

U. S. DEPARTMENT OF LABOR

Employees' Compensation Appeals Board

In the Matter of JOHN R. BLACK and U.S. POSTAL SERVICE,
POST OFFICE, Newport News, Va.

*Docket No. 96-1362; Submitted on the Record;
Issued August 10, 1998*

DECISION and ORDER

Before DAVID S. GERSON, WILLIE T.C. THOMAS,
BRADLEY T. KNOTT

The issue is whether appellant met his burden of proof in establishing that he sustained an injury in the performance of duty.

On July 29, 1995 appellant, then a 34-year-old mail carrier, filed a notice of traumatic injury and claim for continuation of pay/compensation (Form CA-1) alleging that he was overcome by extreme heat while delivering mail. Appellant fainted while delivering mail and was transported by ambulance to a local hospital where the diagnosis was extreme heat exhaustion.

In a report dated July 29, 1995, Dr. James L. Hecht, a Board-certified in emergency medicine specialist diagnosed "syncope, r/o [rule out] hyperglycemia, r/o heat stress reaction, r/o neurologic abnormality." Dr. Hecht noted that appellant had passed out while delivering mail and that he was "unresponsive and mildly diaphoretic" at the time the medics arrived to treat him. Dr. Hecht noted that prior to the incident, appellant had been having headaches, dizziness and other symptoms for the past few weeks.

In a report dated July 31, 1995, Dr. Arthur R. Sonberg, a treating Board-certified neurologist, noted that appellant had blacked out while delivering mail. Dr. Sonberg stated that he explained to appellant "that it wasn't clear why he had this blackout spell." Dr. Sonberg then opined that "the most likely explanation for his blackout was that he had a vasogal syncope."

In a report dated August 8, 1995, Dr. Sonberg diagnosed right middle lobe pneumonia as shown by x-ray.

By decision dated September 29, 1995, the Office of Workers' Compensation Programs denied the claim on the grounds that fact of injury had not been established. In the attached memorandum, the Office acknowledged that the evidence supported the fact that the incident

occurred at the time, place and in the manner alleged, but that the medical evidence failed to establish that the claimed injury occurred in the performance of duty.

In a letter dated September 20, 1995, appellant requested reconsideration of the denial of his claim and submitted medical reports from Drs. Hecht, Sonberg and David Maxwell, a treating Board-certified internist, as well as a chart showing the temperature in June and July 1995.

In a report dated August 8, 1995, Dr. Sonberg informed appellant that his recent fainting spell "was probably a simple vasovagal syncope perhaps related to the extreme heat." Dr. Sonberg noted that an x-ray performed on July 31, 1995 was normal as were an echocardiogram, magnetic resonance imaging tests of the brain and spine.

In a report dated October 11, 1995, Dr. Hecht noted that, upon arrival at the emergency room, appellant was clammy and diaphoretic. Dr. Hecht opined that appellant's syncopal episode was caused by a heat stress reaction due to "the extremely high heat and humidity."

In a report dated November 17, 1995, Dr. Maxwell reported that appellant had contacted him on July 3, 1995 regarding complaints of heat fatigue. Dr. Maxwell noted that upon arrival at the emergency room appellant was "unresponsive, cool and clammy." Dr. Maxwell opined that "[i]t is apparent that this patient suffered from heat exhaustion as appellant's "symptoms were consistent with his diagnosis."

On January 3, 1996, the Office referred the medical record along with a statement of accepted facts to the Office medical adviser. On January 4, 1996 the Office medical adviser opined that the evidence of record is insufficient to establish that appellant's simple vasovagal syncope was due to heat exhaustion, noting that "suggestions" of heat exhaustion was speculative.

By decision dated January 17, 1996, the Office denied appellant's request for modification finding that the evidence of record failed to establish that his injury occurred in the performance of duty. The Office noted that idiopathic (explained) falls due to an internal, personal condition were generally not considered as arising out of employment unless there was intervention or contribution by some hazard or condition of employment. The Office further noted that appellant had experienced dizziness prior to his fall and developed pneumonia subsequent to the fall. The Office also credited the opinion of the Office medical adviser which stated that the evidence was insufficient to demonstrate that appellant's fainting was due to heat exhaustion.

The Board finds that appellant met his burden of proof to establish that he sustained an injury in the performance of duty.

It is a well-settled principle of workers' compensation law, and the Board has so held, that an injury resulting from an idiopathic fall -- where a personal, nonoccupational pathology causes an employee to collapse and to suffer injury upon striking the immediate supporting surface and there is no intervention or contribution by any hazard or special condition of employment -- is not within coverage of the Federal Employees' Compensation Act. Such an

injury does not arise out of a risk connected with the employment and is therefore not compensable. However, as the Board has made equally clear, the fact that the cause of a particular fall cannot be ascertained, or that the reason it occurred cannot be explained, does not establish that it was due to an idiopathic condition. This follows from the general rule that an injury occurring on the industrial premises during working hours is compensable unless the injury is established to be within an exception to such general rule.¹ If the record does not establish that the particular fall was due to an idiopathic condition, it must be considered as merely an unexplained fall, one which is distinguishable from a fall in which it is definitely proved that a physical condition preexisted the fall and caused the fall.²

In the present case, the medical evidence does not establish that appellant's syncopal episode on July 29, 1995 was due to a personal, nonoccupational pathology. Dr. Sonberg stated that the simple vasovagal syncope was perhaps related to the extreme heat. Dr. Hecht opined that he believed that a stress reaction was the likeliest explanation for appellant's syncopal episode. Dr. Maxwell opined that appellant's symptoms were consistent with the diagnosis of heat exhaustion. The Office medical adviser agreed with the diagnosis of syncopal episode, but opined that the medical evidence did not support that heat exhaustion was the cause of appellant's syncopal episode. The medical opinions of Drs. Sonberg, Hecht and Maxwell are speculative on the cause of appellant's syncope episode. In addition, the extensive diagnostic testing provided no idiopathic cause of appellant's syncope episode. The Board, thus, finds that the syncopal episode remains an unexplained fall while appellant was engaged in activities related to his employment duties and is therefore compensable.

The decisions of the Office of Workers' Compensation Programs dated January 17, 1996 and September 29, 1995 are reversed and the case is remanded to the Office for a determination of the nature and extent of any disability causally related to the July 29, 1995 fall.

Dated, Washington, D.C.
August 10, 1998

David S. Gerson
Member

Willie T.C. Thomas
Alternate Member

¹ *Dora J. Ward*, 43 ECAB 767 (1992); *Fay Leiter*, 35 ECAB 176 (1983).

² *Judy Bryant*, 40 ECAB 207 (1988); *Martha G. List*, 26 ECAB 200 (1974).

Bradley T. Knott
Alternate Member