

U. S. DEPARTMENT OF LABOR

Employees' Compensation Appeals Board

In the Matter of JANET E. WILLIAMS and U.S. POSTAL SERVICE,
POST OFFICE, West Palm Beach, Fla.

*Docket No. 95-2968; Submitted on the Record;
Issued January 12, 1998*

DECISION and ORDER

Before MICHAEL J. WALSH, DAVID S. GERSON,
BRADLEY T. KNOTT

The issue is whether appellant's condition or disability after February 2, 1994 is causally related to her federal employment.

The Office of Workers' Compensation Programs accepted that appellant sustained a lumbar strain in the performance of duty from sitting in an ergonomically uncomfortable position in excess of one hour. The Office also accepted that appellant sustained a right knee strain in the performance of duty.¹ Appellant received compensation for periods of wage loss. On April 22, 1993 her attending physician returned her to work with a limitation of sitting one hour then standing one hour.

In a report dated November 19, 1993, Dr. Philip F. Averbuch, a Board-certified orthopedic surgeon, related appellant's complaints and history and his findings on physical examination. He reported his impression as follows:

"This patient had a low back strain with some radiation. Objectively, orthopedically we can find no evidence of any ongoing problems.

"We feel that this patient should have made a complete recovery, with no residual, and no disability.

"Regarding her work conditions, apparently she is functioning and doing well at her job, full time. She just requires the ability to get up and walk around periodically, and I would feel that if this is satisfactory, that it should continue, so

¹ Appellant described her injury as follows: "At the time my problem was predominate in my right leg and knee. While sitting in the mechanized unit I am unable to stretch my legs out, my legs are constantly cramped under the unit for two hours. When I was not on the machine the pain in my leg and knee would lessen. When I went back to keying under the unit the pain would increase until eventually it got to the point that while I was sitting on the unit it felt like someone was tightening a vise around my right knee. The pain had become unbearable."

that she can be productive and stay at her job. I do not feel that this would lead to any surgical problems nor any residuals.”

Dr. Averbuch clarified that appellant was able to work with restrictions such that she be allowed to alternate standing and sitting after one hour. He also made clear that the accepted lumbar strain and right knee strain had resolved.

In a decision dated April 8, 1994, the Office denied continuing compensation after February 2, 1994 on the grounds that the medical evidence failed to establish an employment-related disability after that date.

A medical report dated March 16, 1995 indicated that a magnetic resonance imaging (MRI) scan of the lumbar spine done in October 1991 was consistent with disc desiccation at the L4-5 level. The MRI was also reported to show a mild central bulging of the annulus at both L4-5 and L5-S1 with no evidence of disc herniation or spinal canal stenosis. The report stated that appellant currently had some mild discomfort in her low back and in her knees, and that she had objective signs and symptoms of chronic back problems.

In a decision dated June 14, 1995, the Office affirmed the denial of compensation.

The Board finds that the medical evidence of record fails to support that residuals of appellant’s accepted employment injury continued beyond February 2, 1994.

A claimant seeking benefits under the Federal Employees’ Compensation Act² has the burden of proof to establish the essential elements of her claim by the weight of the evidence,³ including that she sustained an injury in the performance of duty and that any specific condition or disability for work for which she claims compensation is causally related to that employment injury.⁴

The evidence generally required to establish causal relationship is rationalized medical opinion evidence. The claimant must submit a rationalized medical opinion that supports a causal connection between her current condition and the employment injury. The medical opinion must be based on a complete factual and medical background with an accurate history of the claimant’s employment injury, and must explain from a medical perspective how the current condition is related to the injury.⁵

The record in this case contains no such a medical opinion to support that appellant’s condition or disability after February 2, 1994 is causally related to her federal employment. The opinion of Dr. Averbuch supports that appellant should have made a complete recovery from her accepted conditions with no residual and no disability. The report of March 16, 1995 supports

² 5 U.S.C. §§ 8101-8193.

³ *Nathaniel Milton*, 37 ECAB 712 (1986); *Joseph M. Whelan*, 20 ECAB 55 (1968) and cases cited therein.

⁴ *Elaine Pendleton*, 40 ECAB 1143, 1145 (1989).

⁵ *John A. Ceresoli, Sr.*, 40 ECAB 305 (1988).

that appellant had a desiccated disc at L4-5 in October 1991 and a mild central bulging of the annulus at both L4-5 and L5-S1, but nothing in this report relates these conditions to appellant's federal employment. The Office has accepted only a lumbar and right knee strain, not any kind of desiccation or bulging of discs. Without a well-reasoned medical opinion demonstrating a causal relationship between appellant's federal employment and the conditions shown by the October 1991 MRI, the record in this case fails to establish that appellant's condition or disability after February 2, 1994 is causally related to her federal employment.

The June 14, 1995 decision of the Office of Workers' Compensation Programs is affirmed.

Dated, Washington, D.C.
January 12, 1998

Michael J. Walsh
Chairman

David S. Gerson
Member

Bradley T. Knott
Alternate Member