

BRB No. 09-0871 BLA

SARAH J. SEACRIST)	
(Widow of MELVIN E. SEACRIST))	
)	
Claimant-Petitioner)	
)	
v.)	
)	
CANNELTON INDUSTRIES,)	DATE ISSUED: 10/19/2010
INCORPORATED)	
)	
Employer-Respondent)	
)	
DIRECTOR, OFFICE OF WORKERS')	
COMPENSATION PROGRAMS, UNITED)	
STATES DEPARTMENT OF LABOR)	
)	
Party-in-Interest)	DECISION and ORDER

Appeal of the Decision and Order Awarding Benefits on Remand of Richard A. Morgan, Administrative Law Judge, United States Department of Labor.

Sandra M. Fogel (Culley & Wissore), Carbondale, Illinois, for claimant.

William S. Mattingly (Jackson Kelly PLLC), Morgantown, West Virginia, for employer.

Sarah M. Hurley (M. Patricia Smith, Solicitor of Labor; Rae Ellen James, Associate Solicitor; Michael J. Rutledge, Counsel for Administrative Litigation and Legal Advice), Washington, D.C., for the Director, Office of Workers' Compensation Programs, United States Department of Labor.

Before: DOLDER, Chief Administrative Appeals Judge, SMITH and HALL, Administrative Appeals Judges.

PER CURIAM:

Employer appeals the Decision and Order Awarding Benefits on Remand (2006-BLA-05918) of Administrative Law Judge Richard A. Morgan rendered on a survivor's

claim¹ filed pursuant to the provisions of the Black Lung Benefits Act, 30 U.S.C. §§901-944 (2006), *amended by* Pub. L. No. 111-148, §556, 124 Stat. 119 (2010) (to be codified at 30 U.S.C. §§921(c)(4) and 932(l)) (the Act).² This case is before the Board for the second time.

In his first decision, the administrative law judge credited the miner with thirty-one years of coal mine employment, based on the parties' stipulation, and adjudicated this claim pursuant to the regulations contained in 20 C.F.R. Part 718. The administrative law judge found that, while the existence of legal pneumoconiosis was not established by medical opinion evidence at 20 C.F.R. §718.202(a)(4), the existence of clinical pneumoconiosis was established by autopsy and medical opinion evidence pursuant to 20 C.F.R. §718.202(a)(2) and (4), respectively.³ Further, the administrative law judge found that pneumoconiosis was established overall pursuant to 20 C.F.R. §718.202(a). Additionally, the administrative law judge found that claimant was entitled to the presumption that the miner's clinical pneumoconiosis arose out of coal mine employment pursuant to 20 C.F.R. §718.203(b), based on the miner's length of coal mine employment. The administrative law judge, however, determined that the medical evidence did not establish that the miner's death was due to clinical pneumoconiosis pursuant 20 C.F.R. §718.205(c). Benefits were, accordingly, denied.

Pursuant to claimant's appeal, the Board affirmed, as unchallenged on appeal, the administrative law judge's findings that the existence of clinical pneumoconiosis was established at Section 718.202(a)(2) and (4) and that claimant was entitled to the presumption that his clinical pneumoconiosis arose out of coal mine employment at Section 718.203(b). The Board, however, vacated the administrative law judge's finding that the medical opinion evidence failed to establish the existence of legal pneumoconiosis under Section 718.202(a)(4) and the administrative law judge's finding

¹ Claimant is the surviving spouse of the miner, who died on January 5, 2004. *See* Director's Exhibits 6, 7.

² By Order dated June 18, 2010, the Board provided the parties with the opportunity to address the impact on this case, if any, of Section 1556 of Public Law No. 111-148, which amended the Black Lung Benefits Act with respect to the entitlement criteria for certain claims. *Seacrist v. Cannelton Industries, Inc.*, BRB No. 09-0871 BLA (June 18, 2010)(unpub. Order). All parties have responded in agreement that the amendments are not applicable to this claim, because it was filed on May 12, 2004.

³ The administrative law judge did not make a specific finding under 20 C.F.R. §718.202(a)(1), but the record reflects that no x-ray interpretations were submitted. *See S.S. [Seacrist] v. Cannelton Industries, Inc.*, BRB No. 08-0488 BLA, slip op. at 2 n.3 (Jan. 30, 2009) (unpub.).

that pneumoconiosis was established overall at Section 718.202(a). The Board also vacated the administrative law judge's finding that the miner's death was not due to pneumoconiosis pursuant to Section 718.205(c). The Board, therefore, remanded the case for the administrative law judge to reconsider the evidence relevant to legal pneumoconiosis at Section 718.202(a)(4), to weigh together the evidence relevant to clinical and legal pneumoconiosis in determining whether pneumoconiosis was established overall at Section 718.202(a), and to reconsider the evidence relevant to death causation at Section 718.205(c). Specifically, the Board directed the administrative law judge to consider, on remand, the comparative credentials of the respective physicians, the explanations they gave for their conclusions, the documentation underlying their medical judgments, and the sophistication of, and bases for, their diagnoses, in accordance with *Milburn Colliery Co. v. Hicks*, 138 F.3d 524, 533, 21 BLR 2-323, 2-335 (4th Cir. 1998), and *Sterling Smokeless Coal Co. v. Akers*, 131 F.3d 438, 441, 21 BLR 2-269, 2-275-76 (4th Cir. 1997). Additionally, the Board directed the administrative law judge to fully explain the basis for his findings of fact and conclusions of law, as required by the Administrative Procedure Act (the APA). 5 U.S.C. §557(c)(3)(A), as incorporated into the Act by 30 U.S.C. §932(a), by means of 33 U.S.C. §919(d) and 5 U.S.C. §554(c)(2); *Wojtowicz v. Duquesne Light Co.*, 12 BLR 1-162, 1-165 (1989).

On remand, the administrative law judge found that the medical opinion evidence established the existence of legal pneumoconiosis at Section 718.202(a)(4) and that, on weighing all of the evidence relevant to clinical and legal pneumoconiosis together, the existence of pneumoconiosis was established overall at Section 718.202(a). Additionally, the administrative law judge found that the medical evidence established that the miner's death was due to both clinical and legal pneumoconiosis pursuant to Section 718.205(c). Benefits were, accordingly, awarded.

On appeal, employer contends that the administrative law judge erred in finding that the medical opinion evidence established the existence of legal pneumoconiosis and, therefore, that the existence of pneumoconiosis was established overall at Section 718.202(a). Employer also contends that the administrative law judge erred in finding that the miner's death was due to both clinical and legal pneumoconiosis at Section 718.205(c). Claimant responds, seeking affirmance of the administrative law judge's decision awarding benefits. The Director, Office of Workers' Compensation Programs (the Director), has not filed a substantive response to the appeal.

The Board's scope of review is defined by statute. The administrative law judge's Decision and Order must be affirmed if it is supported by substantial evidence, is rational, and is in accordance with law.⁴ 33 U.S.C. §921(b)(3), as incorporated into the Act by 30

⁴ This case arises within the jurisdiction of the United States Court of Appeals for the Fourth Circuit, as the miner was employed in coal mining in West Virginia. *See Shupe v. Director, OWCP*, 12 BLR 1-200 (1989)(*en banc*).

U.S.C. §932(a); *O'Keeffe v. Smith, Hinchman & Grylls Associates, Inc.*, 380 U.S. 359 (1965).

To establish entitlement to survivor's benefits pursuant to 20 C.F.R. Part 718, claimant must demonstrate by a preponderance of the evidence that the miner had pneumoconiosis arising out of coal mine employment and that his death was due to pneumoconiosis. See 20 C.F.R. §§718.202(a), 718.203, 718.205(c); *Island Creek Coal Co. v. Compton*, 211 F.3d 203, 22 BLR 2-162 (4th Cir. 2000); *Trumbo v. Reading Anthracite Co.*, 17 BLR 1-85, 1-87-88 (1993). Failure to establish any one of these elements precludes entitlement. *Trent v. Director, OWCP*, 11 BLR 1-26, 1-27 (1987). For survivors' claims filed on or after January 1, 1982, death will be considered due to pneumoconiosis if the evidence establishes that pneumoconiosis caused the miner's death, or was a substantially contributing cause or factor leading to the miner's death, or if death was caused by complications of pneumoconiosis. 20 C.F.R. §718.205(c)(1)-(4). Pneumoconiosis is a substantially contributing cause of a miner's death if it hastens the miner's death. 20 C.F.R. §718.205(c)(5); *Bill Branch Coal Corp. v. Sparks*, 213 F.3d 186, 190, 22 BLR 2-251, 2-259 (4th Cir. 2000); *Shuff v. Cedar Coal Co.*, 967 F.2d 977, 979-80, 16 BLR 2-90, 92-93 (4th Cir. 1992).

After consideration of the arguments on appeal, the administrative law judge's decision on remand and the evidence of record, we conclude that the administrative law judge's decision awarding benefits is rational, supported by substantial evidence, and in accordance with law.

Legal Pneumoconiosis – 20 C.F.R. §718.202(a)(4)

Turning first to the issue of legal pneumoconiosis, the administrative law judge found legal pneumoconiosis established at Section 718.202(a)(4) on the basis of the medical opinion evidence. The administrative law judge accorded greater weight to the medical opinions of Drs. Houser and Green, that the miner's emphysema was due to both coal mine employment and smoking, than to the opinions of Drs. Crouch and Farney, that the miner's "emphysema was not caused by coal mine dust, but was most likely caused by cigarette smoking." Decision and Order on Remand at 3. Specifically, the administrative law judge found that Dr. Houser supported his opinion with statements from the *American Thoracic Society Statement: Occupational Contribution to the Burden of Airway Obstruction Disease*, 187 American J. of Respiratory and Critical Care Medicine 787-797 (2003), that emphysema is caused by coal dust exposure. Decision and Order on Remand at 4; Claimant's Exhibits 2, 3. Similarly, the administrative law judge credited Dr. Green's opinion that a majority of the miner's emphysema was attributable to coal mine dust exposure, because the doctor stated that "[a] wealth of scientific studies reveal that coal mine dust is as potent as cigarette smoking in causing emphysema," Decision and Order on Remand at 4; Claimant's Exhibit 1 at 7. The administrative law judge also concluded that, of the various medical experts of record,

only Drs. Houser and Green took into account the miner’s coal mine employment history and smoking history and cited to medical literature that supported their conclusions, although he found that the medical experts were all relatively equally qualified.⁵ Decision and Order on Remand at 5 n.4. Further, the administrative law judge determined that Drs. Houser and Green cited medical literature that was more consistent with the Department of Labor (DOL) “findings that [coal] dust-induced emphysema and smoke-induced emphysema occur through similar mechanisms,” and that both doctors “explained and supported their grounds for determining that the miner’s emphysema was caused by both coal mine dust and cigarette smoking.” Decision and Order on Remand at 5.

Regarding the opinion of Dr. Crouch, the administrative law judge accorded it diminished weight because it was not well-reasoned. Specifically, the administrative law judge noted that Dr. Crouch first, “determined that the miner had no coal mine dust induced lung disease based on the absence of coal mine dust associated with some emphysema scarring[.]” Decision and Order on Remand at 6. The administrative law judge noted, however, that Dr. Crouch subsequently found that the “scarring contained coal mine dust.”⁶ *Id.* The administrative law judge accorded diminished weight to the opinion of Dr. Farney because he relied on Dr. Crouch’s opinion and because he provided no support for his finding that the miner’s “panacinar emphysema cannot be caused by coal mine dust,” and because “he [was] the only physician of record to render such an opinion.” *Id.* Additionally, the administrative law judge accorded diminished weight to the opinions of Drs. Crouch and Farney because the doctors did not have a complete picture of the miner’s health. Specifically, the administrative law judge noted that, while Dr. Crouch reviewed the miner’s autopsy slides, “she did not possess any knowledge of the miner’s background, including his coal mine employment and smoking histories.” Decision and Order on Remand at 6 n.7. Regarding Dr. Farney’s opinion, the administrative law judge observed that, while he “noted the miner’s coal mine employment history,” he “only generally stated that the miner ‘appears to had been a cigarette smoker[,]’” and he “did not demonstrate knowledge of the length or extent of

⁵ The administrative law judge specifically noted that Drs. Green and Crouch were Board-certified in Pathology, while Drs. Houser and Farney were Board-certified in Internal Medicine, with a subspecialty in Pulmonary Disease. Decision and Order on Remand at 5 n.4.

⁶ The administrative law judge noted that Dr. Crouch found that the miner’s emphysema was not caused by coal mine dust exposure because of a “predominantly panacinar distribution of emphysema,” which argued against a coal dust related etiology, and there was “no concordance between the amount and distribution of coal dust deposition and the amount or severity of emphysema.” Decision and Order on Remand at 4; Employer’s Exhibit 4.

the miner's smoking history." Decision and Order on Remand at 5 n.5. In conclusion, therefore, the administrative law judge accorded greater weight to the opinions of Drs. Houser and Green on the issues of legal pneumoconiosis as he found them better reasoned than the opinions of Drs. Crouch and Farney. The administrative law judge, therefore, found legal pneumoconiosis established at Section 718.202(a)(4).

Initially, we reject employer's assertion that the administrative law judge's decision is flawed because he weighed and credited the medical opinion evidence of record differently on remand than in his initial decision. When the Board vacated the administrative law judge's findings under Section 718.202(a)(4) and remanded the case for reconsideration and analysis of all of the relevant evidence thereunder, the effect of the Board's action was to return the parties to the *status quo ante*. The administrative law judge, therefore, properly reconsidered the evidence on this issue. *See Director, OWCP v. Wilder Coal Co.*, 8 BLR 1-119 (1985).

Next, there is no merit in employer's argument that the administrative law judge erred in referring to the preamble to the amended regulations in comparing the conflicting medical opinions of record. The preamble to the amended regulations sets forth how the DOL has chosen to resolve questions of scientific fact. 20 C.F.R. §718.201(a)(2); 65 Fed. Reg. 79,938, 79,943 (Dec. 20, 2000); *see Midland Coal Co. v. Director, OWCP [Shores]*, 358 F.3d 486, 23 BLR 2-18 (7th Cir. 2004). The administrative law judge, therefore, properly evaluated the expert opinions of record in conjunction with the DOL's discussion of the medical science cited in the preamble to the amended regulations. *See J.O. [Obush] v. Helen Mining Co.*, 24 BLR 1-117 (2009); *Zeigler Coal Co. v. Kerr [Griskell]*, 240 F.3d 572, 22 BLR 2-247 (7th Cir. 2000), *citing Freeman United Coal Mining Co. v. Summers*, 272 F.3d 473, 483 n.7, 22 BLR 2-265, 2-281 n.7 (7th Cir. 2001). Contrary to employer's suggestion, the preamble does not constitute evidence outside the record, or denote an improper inference on the part of the administrative law judge. *See J.O. [Obush]*, 24 BLR 1-125; *Maddaleni v. The Pittsburg & Midway Coal Mining Co.*, 14 BLR 1-135, 139 (1990).

Further, it is the administrative law judge's function to weigh the evidence, draw appropriate inferences and determine credibility. *See Underwood v. Elkay Mining, Inc.*, 105 F.3d 946, 21 BLR 2-23 (4th Cir. 1997); *Newport News Shipbuilding & Dry Dock Co. v. Tann*, 841 F.2d 540, 543 (4th Cir. 1988). Here, the administrative law judge's evaluation of the medical opinions of record under Section 718.202(a)(4) is rational, supported by substantial evidence and in accordance with law. The administrative law judge properly credited the opinions of Drs. Houser and Green: because he found that they were better supported by the medical evidence of record, in accord with the DOL's view as expressed in the preamble to the amended regulations, and based on more persuasive medical rationales than the contrary opinions of record. *See Compton*, 211 F.3d at 211, 22 BLR at 2-175; *Hicks*, 138 F.3d at 524, 21 BLR at 2-323; *Grizzle v. Pickands Mather & Co.*, 994 F.2d 1093, 17 BLR 2-123 (4th Cir 1993); Decision and

Order on Remand at 4-6. Additionally, the administrative law judge properly found that only Drs. Houser and Green reviewed and documented the miner’s employment and smoking histories in their reports, a valid consideration in assigning their opinions greater weight. *Church v. Eastern Associated Coal Co.*, 20 BLR 1-18 (1996); *Fields v. Island Creek Coal Co.*, 10 BLR 1-19 (1984); Decision and Order on Remand at 5 n.5.

Further, we reject employer’s argument that Dr. Green’s report should have been found to be not well-documented on the basis that Dr. Green failed to attach the medical literature he referenced in his medical opinion.⁷ The administrative law judge’s determination to credit Dr. Green’s opinion, as a medical expert, represents a valid exercise of his discretion to assess the medical evidence of record, including the quality and reliability of the medical opinion, despite the omission of the referenced literature. See *Akers*, 131 F.3d at 441, 21 BLR at 2-275-76; see *Dempsey v. Sewell Coal Co.*, 23 BLR 1-47 (2004)(*en banc*). We decline to disturb our prior holding that Dr. Green is *an expert in his own right*, as that holding constitutes the law of the case in this regard. *Seacrist*, BRB No. 08-0488 BLA, slip op. at 5 (emphasis added); see *Brinkley v. Peabody Coal Co.*, 14 BLR 1-147 (1990); *Bridges v. Director, OWCP*, 6 BLR 1-988 (1984).

By comparison, the administrative law judge properly assigned diminished weight to the contrary medical opinions expressed by Drs. Crouch and Farney, because he found that they did not persuasively refute the credible opinions of Drs. Green and Houser, and because their medical rationales were not supported by the medical evidence of record. In particular, the administrative law judge properly determined that Dr. Crouch’s opinion was not well-reasoned because the doctor based her determination that the miner had no coal mine dust-induced lung disease on “the absence of coal mine dust associated with some emphysema scarring,” when she actually stated that the scarring contained coal mine dust. Decision and Order on Remand at 6. Further, the administrative law judge found that Dr. Crouch’s testimony, that the miner’s emphysema was of a type other than panacinar, “leaves open the possibility that [the miner] had emphysema of another type, such as centricinar, as well.” *Id.* Likewise, while Dr. Crouch opined that the panacinar distribution “argues against a coal dust related etiology,” the administrative law judge observed that “Dr. Crouch did not say that such distribution absolutely forecloses coal mine dust as a cause of both substances and simultaneous causes,” and, thus, failed to “definitively exclud[e] coal mine dust as a cause of [the miner’s] emphysema[.]” *Id.* A medical opinion that is inconsistent or speculative may be assigned less weight. This was rational. *U.S. Steel Mining Co. v. Director, OWCP [Jarrell]*, 187 F.3d 384, 391, 21 BLR 2-639, 2-652-53 (4th Cir. 1999); *Justice v. Island Creek Coal Co.*, 11 BLR 1-91 (1988).

⁷ The administrative law judge acknowledged that, although Dr. Green “referenc[ed] an appendix in an apparent attempt to cite such studies[,] no appendix [was] attached to his medical report.” Decision and Order on Remand at 4.

Next, the administrative law judge reasonably discounted the opinions of Drs. Crouch and Farney because both physicians expressed a degree of reliance on their view that the miner's lungs did not exhibit scarring with macules or areas of fibrosis containing coal mine dust deposits. The administrative law judge properly noted, however, that this view was contrary to Dr. Green's more reasoned medical opinion that "the miner's interstitial fibrosis was predominantly due to coal mine dust as it was mature and contained coal mine dust deposits." Decision and Order on Remand at 6. Further, the administrative law judge properly found that Dr. Farney's opinion was less credible because Dr. Farney failed to support his determination that panacinar emphysema cannot be caused by coal mine dust, and he was the only medical expert to hold this view. *See Clark v. Karst-Robbins Coal Co.*, 12 BLR 1-149 (1989)(*en banc*); *Maypray v. Island Creek Coal Co.*, 7 BLR 1-683 (1985). Additionally, the administrative law judge properly found that, because neither Dr. Crouch nor Dr. Farney had a complete history of the miner's background, including coal mine employment and smoking histories, their opinions were not as well-reasoned as the opinions of Drs. Houser and Green. *See Hicks*, 138 F.3d at 524, 21 BLR at 2-323; *Akers*, 131 F.3d at 441, 21 BLR at 2-275-76.

In conclusion, the administrative law judge's weighing of the medical opinion evidence on legal pneumoconiosis at Section 718.202(a)(4) was adequately comprehensive, and the administrative law judge's determination to accept the medical opinions of Drs. Houser and Green over the opinions of Drs. Crouch and Farney, as more persuasive, was rational. Because substantial evidence supports the administrative law judge's finding that the medical opinion evidence established the existence of legal pneumoconiosis at Section 718.202(a)(4), that finding is affirmed.

Pneumoconiosis– 20 C.F.R. §718.202(a)

Further, as the administrative law judge found both clinical and legal pneumoconiosis established, and weighed all of the evidence together pursuant to *Compton*, 211 F.3d at 203, 22 BLR at 2-162, the administrative law judge properly found that pneumoconiosis was established overall at Section 718.202(a). Accordingly, the administrative law judge's finding that pneumoconiosis was established at Section 718.202(a) is affirmed.

Death Causation – 20 C.F.R. §718.205(c)

Turning to the issue of death due to pneumoconiosis under Section 718.205(c), the administrative law judge considered the opinions of Drs. Green, Houser, Farney, Crouch and Oesterling, the autopsy report of Dr. Estalilla, and the miner's death certificate. The administrative law judge accorded greatest weight to the opinion of Dr. Green, as buttressed by the opinion of Dr. Houser and the miner's death certificate, that the miner's clinical and legal pneumoconiosis were substantially contributing causes of the miner's death, because "Dr. Green reviewed an extensive amount of evidence regarding the

miner's condition and death, including the pathology slides, pathology reports, and hospital and treatment records.” Decision and Order on Remand at 8-9. The administrative law judge, therefore, found that Dr. Green’s opinion was “well supported by the medical evidence of record.” *Id.*; Claimant’s Exhibit 1 at 6-7. In particular, the administrative law judge noted:

Dr. Green opined that the miner suffered a respiratory death due to a combination of bronchopneumonia, metastatic cancer, and pneumoconiosis. He stated that pneumoconiosis was the “most significant and was the primary contributing factor” to death....Dr. Green does not believe that the metastatic cancer accounted for death because the cancer was in an early stage and too small to have accounted for a pulmonary death.

Dr. Green reviewed an extensive amount of evidence regarding the miner’s condition and death, including the pathology slides, pathology reports, and hospital and treatment records, and his opinion is well supported by the medical evidence of record....He determined that pneumoconiosis, including clinical pneumoconiosis, pulmonary fibrosis, and emphysema, contributed to the miner’s death because the pneumoconiosis involved a lot of lung tissue and the pulmonary fibrosis was severe.

Decision and Order on Remand at 8-9; Claimant’s Exhibit 1 at 7.

The administrative law judge found that Dr. Houser’s opinion supported Dr. Green’s death causation finding, as Dr. Houser found that the miner’s pulmonary fibrosis was due to his coal mine dust exposure, and that his death occurred “as a result of respiratory failure due to coal workers’ pneumoconiosis with associated fibrosis and also emphysema.” Decision and Order on Remand at 8-9; Employer’s Exhibit 6. The administrative law judge further noted that Dr. Houser considered the miner’s adenocarcinoma to be “an incidental finding,” but that cardiovascular disease and pulmonary edema also contributed to the miner’s death.” Decision and Order on Remand at 8-9. Additionally, the administrative law judge found that the miner’s death certificate supported Dr. Green’s opinion because it listed end-stage pulmonary fibrosis as the immediate cause of death, with severe bacterial pneumonia, chronic lung disease, and underlying coronary atherosclerotic heart disease, as conditions leading to the immediate cause of death. Decision and Order on Remand at 9; Director’s Exhibit 7.

Regarding the opinions of Drs. Farney and Crouch, that the miner’s death was unrelated to clinical or legal pneumoconiosis, the administrative law judge accorded them little weight because these physicians found that clinical and legal pneumoconiosis were not established, contrary to his own findings. Decision and Order on Remand at 8-9. Similarly, the administrative law judge accorded diminished weight to Dr. Oesterling’s opinion that the miner’s death was not due to pneumoconiosis because the doctor did not

find that legal pneumoconiosis was established, contrary to his own finding. Decision and Order on Remand at 8. Regarding Dr. Oesterling's opinion that the miner's death was not due to clinical pneumoconiosis, the administrative law judge acknowledged that, while Dr. Oesterling diagnosed clinical pneumoconiosis, his opinion that it did not cause death⁸ was contradicted by the better reasoned autopsy prosector's opinion and Dr. Green's opinion. *Id.* The administrative law judge, therefore, found that the medical evidence established that the miner's death was due to pneumoconiosis at Section 718.205(c).

Contrary to employer's arguments, the administrative law judge properly credited the opinions of Drs. Green and Houser, that both clinical and legal pneumoconiosis contributed to the miner's death, because they sufficiently established the causal connection between clinical and legal pneumoconiosis and the miner's death, and because they adequately identified the bases for their opinions. *See Sparks*, 213 F.3d at 186, 22 BLR at 2-251; *Clark*, 12 BLR at 1-155. Moreover, contrary to employer's argument, in weighing the medical opinion evidence, the administrative law judge considered the fact that both Drs. Green and Houser accounted for the effect of the miner's other health conditions, such as cancer and heart disease, on his death. *See Collins v. J & L Steel*, 21 BLR 1-182, 1-188-89 (1999). Further, the administrative law judge properly found that Dr. Estalilla's autopsy report and the miner's death certificate supported Dr. Green's opinion, since Dr. Estalilla's autopsy findings, of severe pulmonary disease consisting of marked emphysema with interstitial fibrosis, were consistent with Dr. Green's finding that the miner's lung disease included pulmonary fibrosis, and the miner's death certificate listed end-stage pulmonary fibrosis as the immediate cause of the miner's death. Decision and Order on Remand at 9; Director's Exhibits 7, 10.

By comparison, the administrative law judge properly accorded less weight to the opinions of Drs. Crouch and Farney, that the miner's death was unrelated to either clinical or legal pneumoconiosis, because the doctors failed to find the existence of either clinical or legal pneumoconiosis, contrary to the administrative law judge's own findings. Likewise, the administrative law judge properly accorded little weight to Dr. Oesterling's opinion as to the cause of the miner's death, because he failed to find the existence of legal pneumoconiosis. *See Scott v. Mason Coal Co.*, 289 F.3d 263, 22 BLR 2-372 (4th Cir. 2002); *Dehue Coal Co. v. Ballard*, 65 F.3d 1189, 19 BLR 2-304 (4th Cir. 1995); *Hobbs v. Clinchfield Coal Co.*, 45 F.3d 819, 19 BLR 2-86 (4th Cir. 1995); *Toler v. Eastern Associated Coal Corp.*, 43 F.3d 109, 19 BLR 2-709 (4th Cir. 1995). The

⁸ The administrative law judge noted that Dr. Oesterling opined that, "the structural changes caused by the pneumoconiosis were insufficient to alter the miner's pulmonary function," and the miner's "pulmonary fibrosis was secondary to the [cancerous] tumor and pneumonia," Decision and Order on Remand at 8.

administrative law judge properly accorded little weight to Dr. Oesterling's opinion, that the miner's death was not due to his clinical pneumoconiosis, because it was contradicted by the autopsy prosector's finding that "end stage pulmonary fibrosis" was the primary cause of death, and the better explained opinion of Dr. Green that the miner's fibrosis was due to coal mine dust exposure and was not secondary to the miner's cancerous tumor and pneumonia. *See Stark v. Director, OWCP*, 9 BLR 1-36, 37 (1986).

Consequently, having identified the various incorrect premises and the reasoning on which the opinions of Drs. Crouch, Farney and Oesterling were based, the administrative law judge properly accorded their opinions little weight, compared to the better reasoned opinion of Dr. Green, which was buttressed by the opinion of Dr. Houser and the miner's death certificate. *See Hicks*, 138 F.3d 524, 21 BLR 2-323. On this record, therefore, the administrative law judge properly found that the medical opinion evidence established that the miner's death was due to pneumoconiosis at Section 718.205(c).

In conclusion, the administrative law judge's findings that legal pneumoconiosis was established at Section 718.202(a)(4), that pneumoconiosis was established overall at Section 718.202(a), and that death due to pneumoconiosis was established at Section 718.205(c) are supported by valid reasons. Because his rationale and explanations are adequately detailed and comport with the requirements of the APA, we affirm them.

Accordingly, the administrative law judge's Decision and Order Awarding Benefits on Remand is affirmed.

SO ORDERED.

NANCY S. DOLDER, Chief
Administrative Appeals Judge

ROY P. SMITH
Administrative Appeals Judge

BETTY JEAN HALL
Administrative Appeals Judge