U. S. DEPARTMENT OF LABOR

Employees' Compensation Appeals Board

In the Matter of FRANK HARES and U.S. POSTAL SERVICE,
POST OFFICE, Clarks Summit, PA

Docket No. 01-1803; Oral Argument Held November 12, 2002;
Issued January 8, 2003

Appearances: *Vincent S. Cimini, Esq.*, for appellant; *Thomas G. Giblin, Esq.*,
for the Director, Office of Workers' Compensation Programs.

DECISION and ORDER

Before MICHAEL J. WALSH, COLLEEN DUFFY KIKO,
DAVID S. GERSON

The issue is whether appellant has established that his eye condition is causally related to his federal employment.

On April 1, 1998 appellant, then a 53-year-old distribution clerk, filed a notice of traumatic injury, alleging that on March 14, 1998 while sorting mail at a distribution case, he tore the retina in his right eye. Appellant submitted an April 13, 1998 report from Dr. Randall R. Peairs, a Board-certified ophthalmologist, indicating that he was being treated for a retinal detachment and was unable to work.

By letter dated April 30, 1998, the Office of Workers' Compensation Programs informed appellant that additional evidence was necessary to process his claim.

Appellant stated that the injury occurred while he was sorting mail and moved his eyes to the extreme top of the case to deposit a letter and his right eye immediately started to burn and tear.

Appellant submitted a second report from Dr. Peairs dated May 1, 1998. He stated that appellant had a sudden onset of "floaters" while looking up at work and developed a retinal detachment. He noted: "This retinal tear could have been associated with his tasks that he was performing."

By decision dated June 5, 1998, the Office denied appellant's claim since the evidence was not sufficient to meet the guidelines for establishing that he sustained an injury due to the claimed event.

By letter dated June 26, 1998, appellant requested reconsideration and submitted a June 18, 1998 report from Dr. Peairs. He stated:

> "This letter is in regard to [appellant], who had a retinal detachment in his right eye, which I repaired with scleral buckling and vitrectomy surgery. This detachment occurred at work on March 14, 1998 and was precipitated by his work activities at that time. He asked me to write this letter clarifying the fact that this was related to his work."

By decision dated September 23, 1998, the Office denied appellant's request for modification of the previous decision.

By letter dated November 3, 1998, appellant requested reconsideration and submitted an October 23, 1998 report from Dr. Peairs who stated:

> "This letter is in regard to [appellant]. I was asked to explain how his work activities could have caused his retinal detachment. It is possible that the excessive eye movement and lifting of objects at the time of his retinal tear could have caused the retina to tear and thus detach. He does report that the incident occurred when he was looking up while lifting objects."

By decision dated January 26, 1999, the Office denied appellant's request for modification of the previous decision.

By letter dated January 21, 2000, appellant requested reconsideration and submitted a June 23, 1998 report from Dr. Stanley W. Boland, a Board-certified ophthalmologist. Dr. Boland stated that he first examined appellant on February 17, 1998 at which time appellant was experiencing floaters in his right eye, which he described as "strings of hair." He noted that his examination revealed a posterior vitreous detachment of the right eye with some degenerative changes in the vitrious, but that there was no detached retina or evidence of any tears in the retina. He also noted that on March 16, 1998 appellant had loss of vision in his right eye with little vision in the 4:00 to 6:00 o'clock position and an examination revealed a retinal detachment with a large horseshoe tear in the infratemporal quadrant. Dr. Boland stated:

> "[Appellant] contends and I seem to agree with him, that this could be work related in the sense that he describes to me that in his position as a postal clerk he was sometimes required to lift objects as heavy as 75 [pounds] during his workday. I cannot say for certain that his work did not cause this detachment, but is seems to me that it certainly would be implicated."

By decision dated April 25, 2001, the Office denied appellant's request for modification of the previous decision.

The Board finds that appellant has not established that his eye condition is causally related to his federal employment.

An employee seeking benefits under the Federal Employees' Compensation Act 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 within the applicable time limitation period of the Act, 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.[1] These are the essential elements of each and every compensation claim regardless of whether the claim is predicated upon a traumatic injury or an occupational disease.[2]

To determine whether a federal employee has sustained a traumatic injury in the performance of duty, it must first be determined whether a "fact of injury" has been established. First, the employee must submit sufficient evidence to establish that he or she actually experienced the employment incident at the time, place and in the manner alleged.[3] Second, the employee must submit sufficient evidence, generally only in the form of medical evidence, to establish that the employment incident caused a personal injury.[4] The medical evidence required to establish causal relationship is usually rationalized medical 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 the claimant.[5]

In support of his claim, appellant submitted four reports from Dr. Peairs dated April 13, May 1, June 18 and October 23, 1998 and one report from Dr. Boland dated June 23, 1998. In his April 13, 1998 report, Dr. Peairs indicated that appellant was being treated for retinal detachment. In his May 1, 1998 report, he stated that appellant's retinal tear "could have been" associated with his tasks at work. In his June 18, 1998 report, he stated that the detachment did occur at work on March 14, 1998 and was precipitated by appellant's work activities, yet did not provide medical rationale to support his statement. He also noted that appellant asked him to write the letter stating that his injury was work related. In his final report dated October 23, 1998, Dr. Peairs stated that it was "possible" that the excessive eye movement and lifting of objects at work "could have caused" appellant's retina to tear and detach.

Dr. Boland, in his June 23, 1998 report, noted that appellant had a preexisting posterior vitreous detachment of the right eye with some degenerative changes. Regarding appellant's detached retina, he stated that he "seems" to agree with appellant that this "could" be work related in the sense that appellant, in his position as a postal clerk, is sometimes required to lift

[1] *Elaine Pendleton*, 40 ECAB 1143, 1145 (1989).

[2] *Delores C. Ellyett*, 41 ECAB 992, 994 (1990).

[3] *John J. Carlone*, 41 ECAB 354 (1989).

[4] *Id*. For a definition of the term "injury," *see* 20 C.F.R. § 10.5(a)(14).

[5] *Id.*

heavy objects. Dr. Boland stated that he "cannot say for certain" that appellant's work did not cause the detachment, but that it "seems to him" it certainly could be implicated.

While the opinion of a physician supporting causal relationship need not be one of absolute medical certainty, neither can such opinion be speculative or equivocal.[6] The fact that the etiology of a disease or condition is unknown or obscure does not shift the burden of proof to the Office to disprove an employment relationship. Neither does the absence of a known etiology relieve appellant of the burden of establishing a causal relationship, by the weight of the evidence, which includes an affirmative medical opinion based on the material facts with supporting rationale.[7]

The Board finds that the reports of Drs. Peairs and Boland are of diminished probative value as they do not contain a rationalized medical opinion detailing how appellant's condition was caused by his employment. Both Drs. Peairs and Boland failed to provide a definitive opinion on the cause of appellant's detached retina beyond noting that it "could" be work related or was "possibly" related to appellant's work activities. Therefore, the opinions of Drs. Peairs and Boland are speculative and equivocal in nature and are thus insufficient to establish that appellant sustained an injury due to employment factors.[8] Dr. Peairs' statement in his June 18, 1998 report, that appellant's detached retina was precipitated by his work activities is insufficient to support appellant's burden as he provides no medical rationale to support his statement. The Board has long held that a conclusory statement without supporting rationale is of little probative value[9] and is insufficient to discharge appellant's burden of proof.

Despite being advised by the Office of the deficiencies in his medical evidence, appellant failed to submit an affirmative rationalized medical opinion addressing the issue of causal relationship and consequently failed to meet his burden of proof. Accordingly, the Office properly denied his claim.

[6] *Judith L. Montage*, 48 ECAB 292, 294 (1997).

[7] *Id.*

[8] *Jennifer L. Sharp*, 48 ECAB 209 (1996) (medical opinions which are speculative or equivocal in nature have little probative value).

[9] *Marilyn D. Polk*, 44 ECAB 673 (1993).

The April 25, 2001 decision of the Office of Workers' Compensation Programs is hereby affirmed.

Dated, Washington, DC
January 8, 2003

Michael J. Walsh
Chairman

Colleen Duffy Kiko
Member

David S. Gerson
Alternate Member