

On October 27, 2006 appellant, then a 57-year-old rural route carrier, filed an occupational disease claim alleging that she developed a bilateral hand condition while in the performance of duty. She became aware of her condition on September 18, 2006. Appellant did not stop work.

In a September 18, 2006 report, Dr. Julia A. Katarincic, a Board-certified orthopedic surgeon, treated appellant for bilateral hand pain and numbness which she experienced intermittently for many years. She indicated that appellant drove a mail truck and experienced discomfort when lifting heavy mail with the left hand. Dr. Katarincic noted findings upon physical examination of a positive Tinel's sign bilaterally, severe bilateral pain at the joints, full range of motion of the shoulder and elbow bilaterally and full range of motion of the fingers. She diagnosed bilateral thumb pain and history of joint pain. A nerve conduction study and electromyogram (EMG) dated September 22, 2006, revealed bilateral distal median neuropathies consistent with bilateral carpal tunnel syndrome. Appellant submitted an undated statement and noted that she experienced bilateral hand pain for a few years which recently became worse. She indicated that her job required her to pitch mail which caused severe numbness to both hands and thumbs.

The employing establishment submitted a statement from Richard E. Carlson, appellant's supervisor, dated November 15, 2006. He described appellant's work duties which included casing mail, grasping approximately 472 pieces of mail a day, pushing a mail hamper and delivering mail. He advised that appellant did not engage in unsafe practices at work and he did not doubt her claim of bilateral hand discomfort.

By letter dated December 13, 2006, the Office advised appellant of the factual and medical evidence needed to establish her claim. It requested that she submit a physician's reasoned opinion addressing the relationship of her claimed condition and specific employment factors.

Appellant submitted a report from Dr. Robert C. Marchand, Board-certified in physical medicine and rehabilitation, dated October 26, 2006. Dr. Marchand noted that appellant presented with bilateral thumb, wrist and finger pain. He advised that appellant was treated conservatively with splints and nonsteroids without success. Dr. Marchand noted findings upon physical examination of limited range of motion for dorsiflexion and palmar flexion, full supination and pronation and positive Phalen's sign. He advised that x-rays of the bilateral thumbs revealed basilar joint arthritis with subluxation. Dr. Marchand diagnosed right carpal tunnel syndrome which was symptomatic and left thumb basilar joint arthritis.

In a decision dated February 7, 2007, the Office denied appellant's claim on the grounds that the medical evidence was not sufficient to establish that her condition was caused or contributed to by her employment duties.

LEGAL PRECEDENT

An employee seeking benefits under the Federal Employees' Compensation Act has the burden of establishing 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 the injury was sustained in the performance of duty as alleged and that any disability or specific condition for which compensation is claimed are causally related to the employment injury. These are the

essential elements of each and every compensation claim regardless of whether the claim is predicated upon a traumatic injury or an occupational disease.¹

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) 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. The medical evidence required to establish causal relationship is generally 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, 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.²

ANALYSIS

It is not disputed that appellant's duties as a rural carrier included performing repetitive lifting, grasping and pushing activities using both hands and fingers. However, she has not submitted sufficient medical evidence to support that her bilateral upper extremity conditions, diagnosed as right carpal tunnel syndrome and left thumb basilar joint arthritis, were causally related or aggravated by her employment duties. On December 13, 2006 the Office advised appellant of the medical evidence needed to establish her claim.

Dr. Katarincic treated her for bilateral hand pain and numbness. She noted that appellant drove a mail truck and experienced discomfort when lifting heavy mail with the left hand. Dr. Katarincic diagnosed bilateral thumb pain and history of pain. However, she did not provide a medical opinion explaining the causal relationship between specific employment duties appellant performed to the development of the diagnosed condition.³ Therefore, this report is insufficient to meet appellant's burden of proof.

Dr. Marchand noted that she presented with bilateral thumb, wrist and finger pain. He indicated that appellant was treated conservatively with splints and nonsteroids without success. Dr. Marchand advised that x-rays of the bilateral thumbs revealed basilar joint arthritis with subluxation and diagnosed right carpal tunnel syndrome which was symptomatic and left thumb

¹ *Gary J. Watling*, 52 ECAB 357 (2001).

² *Solomon Polen*, 51 ECAB 341 (2000).

³ *Jimmie H. Duckett*, 52 ECAB 332 (2001); *Franklin D. Haislah*, 52 ECAB 457 (2001) (medical reports not containing rationale on causal relationship are entitled to little probative value).

basilar joint arthritis. However, he failed to provide any history of appellant's work activities and did not provide a specific opinion addressing the causal relationship between appellant's diagnosed right carpal tunnel syndrome or left thumb basilar joint arthritis to the factors of employment believed to have caused or contributed to such condition.⁴ Therefore, this report is insufficient to meet appellant's burden of proof.

The remainder of the medical evidence submitted by appellant, including an EMG report, is insufficient to establish her claim because it does not provide any opinion on the causal relationship between her job duties and her diagnosed conditions. For this reason, this evidence is not sufficient to meet appellant's burden of proof.

An award of compensation may not be based on surmise, conjecture or speculation. 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.⁵ Appellant failed to submit such evidence and the Office therefore properly denied appellant's claim for compensation.

CONCLUSION

The Board finds that appellant has not met her burden of proof in establishing that she developed carpal tunnel syndrome and left thumb basilar joint arthritis in the performance of duty.⁶

⁴ *Id.*

⁵ *See Dennis M. Mascarenas*, 49 ECAB 215 (1997).

⁶ With her request for an appeal, appellant submitted additional evidence. However, the Board may not consider new evidence on appeal; *see* 20 C.F.R. § 501.2(c).

ORDER

IT IS HEREBY ORDERED THAT the February 7, 2007 decision of the Office of Workers' Compensation Programs is affirmed.

Issued: October 11, 2007
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