

U. S. DEPARTMENT OF LABOR

Employees' Compensation Appeals Board

In the Matter of CHARLES W. BENNETT and DEPARTMENT OF THE ARMY,
ANNISTON ARMY DEPOT, Anniston, Ala.

*Docket No. 96-2269; Submitted on the Record;
Issued August 4, 1998*

DECISION and ORDER

Before MICHAEL J. WALSH, GEORGE E. RIVERS,
WILLIE T.C. THOMAS

The issue is whether appellant has a ratable hearing loss causally related to noise exposure in his federal employment.

On August 10, 1995 appellant, then a 53-year-old welder, filed a claim alleging that he sustained a hearing loss as a result of noise exposure in his federal employment. The record indicates that appellant worked as a welder commencing in 1976 and was exposed to noise from machinery located in his work area. The employing establishment submitted intermittent audiograms from 1976 to 1991.

The Office of Workers' Compensation Programs referred appellant, the medical records of file, and a statement of accepted facts to Dr. Arthur F. Toole, a Board-certified otolaryngologist. In a report dated October 10, 1995, Dr. Toole provided a history and results on examination.¹ Dr. Toole diagnosed bilateral high frequency sloping sensorineural hearing loss and opined that the sensorineural hearing loss at 2,000 hertz (Hz) was greater than that expected from presbycusis. In a Form CA-1332, Dr. Toole opined that it was probable that the sensorineural hearing loss at 2,000 Hz was the result of noise exposure in his federal employment and presbycusis. He included an audiogram dated October 10, 1995 from an audiologist. The audiogram reported hearing loss in the right ear of 5, 10, 30 and 30 decibels (dB) at the frequencies of 500, 1,000, 2,000 and 3,000 hertz (Hz) respectively. For the left ear, the losses were 10, 10, 35 and 35 dB at the same frequencies. The calibration date of the audiometric equipment was January 11, 1995.

The medical records were referred to an Office medical adviser for evaluation. In a report dated April 26, 1996, the medical adviser opined that appellant's hearing loss was consistent with noise exposure, but for schedule award purposes the degree of hearing loss was

¹ In his report of October 10, 1995, Dr. Toole incorrectly copied the figures of audiologic testing which was performed on appellant. Thus, the figures from the audiologic testing are taken directly from the audiogram.

not sufficient to be ratable. The medical adviser based his opinion on calculations taken from the October 10, 1995 audiogram.

In a decision dated May 7, 1996, the Office advised appellant that it had accepted that his hearing loss was causally related to noise exposure in his federal employment, but the extent of his hearing loss was not sufficient under the appropriate standards to entitle him to an award under 5 U.S.C. § 8107.

The Board finds that appellant does not have a rateable hearing loss causally related to noise exposure in his federal employment.

The Office evaluates industrial hearing loss in accordance with the standards contained in the American Medical Association, *Guides to the Evaluation of Permanent Impairment* using the frequencies of 500, 1,000, 2,000 and 3,000 cycles per second. The losses at each frequency are added up and averaged and the “fence” of 25 decibels is deducted since, as the *Guides* points out, losses below 25 decibels result in no impairment in the ability to hear everyday speech in everyday conditions. The remaining amount is multiplied by 1.5 to arrive at the percentage of monaural hearing loss. The Board has concurred in the Office’s use of this standard for evaluating hearing losses for schedule award purposes.²

The requirements for the medical evidence used in evaluating hearing loss are set forth in the Office’s procedures.³ In the present case, appellant was referred for evaluation by Dr. Toole, a Board-certified otolaryngologist. His report and accompanying audiometric testing results meet the requirements established by the Office and were properly used to evaluate appellant’s hearing loss. The results from Dr. Toole show that at the frequencies of 500, 1,000, 2,000 and 3,000 Hz, appellant had dB losses of 5, 10, 30 and 30 in the right ear. The losses are averaged for a total of 18.75. As noted above, the fence of 25 must be deducted from the average dB loss, thereby resulting in a 0 percent impairment in the right ear. For the left ear, the average of the dB losses of 10, 10, 35 and 35 equals 22.50, but again the fence of 25 is deducted and the result is a 0 percent impairment in the left ear. Accordingly, the Board finds that the Office properly evaluated the medical evidence in concluding that appellant did not have a ratable hearing loss in this case.

² See *Daniel C. Goings*, 37 ECAB 781 (1986).

³ Federal (FECA) Procedure Manual, Part 3 -- Medical, *Requirements for Medical Reports*, Chapter 3.600.8(a) (September 1994). These requirements include a medical examination by an otolaryngologist, with audiological testing by a certified audiologist on equipment meeting the calibration protocol established by the American Speech-Language-Hearing Association (ASHA).

The decision of the Office of Workers' Compensation Programs dated May 7, 1996 is affirmed.

Dated, Washington, D.C.
August 4, 1998

Michael J. Walsh
Chairman

George E. Rivers
Member

Willie T.C. Thomas
Alternate Member