U. S. DEPARTMENT OF LABOR

Employees' Compensation Appeals Board

In the Matter of ROSITA F. BROWN and DEPARTMENT OF COMMERCE, NATIONAL OCEANIC & ATMOSPHERIC ADMINISTRATION, Seattle, WA

Docket No. 03-1076; Submitted on the Record;
Issued July 1, 2003

DECISION and ORDER

Before DAVID S. GERSON, WILLIE T.C. THOMAS,
A. PETER KANJORSKI

The issue is whether appellant sustained an injury causally related to her federal employment, as alleged.

On October 31, 2002 appellant, then a 40-year-old lead accounting technician, filed a notice of occupational disease and claim for compensation (Form CA-2) alleging that she suffered from tendinitis in her wrist and thumb of her left hand due to the keyboarding activities of her federal employment.

By letter dated December 10, 2002, the Office of Workers' Compensation Programs requested that appellant provide additional information including, *inter alia*, a comprehensive medical report from her treating physician. In response, appellant submitted material from the Group Health Cooperative of Puget Sound, including notes from Randall W. Ideker, a physician's assistant, with regard to appellant's tendinitis. Other documents from the health cooperative included physical therapy notes and miscellaneous notes without a legible signature or an indication as to the profession of the person who signed them.

By decision dated March 5, 2003, the Office denied appellant's claim for the reason that the evidence was insufficient to establish that she sustained an injury. Specifically, the Office noted that, although appellant had established that the claimed event occurred, she has not provided medical evidence that provided that a diagnosis had been made in connection to the event.

The Board finds that appellant has failed to establish that she sustained an injury causally related to her 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 the 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 medical evidence required to establish a causal relationship, 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,[2] must be one of reasonable medical certainty[3] 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.[4] The mere fact that a condition manifests itself during a period of employment does not raise an inference that there is a causal relationship between the two. Neither the fact that the condition became apparent during a period of employment, nor the belief of appellant that the condition was caused or aggravated by employment conditions is sufficient to establish causal relation.[5]

In the case at hand, the Office denied appellant's claim because she failed to submit medical evidence that provided a diagnosis connected with the alleged employment conditions. Appellant submitted various documents from the Group Health Cooperative of Puget Sound. These documents included notes by both a physical therapist and a physician's assistant. However, these notes, on their own, have no probative medical value since neither a physician's assistant nor a physical therapist qualify as a physician under section 8101 of the Federal Employees' Compensation Act.[6] Although notes of a physician's assistant will be considered probative evidence if cosigned by a physician,[7] no physician cosigned these notes. As appellant has failed to provide probative medical evidence, she has failed to establish that she is entitled to compensation.[8]

[1] *Victor J. Woodhams*, 41 ECAB 345, 352 (1989).

[2] *William E. Enright*, 31 ECAB 426, 430 (1980).

[3] *Morris Scanlon*, 11 ECAB 384-85 (1960).

[4] *William E. Enright*, *supra* note 2.

[5] *Manuel Garcia*, 37 ECAB 767, 773 (1986); *Juanita C. Rogers*, 34 ECAB 544, 546 (1983).

[6] *John H. Smith*, 41 ECAB 444, n.1 (1990).

[7] *See* FECA Procedure Manual, Part 3 -- Medical, *Overview*, Chapter 3.100.3(c) (September 1995).

[8] The Board notes that appellant submitted additional medical evidence to the Office subsequent to its March 5, 2003 decision. The Board cannot consider this evidence submitted after the Office's decision, as its review is limited to the evidence, which was before the Office at the time of its final decision; *Dennis E. Maddy*, 47 ECAB 259 (1995). Appellant may resubmit this evidence to the Office with a formal request for reconsideration; *see* 20 C.F.R. §§ 10.605-10.610.

The decision of the Office of Workers' Compensation Programs dated March 5, 2003 is hereby affirmed.

Dated, Washington, DC
July 1, 2003

David S. Gerson
Alternate Member

Willie T.C. Thomas
Alternate Member

A. Peter Kanjorski
Alternate Member