

On July 9, 2003 appellant, then a 54-year-old aircraft sheet metal mechanic, filed an occupational disease claim for hearing loss. On July 31, 2003 the Office referred appellant to Dr. Richard Dawson, a Board-certified otolaryngologist. In a report dated September 11, 2003, the physician found that appellant had a work-related bilateral sensorineural hearing loss but, based on a September 10, 2003 audiogram, noted that appellant's hearing loss was not ratable for schedule award purposes.

On September 22, 2003 the Office referred Dr. Dawson's report to the district medical adviser. In a September 30, 2003 report, the Office medical adviser found that appellant did not have a ratable hearing loss.

By letter dated October 8, 2003, the Office advised appellant that his claim was accepted for a binaural noise-induced hearing loss. In a decision dated October 9, 2003, the Office determined that appellant's hearing loss was not severe enough to be ratable and, therefore, he was not entitled to a schedule award.

### **LEGAL PRECEDENT**

Section 8107 of the Federal Employees' Compensation Act sets forth the number of weeks of compensation to be paid for the permanent loss of use of specified members, functions and organs of the body.<sup>1</sup> The Act, however, does not specify the manner by which the percentage loss of a member, function or organ shall be determined. To ensure consistent results and equal justice under the law, good administrative practice requires the use of uniform standards applicable to all claimants. The implementing regulations have adopted the American Medical Association, *Guides to the Evaluation of Permanent Impairment* as the appropriate standard for evaluating schedule losses.<sup>2</sup>

The Office evaluates industrial hearing loss in accordance with the standards contained in the A.M.A., *Guides*. Using the frequencies of 500, 1,000, 2,000 and 3,000 cycles per second (cps), the losses at each frequency are added up and averaged.<sup>3</sup> Then, the "fence" of 25 decibels is deducted because, as the A.M.A., *Guides* points out, losses below 25 decibels result in no impairment in the ability to hear everyday speech under everyday conditions.<sup>4</sup> The remaining amount is multiplied by a factor of 1.5 to arrive at the percentage of monaural hearing loss.<sup>5</sup> The binaural loss is determined by calculating the loss in each ear using the formula for monaural loss; the lesser loss is multiplied by five, then added to the greater loss and the total is divided by six to arrive at the amount of the binaural hearing loss.<sup>6</sup> The Board has concurred in the Office's adoption of this standard for evaluating hearing loss.<sup>7</sup>

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<sup>1</sup> 5 U.S.C. § 8107.

<sup>2</sup> 20 C.F.R. § 10.404 (1999). On January 29, 2001 the Office announced that effective February 1, 2001, schedule awards would be determined in accordance with the A.M.A., *Guides* (5<sup>th</sup> ed. 2001). FECA Bulletin No. 01-05 (issued January 29, 2001). This action was in accordance with the authority granted the Office under 20 C.F.R. § 10.404.

<sup>3</sup> A.M.A., *Guides* at 250 (5<sup>th</sup> ed. 2001).

<sup>4</sup> *Id.*

<sup>5</sup> *Id.*

<sup>6</sup> *Id.*

<sup>7</sup> *Donald E. Stockstad*, 53 ECAB \_\_\_\_ (Docket No. 01-1570, issued January 23, 2002), *petition for recon. granted (modifying prior decision)* (issued August 13, 2002).

### **ANALYSIS**

In reviewing appellant's September 10, 2003 audiogram, the frequency levels recorded at 500, 1,000, 2,000 and 3,000 cps revealed decibel losses of 20, 20, 20 and 30, respectively, for a total of 90 decibels. This figure, when divided by 4, results in an average hearing loss of 22.5 decibels. The average of 22.5 decibels was then reduced by 25 decibels, which resulted in a 0 percent monaural hearing loss of the right ear. Testing for the left ear at the frequency levels of 500, 1,000, 2,000 and 3,000 cps revealed decibel losses of 20, 20, 20 and 35, respectively, for a total loss of 95 decibels. Ninety-five decibels divided by 4 result in an average 23.75 decibels when reduced by the 25 decibel fence, this results in a 0 percent monaural hearing loss of the left ear. Accordingly, pursuant to the Office's standardized procedures, the Office's medical adviser determined that appellant had a nonratable hearing loss in both ears.

The Board finds that the Office medical adviser applied the proper standards to the findings as stated in Dr. Dawson's report and the accompanying September 10, 2003 audiogram. This resulted in a calculation of a nonratable hearing loss, as set forth above. The Office properly determined that appellant was not entitled to a schedule award as the extent of his hearing loss is not ratable.

### **CONCLUSION**

The Board finds that the Office properly denied appellant's claim for a schedule award.

### **ORDER**

**IT IS HEREBY ORDERED THAT** the October 9, 2003 decision of the Office of Workers' Compensation Programs is affirmed.

Issued: February 27, 2004  
Washington, DC

Alec J. Koromilas  
Chairman

Colleen Duffy Kiko  
Member

Michael E. Groom  
Alternate Member