# **United States Department of Labor Employees' Compensation Appeals Board**

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RENEE LYNN DWORAK, Appellant	)
and	) Docket No. 06-569 ) Issued: May 4, 2006
U.S. POSTAL SERVICE, POST OFFICE, Bloomington, IL, Employer	) issued. May 4, 2000 )
Appearances:	Case Submitted on the Record
Renee Lynn Dworak, pro se Office of Solicitor, for the Director	Cuse Suomitteu on the Record

### **DECISION AND ORDER**

Before:
ALEC J. KOROMILAS, Chief Judge
DAVID S. GERSON, Judge
MICHAEL E. GROOM, Alternate Judge

#### *JURISDICTION*

On January 12, 2006 appellant filed a timely appeal from the November 21, 2005 merit decision of the Office of Workers' Compensation Programs which denied her claim that she sustained an injury in the performance of duty. Pursuant to 20 C.F.R. §§ 501.2(c) and 501.3, the Board has jurisdiction to review the Office's denial of compensation.

#### **ISSUE**

The issue is whether the established factors of appellant's federal employment caused or aggravated the diagnosed medical conditions for which she seeks compensation.

#### **FACTUAL HISTORY**

On August 12, 2005 appellant, then a 36-year-old clerk, filed a claim alleging that her bilateral carpal tunnel syndrome and right elbow tendinitis were the result of her federal employment. She stated:

"I have never had problems with my hands or elbow before I was hired to this job. I am constantly picking up bundles of mail to load the machines. I dump mail

from a flat tub with my right arm into my left arm. There has been pain in my wrist and elbow while doing these tasks. There has been swelling in my hands and fingers and throbbing in my elbow after work."

The employing establishment controverted appellant's claim, noting:

"Medical documentation states employee first noted symptoms 2 years ago, yet in Item 11 employee shows as date first aware of illness July 29, 2005. In addition, employee owns and runs a farm on which she boards, rides & cares for horses. The duties of running a farm require repetitive use of wrists & elbows. Injury may be a result of farming activities."

Appellant saw Dr. Brett L. Keller, an osteopath, on July 22, 2005. He reported that appellant first noted symptoms in the upper extremities two years prior, with numbness and tingling in the thumb, index and middle fingers, which seemed to be getting progressively worse. Appellant noted weakness with grip; she occasionally dropped objects. She reported right elbow ache, worse with lifting at work and a knot on her left wrist. Appellant denied injury or trauma to the wrist but stated that her symptoms worsened with repetitive motions at work "as she works for the Post Office." Dr. Keller reported his findings on physical examination and diagnosed numbness and tingling in the bilateral hands consistent with carpal tunnel syndrome. He also diagnosed left wrist tendinitis, right elbow tendinitis and early degenerative changes in the right elbow. Dr. Keller recommended medication and nerve conduction velocity studies of the bilateral extremities to rule out carpal tunnel syndrome.

Appellant saw Dr. Keller again on July 29, 2005. She noted continued right elbow pain with lifting bins at work. Nerve conduction velocity studies on July 25, 2005 showed a delayed median nerve sensory velocity at the level of the right wrist, a delayed radial nerve sensory velocity at the level of the left arm and a delayed ulnar nerve motor latency at the level of the left wrist. Dr. Keller diagnosed mild right carpal tunnel syndrome, mild radial nerve sensory velocity changes at the level of the right arm, right elbow epicondylitis and mild osteoarthritis of the right elbow joint. He recommended physical therapy and provided appellant with elbow and bilateral wrist orthotics. Dr. Keller stated: "Appellant understands that, if she continues to do repetitive lifting, she will most likely have problems with the right elbow."

On September 1, 2005 the Office requested additional information, including a doctor's opinion, with medical reasons, on the cause of her condition: "Specifically, if your doctor feels that work activities in your federal employment contributed to your condition, an explanation of how such exposure contributed should be provided."

The Office received copies of Dr. Keller's July 22 and 29, 2005 reports, together with copies of the July 25, 2005 nerve conduction velocity studies. On October 14, 2005 the Office again requested that appellant submit a medical report from her doctor giving a diagnosis and explaining the relationship to her federal employment. The Office received additional copies of Dr. Keller's July 22 and 29, 2005 reports and additional copies of the July 25, 2005 nerve conduction velocity studies.

In a decision dated November 21, 2005, the Office denied appellant's claim for compensation. The Office found that the medical evidence "does not establish that the claimed medical condition resulted from the accepted event(s). Grasping of mail, picking up and dumping mail and operating the flat sorting machine."

#### LEGAL PRECEDENT

An employee seeking benefits under the Federal Employees' Compensation Act<sup>1</sup> has the burden of proof to establish the essential elements of her claim. When an employee claims that she sustained an injury in the performance of duty, she must submit sufficient evidence to establish that she experienced a specific event, incident or exposure occurring at the time, place and in the manner alleged. She must also establish that such event, incident or exposure caused an injury.<sup>2</sup>

Causal relationship is a medical issue<sup>3</sup> and the medical evidence generally required to establish causal relationship is rationalized medical opinion evidence. Rationalized medical opinion evidence is medical evidence that includes a physician's rationalized opinion on whether there is a causal relationship between the claimant's diagnosed condition and the established incident or factor of employment. The opinion of the physician must be based on a complete factual and medical background of the claimant,<sup>4</sup> must be one of reasonable medical certainty,<sup>5</sup> and must be supported by medical rationale explaining the nature of the relationship between the diagnosed condition and the established incident or factor of employment.<sup>6</sup>

# **ANALYSIS**

Appellant's duties as a postal clerk are not in dispute. The Office accepts that she performed certain work activities, including grasping mail, picking up and dumping mail and operating the flat sorting machine. Appellant has established that she experienced specific work exposures as alleged. The question that remains is whether these particular work activities caused or aggravated her bilateral wrist and right elbow conditions.

The Office denied appellant's claim for compensation because her physician did not offer a reasoned opinion directly addressing this question. Dr. Keller, her osteopath, diagnosed mild right carpal tunnel syndrome and right elbow epicondylitis, but did not explain how her specific duties at work caused or aggravated these medical conditions. To establish the critical element

<sup>&</sup>lt;sup>1</sup> 5 U.S.C. §§ 8101-8193.

<sup>&</sup>lt;sup>2</sup> See Walter D. Morehead, 31 ECAB 188, 194 (1979) (occupational disease or illness); Max Haber, 19 ECAB 243, 247 (1967) (traumatic injury). See generally John J. Carlone, 41 ECAB 354 (1989); Elaine Pendleton, 40 ECAB 1143 (1989).

<sup>&</sup>lt;sup>3</sup> Mary J. Briggs, 37 ECAB 578 (1986).

<sup>&</sup>lt;sup>4</sup> William Nimitz, Jr., 30 ECAB 567, 570 (1979).

<sup>&</sup>lt;sup>5</sup> See Morris Scanlon, 11 ECAB 384, 385 (1960).

<sup>&</sup>lt;sup>6</sup> See William E. Enright, 31 ECAB 426, 430 (1980).

of causal relationship, appellant must submit a well-reasoned medical opinion from her physician, one that supports to a reasonable degree of medical certainty that a causal relationship exists between specifically identified activities at work and her diagnosed conditions and just as important, one that explains the causal relationship in such a way as to convince the adjudicator that the physician's conclusion is rational, sound and logical. Dr. Keller offered no rationalized opinion on the matter, explaining how the duties she performed at work would cause or contribute to the diagnosed conditions.

The employing establishment controverted appellant's claim in part because it appears that she has a farm or hobby that involves caring for horses, which it maintained requires repetitive use of the wrists and elbows. Because any probative medical opinion must be based on an accurate history, Dr. Keller should account for these activities and any contribution they may have made to appellant's bilateral wrist and right elbow conditions.

As the medical evidence fails to establish the essential element of causal relationship, the Board finds that appellant has not met her burden of proof. The Board will affirm the Office's November 21, 2005 decision denying her claim for compensation.

## **CONCLUSION**

The Board finds that appellant has not met her burden of proof to establish that she sustained an injury in the performance of duty. She has submitted no narrative medical discussion explaining how the established factors of her federal employment caused or aggravated her diagnosed medical conditions.

<sup>&</sup>lt;sup>7</sup> Kenneth J. Deerman, 34 ECAB 641, 645 (1983) and cases cited therein.

# **ORDER**

**IT IS HEREBY ORDERED THAT** the November 21, 2005 decision of the Office of Workers' Compensation Programs is affirmed.

Issued: May 4, 2006 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