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<b>RAFAEL FRANCISCO MONCADA, Appellant</b>	)	
	)	
<b>and</b>	)	<b>Docket No. 03-2271</b>
	)	<b>Issued: February 6, 2004</b>
<b>U.S. POSTAL SERVICE, POST OFFICE,</b>	)	
<b>San Antonio, TX, Employer</b>	)	
	)	

*Case Submitted on the Record*

Before:  
COLLEEN DUFFY KIKO, Member  
MICHAEL E. GROOM, Alternate Member  
A. PETER KANJORSKI, Alternate Member

On September 11, 2003 appellant filed a timely appeal from a merit decision of the Office of Workers' Compensation Programs dated January 22, 2003, denying his carpal tunnel syndrome claim. Under 20 C.F.R. §§ 501.2(c) and 501.3, the Board has jurisdiction over the merits of this case.

The issue is whether appellant established that his right carpal tunnel syndrome was causally related to his federal employment.

On November 23, 2001 appellant, then a 40-year-old postal carrier, filed a notice of occupational disease, alleging that he sustained an aggravation of a preexisting right carpal tunnel syndrome caused by conditions of his federal employment. Appellant stated that he was aware initially of his condition on July 24, 1990, and that it was aggravated by his employment on June 5, 2001. He stopped work as a result of his condition on September 11, 2001 and returned to work on November 6, 2001.

In a report dated November 2, 2001, Dr. Sanjay Misra, appellant's attending Board-certified orthopedic surgeon, reported a history that appellant was post left carpal tunnel release surgery in 1991 but that he had remained symptomatic with a right carpal tunnel syndrome. He treated appellant initially on May 15, 2001 and, after regimens of injections, therapy, bracing and resting, performed a right carpal tunnel release on September 14, 2001. Dr. Misra advised that, upon examination that day, appellant had a negative Tinel's sign and a negative Phalen's test. He also noted that appellant's desire to return to full duty and released him from medical care without restrictions.

On February 4, 2002 the Office requested that appellant submit additional evidence within 30 days in order to process his claim. The record fails to disclose any additional information from appellant in response to the Office's request.

By decision dated March 29, 2002, the Office denied his claim. By letter dated April 25, 2002, appellant requested an oral hearing which was held on November 21, 2002. On January 22, 2003 an Office hearing representative affirmed the Office's March 29, 2002 decision.

### **LEGAL PRECEDENT**

In an occupational disease claim, in order to establish that an injury was sustained in the performance of duty, 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. 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.<sup>1</sup>

### **ANALYSIS**

The only medical evidence submitted to the record consists of a November 2, 2001 report from Dr. Misra, appellant's attending orthopedic surgeon, who noted that appellant previously injured his hands in 1991, and that his right carpal tunnel syndrome had become progressively worse, for which a carpal tunnel surgical release was performed on September 14, 2001. Dr. Misra advised that appellant had a negative Tinel's sign and a negative Phalen's test following surgery. He further advised that the surgical incision was well healed and that appellant's fingers had a normal motion. Dr. Misra opined that appellant was doing exceptionally well and released him from medical care with no restrictions, adding that he could return for treatment on an as needed basis. The Board notes, however, that the physician did not provide a medical opinion regarding the cause of appellant's right carpal tunnel syndrome. Dr. Misra did

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<sup>1</sup> *Solomon Polen*, 51 ECAB 341 (2000).

not explain how appellant's work duties caused or contributed to the development of the right carpal tunnel syndrome or the need for surgery. Since he provided no rationalized medical opinion establishing a causal relationship between appellant's condition and his employment, Dr. Misra's opinion is insufficient to establish appellant's claim. Although appellant was provided an opportunity to submit additional medical evidence after submission of Dr. Misra's November 2, 2001 report, he did not submit any such evidence. The Board has long held that medical evidence that does not offer an opinion regarding the cause of appellant's condition is of limited probative value on the issue of causal relationship.<sup>2</sup>

### **CONCLUSION**

Appellant failed to submit evidence that established a causal relationship between his right carpal tunnel syndrome and his employment, thus he failed to meet his burden of proof that his condition was caused by his employment.

### **ORDER**

**IT IS HEREBY ORDERED THAT** the decision of the Office of Workers' Compensation Programs dated January 22, 2003 is affirmed.<sup>3</sup>

Issued: February 6, 2004  
Washington, DC

Colleen Duffy Kiko  
Member

Michael E. Groom  
Alternate Member

A. Peter Kanjorski  
Alternate Member

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<sup>2</sup> *Michael E. Smith*, 50 ECAB 313 (1999).

<sup>3</sup> The Board notes that this case record contains evidence which was submitted subsequent to the Office's January 22, 2003 decision. The Board has no jurisdiction to review this evidence for the first time on appeal; *see* 20 C.F.R. § 501.2(c); *James C. Campbell*, 5 ECAB 35, 36 n.2 (1952).