are causally related to the employment injury.² These are the essential elements of each compensation claim regardless of whether the claim is predicated upon a traumatic injury or an occupational disease claim.³

To establish that an injury was sustained in the performance of duty in an occupational disease claim, a claimant must submit the following: (1) medical evidence establishing the presence or existence of a disease or condition for which compensation is claimed; (2) a factual statement identifying employment factors alleged to have caused or contributed to the presence or occurrence of the disease or condition; and (3) medical evidence establishing that the employment factors identified by claimant were the proximate cause of the condition for which compensation is claimed, or stated differently, medical evidence establishing that the diagnosed condition is causally related to the employment factors identified by claimant.⁴

The medical evidence required to establish causation, generally, is rationalized medical opinion evidence. Rationalized medical opinion evidence is medical evidence which includes a physician’s rationalized opinion on the issue of whether there is a causal relationship between the claimant’s diagnosed condition and the implicated employment factors. The opinion of the physician must be based on a complete factual and medical background of the claimant, must be one of reasonable medical certainty and must be supported by medical rationale explaining the nature of the relationship between the diagnosed condition and the specific employment factors identified by claimant.⁵

¹ 5 U.S.C. §§ 8101-8193.

² *Elaine Pendleton*, 40 ECAB 1143 (1989).

³ *Gabe Brooks*, 51 ECAB 184 (1999).

⁴ *Donna L. Mims*, 53 ECAB ____ (Docket No. 01-1835, issued August 13, 2002).

⁵ *Victor Woodhams*, 41 ECAB 345 (1989).

In this case, the Office determined that Dr. Nguyen failed to provide a reasoned explanation as to how appellant's diagnosed condition of patellofemoral syndrome was causally related to his work duties. He did affirm that his diagnosis was consistent with appellant's account of his condition and stated in his April 24, 2002 that his condition was work related. He also supported his diagnosis of patellofemoral syndrome with reference to an x-ray and physical findings. Although Dr. Nguyen's opinion is insufficiently rationalized⁶ to carry appellant's burden of proof in establishing his claim, it stands uncontroverted in the record and is, therefore, sufficient to require further development of the case by the Office.⁷

Proceedings under the Act are not adversarial in nature and the Office shares responsibility in the development of evidence and has an obligation to see that justice is done.⁸ While the claimant has the burden to establish entitlement to compensation, the Office shares responsibility in the development of the evidence.⁹ On remand the Office should have appellant examined by a Board-certified physician and undertake any further medical development it deems necessary to ascertain whether appellant is entitled to compensation of an injury in the performance of duty.

The decision of the Office of Workers' Compensation Programs dated July 19, 2002 is hereby vacated and the case is remanded for further action consistent with this opinion.

Dated, Washington, DC
December 18, 2002

Michael J. Walsh
Chairman

Alec J. Koromilas
Member

Willie T.C. Thomas
Alternate Member

⁶ See *George Randolph Taylor*, 6 ECAB 986, 988 (1954) (where the Board found that a medical opinion not fortified by medical rationale is of little probative value).

⁷ *John J. Carlone*, 41 ECAB 354 (1989).

⁸ *Norman M. Perras*, 49 ECAB 191 (1997).

⁹ *Mark A. Cacchione*, 46 ECAB 148 (1994).