

it was caused by her employment on December 20, 2002. Appellant's supervisor stated that appellant stopped work on February 23, 2003 and had been on administrative leave since that time.

In a duty status report dated August 18, 2003, Dr. Mehru Master, an internist, diagnosed diabetic neuropathy and degenerative arthritis. Although Dr. Master check marked that, diabetic neuropathy was "due to injury," the form report did not set forth a history of injury to which he referred. Other disabling conditions were listed as depression and hypertension. Dr. Master stated that appellant was not able to work her regular position.

In an attending physician's report dated September 5, 2003, Dr. Master stated that appellant was initially treated on December 31, 2002 at which time she was found totally disabled. He diagnosed degenerative arthritis and diabetic neuropathy and checked a box "yes" indicating that appellant's condition was aggravated by employment. Dr. Master further noted that appellant required a modified position if she were to return to work.

By letter dated October 6, 2003, the Office informed appellant of the evidence needed to support her claim. The Office noted that appellant should provide a comprehensive report from her physician including his opinion on the cause of her condition. The Office noted that her physician should explain how exposure or incidents in her employment contributed to her condition.

On November 3, 2003 Dr. Brent E. Tabor, a podiatrist, stated that appellant had chronic posterior tibial tendinitis and plantar fasciitis, and that he had been treating her for left heel and ankle pain for the past two years. Appellant had not responded to conservative treatment and remained symptomatic with pain and discomfort after prolonged standing and when walking. Dr. Tabor noted a negative May 2003 magnetic resonance imaging scan and opined that appellant's diabetes limited his ability to treat her foot and ankle conditions.

In a November 5, 2003 letter, appellant noted the physical requirements of her work and her off-work activities.

By decision dated December 30, 2003, the Office denied appellant's claim on the grounds that the medical evidence was insufficient to establish a causal relationship between her diagnosed conditions and her employment.

On October 4, 2004 appellant requested reconsideration. The record includes a July 20, 2004 note from Dr. Master indicating that Office forms were previously completed and answered all questions. On November 24, 2004 the Office requested that Dr. Master provide a rationalized medical opinion addressing how appellant's conditions were causally related to her employment.

In a report received by the Office on January 18, 2005, Dr. Master stated that appellant had some degenerative arthritis with a very minor diabetic neuropathy. However, Dr. Master opined that appellant's psychiatric issues prevented her from participating in health care management issues. Appellant's physical conditions included obesity and preexisting pain and arthritis with uncontrolled diabetes. Dr. Master noted that appellant's knee and arthritis symptoms were "merely an exacerbation of a preexisting condition." It was noted that appellant

had “severe noncompliance” with treatment recommendations including “very poor follow-up” to all tests that had been recommended.

By decision dated February 14, 2005, the Office denied modification of the December 30, 2003 decision.

LEGAL PRECEDENT

An employee seeking benefits under the Federal Employees’ Compensation Act² has the burden of establishing that 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.³ These are the essential elements of each and every compensation claim regardless of whether the claim is predicated upon a traumatic injury or a claim for occupational disease.⁴

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 diagnosed condition is causally related to the employment factors identified by the claimant.⁵

The medical evidence required to establish 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 medical opinion 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.⁶

ANALYSIS

There is no factual dispute that appellant’s job required her to walk and stand. However, the medical evidence is insufficient to establish that her job duties caused or aggravated her degenerative arthritis or any other condition.

² 5 U.S.C. §§ 8101-8193.

³ *Joe D. Cameron*, 41 ECAB 153 (1989); *Elaine Pendleton*, 40 ECAB 1143 (1989).

⁴ *Victor J. Woodhams*, 41 ECAB 345 (1989).

⁵ *Id.*

⁶ *Solomon Polen*, 51 ECAB 341 (2000).

The only medical report that addresses the causal relationship between appellant's employment and a diagnosed condition is Dr. Master's September 5, 2003 form report. Dr. Masters indicated, by checking a box "yes," that appellant's degenerative arthritis was aggravated by her employment. However, when a physician's opinion supporting causal relationship consists only of checking "yes" to a form question, that opinion is of diminished probative value and is insufficient to establish a causal relationship.⁷ Dr. Master provided no medical reasoning to support appellant's conclusion on causal relationship, this report is of little probative value.⁸ Other medical reports submitted by appellant do not provide a specific opinion supporting causal relationship between any diagnosed condition and specific employment factors. These include other reports from Dr. Master and also Dr. Tabor's report. Dr. Master's most recent report, received by the Office on January 18, 2005, indicated that appellant's current symptoms were due to an exacerbation of her preexisting condition and that treatment was hampered by her noncompliance with treatment recommendations. He also indicated that appellant's condition was complicated by "her mental condition precludes her from gaining active participation in her health." Neither Dr. Master nor Dr. Tabor provided a narrative report with a complete history addressing how appellant's work activities in standing or walking caused or aggravated the diagnosed degenerative arthritis, plantar fasciitis or tendinitis conditions.

The Board has held that the mere fact that a disease or condition manifests itself or worsens during a period of employment⁹ or that work activities produce symptoms revelatory of an underlying condition¹⁰ does not raise an inference of causal relationship between the condition and the employment factors. Neither the fact that appellant's condition became apparent during a period of employment nor the belief that her condition was caused, precipitated or aggravated by her employment is sufficient to establish causal relationship. Causal relationship must be established by rationalized medical opinion evidence.¹¹

Appellant has not submitted reasoned medical evidence supporting that factors of her federal employment caused or aggravated her diagnosed conditions. The Board finds that appellant has not met her burden of proof in establishing her claim.

CONCLUSION

The Board finds that appellant has not met her burden of proof to establish that she sustained an injury in the performance of duty.

⁷ *Gary J. Watling*, 52 ECAB 2878 (2000).

⁸ *See Alberta S. Williamson*, 47 ECAB 569 (1996).

⁹ *William Nimitz, Jr.*, 30 ECAB 567, 570 (1979).

¹⁰ *Richard B. Cissel*, 32 ECAB 1910, 1917 (1981).

¹¹ *Victor J. Woodhams*, 41 ECAB 345, 352 (1989); *Delores C. Ellyett*, 41 ECAB 992 (1990).

ORDER

IT IS HEREBY ORDERED THAT the decision of the Office of Workers' Compensation Programs dated February 14, 2005 is affirmed.

Issued: May 5, 2006
Washington, DC

Alec J. Koromilas, Chief Judge
Employees' Compensation Appeals Board

David S. Gerson, Judge
Employees' Compensation Appeals Board

Michael E. Groom, Alternate Judge
Employees' Compensation Appeals Board