U. S. DEPARTMENT OF LABOR

Employees' Compensation Appeals Board

In the Matter of MARK P. KALISCH <u>and</u> U.S. POSTAL SERVICE, PROCESSING & DISTRIBUTION CENTER, Albuquerque, NM

Docket No. 02-2267; Submitted on the Record; Issued January 31, 2003

DECISION and **ORDER**

Before ALEC J. KOROMILAS, COLLEEN DUFFY KIKO, WILLIE T.C. THOMAS

The issue is whether appellant has established causal relationship between carpal tunnel syndrome or other diagnosed condition and factors of his federal employment.

On July 14, 2000 appellant, then a 46-year-old mailhandler, filed a notice of occupational disease and claim for compensation (Form CA-2) alleging that he sustained a right shoulder and upper arm injury causally related to his federal employment. The employing establishment indicated, in a July 18, 2000 statement, that appellant had been working in a light-duty capacity since approximately 1990; it provided a description of appellant's mailhandler duties. In response to a request from the Office of Workers' Compensation Programs for additional information regarding his claim, appellant submitted an undated statement received by the Office on October 23, 2000. He stated that he had worked for the employing establishment since 1975 and during his career had lifted letter trays and mail sacks, pushed heavy equipment, performed repeated bending, stooping and other physical movements.

By decision dated October 27, 2000, the Office denied the claim on the grounds that the medical evidence was insufficient to establish the claim. By decisions dated June 21 and November 19, 2001, March 21 and August 5, 2002, the Office denied modification.

The Board finds that appellant has not met his burden to establish an injury causally related to his federal employment.

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 the 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 the 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 the claimant.¹ The evidence required to establish causal relationship is rationalized medical opinion evidence, based upon a complete and accurate factual and medical background, showing a causal relationship between the claimed conditions and his federal employment.² Neither the fact that the condition manifested itself during a period of federal employment, nor the belief of appellant that the condition was caused or aggravated by his federal employment, is sufficient to establish causal relation.³

In a report dated December 15, 2000, Dr. Mark Berger, a neurologist, diagnosed carpal tunnel syndrome based on nerve condition results for the median nerve. He noted that appellant worked at the employing establishment, without discussing his work history or specific duties. Dr. Berger stated that, with regard to the etiology of carpal tunnel syndrome, "this may be due to excessive use of the hands" and recommended screening for diabetes and hypothyroidism. He does not provide additional explanation. It is well established that medical opinions based on an incomplete history or opinions that are speculative in character are of diminished probative value. By report dated February 13, 2001, Dr. Robin Hermes, an anesthesiologist, diagnosed cervical degenerative disc disease and cervical stenosis. She indicated that appellant believed his pain was due to repetitive motion at work, but Dr. Hermes did not provide an opinion on causal relationship.

In a report dated June 8, 2001, Dr. Keith Harvie, an osteopath, diagnosed carpal tunnel syndrome, right shoulder impingement syndrome, degenerative disc disease with degenerative arthritis at C5-6 and nerve root irritation. He stated that "all of these diagnoses are consistent with [appellant's] work-related problems," without providing further explanation. Dr. Harvie does not provide a factual history discussing appellant's work history and specific job duties, does not provide clinical findings or a reasoned opinion on causal relationship between a diagnosed condition and federal employment. In an April 4, 2002 report, he stated that tests for diabetes and hypothyroidism were negative; he opined that appellant's "problems with carpal tunnel syndrome are due to repetitive motion and lifting at work. This is consistent with the history as given to me by [appellant]." Dr. Harvie does not, however, discuss the history that was given to him or otherwise provide a background for an opinion on causal relationship. He does not provide a factual and medical history, results on examination and findings to support the diagnosis or a reasoned opinion relating carpal tunnel syndrome to factors of appellant's federal employment.

As noted above, it is appellant's burden of proof to submit probative medical evidence to support his claim. The Board finds that the medical evidence of record is not sufficient to meet appellant's burden of proof in this case.

¹ Victor J. Woodhams, 41 ECAB 345 (1989).

² See Walter D. Morehead, 31 ECAB 188 (1979).

³ Manuel Garcia, 37 ECAB 767 (1986).

⁴ See Leonard J. O'Keefe, 14 ECAB 42, 48 (1962).

The decisions of the Office of Workers' Compensation Programs dated August 5, March 21, 2002 and November 19, 2001 are affirmed.

Dated, Washington, DC January 31, 2003

> Alec J. Koromilas Chairman

Colleen Duffy Kiko Member

Willie T.C. Thomas Alternate Member