

U. S. DEPARTMENT OF LABOR

Employees' Compensation Appeals Board

In the Matter of JOSEPH C. GUNTER and U.S. POSTAL SERVICE,
MAIN POST OFFICE, Independence, Mo.

*Docket No. 97-246; Submitted on the Record;
Issued September 22, 1998*

DECISION and ORDER

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

The issue is whether appellant has met his burden of proof in establishing that he sustained an injury in the performance of duty, and if so, whether he is entitled to continuation of pay for the period March 22 through 31, 1996 due to disability for work as a result of the injury.

On March 21, 1996 appellant, then a 52-year-old letter carrier, underwent a syncope episode while driving a postal vehicle and collided with the rear of another vehicle. He sustained a laceration of the left brow. He stopped working the next day and returned to work on April 1, 1996. In a July 15, 1996 decision, the Office of Workers' Compensation Programs denied appellant's claim on the grounds that the evidence of record did not establish that his syncope episode was causally related to factors of employment. The Office, however, accepted the condition of laceration of the left brow as causally related to the employment incident of colliding with the rear of another vehicle.

The Board finds that appellant has established that he sustained an injury in the performance of duty on March 21, 1996.

It is a well-settled principle of workers' compensation law that an injury resulting from an idiopathic condition -- where a personal, nonoccupational pathology causes an employee to collapse and to suffer injury upon striking the immediate supporting surface and there is no intervention or contribution by any hazard or special condition of employment -- is not within the coverage of the Federal Employees' Compensation Act. Such injury does not arise out of a risk connected with the employment and it, therefore, is not compensable.¹ However, as the Board has made equally clear, the fact that the cause of a particular medical condition cannot be ascertained, or that the reason it occurred cannot be explained, does not establish that it was due to an idiopathic condition. This follows from the general rule that an injury occurring on the

¹ *Margreate Lublin*, 44 ECAB 945 (1993).

industrial premises during working hours is compensable unless the injury is established to be within an exception to such general rule.

In a March 27, 1996 report, Dr. John M. Findley, a Board-certified family practitioner, reported that he treated appellant on March 21, 1996 and diagnosed syncope of unknown etiology and laceration of the left brow. In a March 22, 1996 report, Dr. Charles D. Donohoe, a Board-certified neurologist, reported that appellant gave a history of feeling light-headed and blacking out. He noted that appellant had a prior history of right carotid endarterectomy² in 1991 for aneurysm fugax. He stated that the most likely diagnosis of appellant's condition was vaso depressor syncope with secondary head trauma and post-concussion injury. In a March 26, 1996 report, Dr. Donohoe stated that appellant exhibited a 50 percent stenosis on the left carotid bifurcation. Although Dr. Donohoe discussed appellant's syncope, he did not describe any underlying cause for the syncope episode nor did he specify the cause of appellant's syncope episode. Appellant's syncope episode while driving therefore cannot be considered an idiopathic condition as it was not shown to be caused by a personal, nonoccupational pathology. Appellant's syncopal episode while driving must therefore be considered unexplained and not the result of personal pathology. Any injuries sustained during the syncope episode as well as the hospitalization and diagnostic testing to ascertain the cause of the syncope are therefore compensable. Appellant is therefore entitled to continuation of pay for the period he was disabled from work, namely, March 21 through 31, 1996.

The decision of the Office of Workers' Compensation Programs, dated July 15, 1996, is hereby reversed.

Dated, Washington, D.C.
September 22, 1998

David S. Gerson
Member

Willie T.C. Thomas
Alternate Member

A. Peter Kanjorski
Alternate Member

² “[E]xcision of thickened atheromatous areas of the innermost coat of an artery.” *Dorland's Pocket Medical Dictionary* (23d ed., 1982).