U. S. DEPARTMENT OF LABOR

Employees' Compensation Appeals Board

In the Matter of RICHARD L. HAITHCOCK and U.S. POSTAL SERVICE, POST OFFICE, Dayton, OH

Docket No. 98-2230; Submitted on the Record; Issued April 25, 2000

DECISION and **ORDER**

Before DAVID S. GERSON, WILLIE T.C. THOMAS, A. PETER KANJORSKI

The issue is whether appellant sustained a recurrence of disability as of November 20, 1997 causally related to his accepted left testicle and emotional conditions.

On August 5, 1997 appellant, a 40-year-old custodial worker, was sweeping the floor at work when a coworker approached him from behind and placed a metal golf club between his legs, causing injury to his genitals. He filed a claim for benefits on the date of injury, claiming the incident had aggravated a preexisting inguinal condition and resulted in mental and emotional stress. The Office of Workers' Compensation Programs accepted appellant's claim for left traumatic epididymitis and aggravation of general anxiety disorder.

On April 6, 1998 appellant filed a claim for recurrence of disability, alleging that on November 20, 1997 he experienced an exacerbation of his accepted left testicle and emotional conditions. He has not returned to gainful employment since November 20, 1997.

Appellant submitted a May 25, 1998 report from Dr. Michael S. Chune, an urologist. Dr. Chune stated findings on examination and indicated that appellant suffered from chronic and possibly subacute epididymitis with resultant left funiculitis, conceivably due to trauma from being struck by a golf club in the scrotum.

By letter dated April 29, 1998, the Office referred appellant to Dr. Bruce E. Woodworth, a Board-certified urologist, who examined appellant on May 26, 1998. Dr. Woodworth stated in a May 29, 1998 report that appellant did have exacerbation of some discomfort and pain in the left testicle secondary to the alleged trauma. He noted appellant had undergone a left inguinal hernia repair in which he had a piece of mesh placed in the area, which complicated and probably

contributed to his condition. Dr. Woodworth stated that it was not unusual for patients to have increased sensitivity in the spermatic cord and testicle following hernia surgery. He further stated:

"Unfortunately, [appellant] apparently suffered trauma to the cord structures, and increased sensitivity of these nerves could have certainly been exacerbated by the described trauma. Fortunately, there has been no major damage done to the testicle or spermatic cord. On examination it appears that the testicle is entirely intact and that the spermatic cord, while not completely normal, is not seriously injured. He definitely has local pain and tenderness in the left epididymis, minimal edema, and the testicle itself is normal. The position of the testicle is entirely within normal limits, and as far as one testicle hanging lower than the other, this is not unusual. It is my impression that the discomfort [appellant] is having in the testicle and the inflammation of the cord that is demonstrated on the ultrasound will eventually improve, and he has a very good chance for recuperation from the discomfort from this trauma."

In support of his claim for recurrence of his emotional condition, appellant submitted a May 18, 1998 opinion from Dr. Kenneth W. Blissenbach, Board-certified in psychiatry and neurology, who stated that appellant told him that when he attempted to return to work, he was seated next to the person that had assaulted him on August 5, 1997. Dr. Blissenbach opined that appellant still had residuals from the August 5, 1997 employment injury, with flashbacks and anxiety regarding the way the employing establishment handled his claim, because he felt unable to work with the individual who injured him and because he generally considered the workplace to be a hostile environment. When asked by the Office to provide reasons as to whether appellant was totally disabled due to the aggravation of his emotional condition, Dr. Blissenbach stated:

"This question is difficult to answer, because the claimant does have disabling physical problems, that may necessitate surgery and that may limit him significantly, as to what he can and can[no]t do. But with regard to the traumatic epididymitis and the way it was handled by management, I [a]m not able to say that he [i]s totally disabled due to the emotional condition alone."

By decision dated July 2, 1998, the Office denied appellant compensation for a recurrence of his accepted August 5, 1997, employment-related conditions. The Office found that appellant failed to submit medical evidence sufficient to establish that his claimed conditions or disability were caused or aggravated by the August 5, 1997 employment injury.

The Board finds that appellant has not sustained a recurrence of disability as of November 20, 1997 causally related to his accepted left testicle and emotional conditions.

An individual who claims a recurrence of disability resulting from an accepted employment injury has the burden of establishing that the disability is related to the accepted injury. This burden requires furnishing medical evidence from a physician who, on the basis of a complete and accurate factual and medical history, concludes that the disabling condition is

causally related to the employment injury, and who supports that conclusion with sound medical reasoning.¹

The record contains no such medical opinion. Indeed, appellant has failed to submit any medical opinion containing a rationalized, probative report which relates his left testicle and emotional conditions as of November 20, 1997 to his August 5, 1997 employment injury. For this reason, he has not discharged his burden of proof to establish his claim that he sustained a recurrence of his emotional condition as a result of his accepted employment injury.

With regard to appellant's claim for a recurrence of his left testicle condition, the record contains the opinion of Dr. Woodworth, who stated that appellant apparently suffered trauma to the spermatic cord structure, that he definitely had local pain and tenderness in the left epididymis at the time of his examination and advised that increased sensitivity of these nerves could have certainly been exacerbated by the described trauma on August 5, 1997. However, he advised that no major damage was done to the testicle or spermatic cord. Dr. Woodworth stated that his examination indicated appellant's testicle was entirely intact and that the spermatic cord, while not completely normal, was not seriously injured. He further stated that the position of the testicle was entirely within normal limits, and that, although one of appellant's testicle was hanging lower than the other, this is not unusual. The only countervailing evidence appellant submitted was the May 25, 1998 report from Dr. Chune, who merely stated summarily that appellant had chronic and possibly sub-acute epididymitis which was conceivably due to trauma from being struck in the scrotum by a golf club. This report was of limited probative value and does not constitute sufficient medical evidence demonstrating a causal connection between appellant's August 5, 1997 injury and his claimed left testicle condition. Causal relationship must be established by rationalized medical opinion evidence. Appellant has failed to submit such evidence which would indicate that his claimed left testicle condition was caused or aggravated by his August 5, 1997 employment injury. Thus, the Office properly found that appellant failed to meet his burden of proof in establishing that he sustained a recurrence of his left testicle condition/disability.

In support of his claim for a recurrence of his emotional claim/disability, appellant submitted the May 18, 1998 report of Dr. Blissenbach, who stated that appellant still suffered flashbacks and anxiety from the August 5, 1997 employment injury, and generally considered the workplace to be a hostile environment. Dr. Blissenbach advised that appellant was totally disabled, but did not indicate the extent to which this was due to the aggravation of his emotional condition. This report was not sufficient to constitute a probative, rationalized medical opinion establishing that appellant's claimed emotional condition was caused or aggravated by the August 5, 1997 work injury.

Dr. Blissenbach's opinion on causal relationship is of limited probative value in that he did not provide adequate medical rationale in support of his conclusions.² He did not describe appellant's accident in any detail or how the accident would have been competent to cause the

¹ Dennis E. Twardzik, 34 ECAB 536 (1983); Max Grossman, 8 ECAB 508 (1956); 20 C.F.R. § 10.121(a).

² William C. Thomas, 45 ECAB 591 (1994).

claimed exacerbation of his emotional condition. Moreover, his opinion is of limited probative value for the further reason that it is generalized in nature and equivocal in that he only noted summarily that appellant's symptoms were causally related to the August 5, 1997 employment injury.

Dr. Blissenbach's report does not constitute sufficient medical evidence demonstrating a causal connection between appellant's August 5, 1997 injury and his claimed emotional condition. Causal relationship must be established by rationalized medical opinion evidence. Appellant has failed to submit such evidence which would indicate that his claimed emotional condition was caused or aggravated by his August 5, 1997 employment injury.

As there is no medical evidence addressing and explaining why the claimed conditions as of November 20, 1997 were caused or aggravated by his August 5, 1997 employment injury, appellant has not met his burden of proof in establishing that he sustained a recurrence of his employment-related disability.

The July 2, 1998 decision of the Office of Workers' Compensation Programs is hereby affirmed.

Dated, Washington, D.C. April 25, 2000

> David S. Gerson Member

Willie T.C. Thomas Alternate Member

A. Peter Kanjorski Alternate Member