

**United States Department of Labor
Employees' Compensation Appeals Board**

RAMELDA D. HATCHETT, Appellant

and

**U.S. POSTAL SERVICE, POST OFFICE,
Atlanta, GA, Employer**

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**Docket No. 04-954
Issued: July 15, 2004**

Appearances:
Ramelda D. Hatchett, pro se
Office of Solicitor, for the Director

Case Submitted on the Record

DECISION AND ORDER

Before:

ALEC J. KOROMILAS, Chairman
COLLEEN DUFFY KIKO, Member
MICHAEL E. GROOM, Alternate Member

JURISDICTION

On March 1, 2004 appellant filed a timely appeal from the Office of Workers' Compensation Programs' merit decisions dated August 8 and November 25, 2003 finding that she did not sustain an injury due to a May 17, 2003 employment incident. Pursuant to 20 C.F.R. §§ 501.2(c) and 501.3, the Board has jurisdiction over the merits of this case.

ISSUE

The issue is whether appellant has met her burden of proof in establishing that she sustained a right knee injury due to a May 17, 2003 employment incident.

FACTUAL HISTORY

On June 9, 2003 appellant, then a 55-year-old carrier, filed a traumatic injury claim alleging that on May 17, 2003 she bumped her right knee: "stepping out of [my] truck, I stepped on a rack, causing me to lose my balance, to prevent me from falling on the ground, I fell up against the truck using the right side of my body." On the reverse of the form, a supervisor noted that appellant had experienced difficulty walking for some time and stated that weeks prior to the

alleged date of injury appellant stated that she had a knee problem she needed to address. In a separate statement dated June 12, 2003, appellant's supervisor stated that appellant had complained of knee pain since February 8, 2003.

Appellant submitted a June 18, 2003 report from Dr. John D. Henry, Jr., a Board-certified orthopedic surgeon, who listed her date of injury as May 17, 2003, confirming her history of injury as stepping out of her truck onto a rock sustaining a twisting-type injury to her knee. Dr. Henry stated that appellant reported that when subsequently walking down some stairs her knee popped. He diagnosed a right knee medial meniscus tear and possible posterior cruciate ligament tear. A May 27, 2003 magnetic resonance imaging (MRI) scan demonstrated a partial tear of the posterior cruciate ligament and a probable tear of the posterior horn of the medial meniscus.

By letter dated July 8, 2003, the Office requested additional factual and medical evidence from appellant to support her claim. Appellant stated that, in January 2001, she fell at the employing establishment and that in May 2003 she developed right knee pain. She repeated her history of injury on May 17, 2003 and further stated, "During the late hours of the night I was going down stairs at home when I experienced a 'pop' of a bone in my right knee."

Dr. Gary Klein, a family practitioner, completed a report dated May 19, 2003 and described appellant's knee injury as follows: "Early Sunday morning going down stairs and patient heard loud 'pop' did not fall. Was seen by Dr. [Alfred] Knox, [Jr., a Board-certified internist] last week." Dr. Klein did not provide a clear diagnosis recommending an MRI scan. In a June 12, 2003 note, Dr. Knox diagnosed right knee strain due to an on-the-job injury.

By decision dated August 8, 2003, the Office denied appellant's claim finding that she failed to establish that her right knee condition was due to the employment incident on May 17, 2003.

Appellant requested reconsideration on August 14, 2003 and submitted additional medical evidence. In a report dated August 11, 2003, Dr. Knox diagnosed chronic right knee arthralgia which was exacerbated by a recent fall at her job twisting the right knee. He stated that an MRI confirmed a partial ligament tear. On August 25, 2003 Dr. Knox repeated his diagnosis and stated that appellant's right knee arthralgia was "apparently exacerbated by a recent fall at her job in May of this year." He stated that an MRI showed a partial tear in appellant's cruciate ligament and medial meniscus. Dr. Knox also noted that prior to appellant's May 2003 injury she fell in January 2001 in the performance of duty. He stated that appellant sustained significant injury to the right knee at that time as well.

Appellant also submitted a narrative statement again asserting that, following her May 17, 2003 injury at work, she experienced a "pop" in her right knee while going down stairs in her home. Appellant stated, "I had never experienced anything like that until after the May 17, 2003 on-the-job injury."

In a report dated June 26, 2003, Dr. Ashok S. Reddy, a Board-certified orthopedic surgeon, stated that appellant experienced an injury at work on May 17, 2003 in that she twisted her knee while getting out of her mail truck but did not feel a pop at that time. He further stated

that appellant felt a pop later that day when she was going down some stairs and then experienced increased pain. Dr. Reddy completed a report on September 11, 2003 and diagnosed posterior cruciate ligament sprain and medial meniscal tear. He stated that appellant was scheduled for knee arthroscopy. Dr. Reddy performed appellant's surgery on October 7, 2003.

By decision dated November 25, 2003, the Office denied modification of the August 8, 2003 decision. The Office found that appellant had not submitted sufficient medical opinion evidence to establish a causal relationship between her diagnosed condition and the May 17, 2003 employment incident.

LEGAL PRECEDENT

In order to determine whether an employee actually sustained an injury in the performance of duty, the Office begins with an analysis of whether fact of injury has been established. Generally, fact of injury consists of two components which must be considered in conjunction with one another. The first component to be established is that the employee actually experienced the employment incident which is alleged to have occurred.¹ The second component is whether the employment incident caused a personal injury and generally can be established only by medical evidence. To establish a causal relationship between the condition, as well as any attendant disability, claimed and the employment event or incident, the employee must submit rationalized medical opinion evidence, based on a complete factual and medical background, supporting such a causal relationship.² Rationalized medical opinion evidence 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. The weight of medical evidence is determined by its reliability, its probative value, its convincing quality, the care of analysis manifested and the medical rationale expressed in support of the physician's opinion.³

ANALYSIS

The Office accepted that appellant stepped on a rock on May 17, 2003 as alleged. However, the Office found that the medical evidence submitted was not sufficient to establish that this incident, rather than the May 18, 2003 nonemployment-related incident of walking down the stairs at home, resulted in appellant's diagnosed conditions of posterior cruciate ligament sprain and medial meniscus tear. Appellant has the burden of proof in establishing that her diagnosed knee conditions are causally related to her accepted employment incident.

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

² *See* 20 C.F.R. § 10.110(a); *John M. Tornello*, 35 ECAB 234 (1983).

³ *James Mack*, 43 ECAB 321 (1991).

In support of her claim, appellant submitted June 18, 2003 report from Dr. Henry, a Board-certified orthopedic surgeon, who provided appellant's date of injury as May 17, 2003 and provided a history of injury including stepping out of her truck onto a rock sustaining a twisting-type injury to her knee. Dr. Henry also stated that appellant reported that later when walking down some stairs her knee popped. He diagnosed right knee medical meniscus tear and possible posterior cruciate ligament tear. Dr. Henry provided a complete history of injury, but failed to provide any opinion on the causal relationship between appellant's diagnosed condition and her accepted employment incident. Without a medical opinion that the May 17, 2003 employment incident caused or contributed to appellant's diagnosed condition, this report is not sufficient to meet appellant's burden of proof.

Dr. Klein, a family practitioner, completed a report dated May 19, 2003 and described appellant's knee injury as follows: "Early Sunday morning going down stairs and patient heard loud 'pop' did not fall. Was seen by Dr. Knox last week." Dr. Klein did not provide a clear diagnosis recommending an MRI. As Dr. Klein failed to provide a history of the May 17, 2003 incident or a diagnosis, his report is not sufficient to meet appellant's burden of proof.

In a June 12, 2003 note, Dr. Knox, a Board-certified orthopedic surgeon, diagnosed right knee strain due to an on-the-job injury. On August 11, 2003 Dr. Knox diagnosed chronic right knee arthralgia which he stated was exacerbated by a recent fall at her job twisting the right knee. He stated that an MRI confirmed a partial ligament tear. By report dated August 25, 2003, Dr. Knox repeated his diagnosis and stated that appellant's right knee arthralgia "apparently exacerbated by a recent fall at her job in May of this year." He stated that an MRI showed a partial tear in appellant's cruciate ligament and medial meniscus. Dr. Knox also noted that prior to appellant's May 2003 injury she fell in January 2001 in the performance of duty. He stated that appellant sustained significant injury to the right knee at that time as well.

These reports are not sufficient to meet appellant's burden of proof in establishing that her May 17, 2003 employment incident caused or contributed to her diagnosed knee conditions. Dr. Knox did not provide an accurate history of injury as he identified the May 17, 2003 incident as a fall, rather than a twisting of the knee and failed to mention appellant's nonemployment-incident of knee pain walking down the stairs at home. Without an accurate factual background, Dr. Knox's opinion that appellant's knee condition was due to an on-the-job injury is not sufficient to meet her burden of proof.

In a report dated June 26, 2003, Dr. Reddy, a Board-certified orthopedic surgeon, stated that appellant experienced an injury at work on May 17, 2003 in that she twisted her knee getting out of her mail truck but did not feel a pop at that time. He further stated that appellant felt a pop later that day when she was going down some stairs and then experienced increased pain. Dr. Reddy completed a report on September 11, 2003 and diagnosed posterior cruciate ligament sprain and medial meniscal tear. He stated that appellant was scheduled for knee arthroscopy. Dr. Reddy performed appellant's surgery on October 7, 2003.

Dr. Reddy described both appellant's May 17 and 18, 2003 incidents in his report. However, he failed to provide any opinion on the causal relationship between appellant's employment-related incident and her diagnosed condition. As this report lacks medical opinion

evidence concluding that appellant's diagnosed condition resulted from her May 17, 2003 employment incident, it is insufficient to meet appellant's burden of proof.

Appellant has failed to submit any medical evidence based on an accurate history and providing an opinion that the May 17, 2003 employment incident caused or contributed to her current knee conditions. Therefore appellant has failed to meet her burden of proof and the Office properly denied her claim.

CONCLUSION

The Board finds that appellant failed to submit the necessary medical opinion evidence to establish a causal relationship between her accepted employment incident and her diagnosed right knee conditions. The Office, therefore, properly denied her claim.

ORDER

IT IS HEREBY ORDERED THAT the November 25, 2003 decision of the Office of Workers' Compensation Programs is hereby affirmed.

Issued: July 15, 2004
Washington, DC

Alec J. Koromilas
Chairman

Colleen Duffy Kiko
Member

Michael E. Groom
Alternate Member