

U. S. DEPARTMENT OF LABOR

Employees' Compensation Appeals Board

In the Matter of EVELYN S. LANGSTON and DEPARTMENT OF THE ARMY,
DENTAL CLINIC, Fort Hood, Tex.

*Docket No. 97-1154; Submitted on the Record;
Issued February 8, 1999*

DECISION and ORDER

Before GEORGE E. RIVERS, WILLIE T.C. THOMAS,
BRADLEY T. KNOTT

The issue is whether appellant has more than 54 percent permanent impairment of her left upper extremity for which she received a schedule award.

The Board has duly reviewed the case on appeal and finds it not in posture for decision.

Appellant filed a claim alleging on August 14, 1992 she injured both knees in the performance of duty. The Office of Workers' Compensation Programs accepted appellant's claim for contusion of interior tuberosity right leg and left wrist radiocarpal tear and resultant surgery. Appellant filed a claim for compensation on September 5, 1996 and requested a schedule award. By decision dated October 31, 1996, the Office granted appellant a schedule award for 56 permanent impairment of her left upper extremity.¹

In support of her claim for a schedule award, appellant submitted a report dated January 23, 1996 from Dr. William G. Stanley, a physician Board-certified in physical medicine and rehabilitation. Dr. Stanley provided appellant's range of motion figures for appellant's left wrist as well as each of the fingers and thumb of her left hand. He found that appellant had loss of strength and pain. Dr. Stanley concluded that appellant had 47 percent impairment of her left upper extremity.

The District medical adviser reviewed Dr. Stanley's report and correlated his finding with the American Medical Association, *Guides to the Evaluation of Permanent Impairment*. He found that appellant loss of strength was greater than the impairment rating provided by Dr. Stanley allowing 30 percent. He did not provide an impairment rating for pain. The District medical adviser also failed to include an impairment rating for appellant's loss of range of

¹ The Board notes that on appeal, appellant seems to believe that her schedule award constitutes her entire entitlement to workers compensation. Following the expiration of her schedule award, appellant may file additional claims for disability compensation with the Office.

motion of her wrist.² In addition, the District medical adviser did not consider the loss of range of motion of appellant's distal interphalangeal (DIP) joint of her long finger, as described in Dr. Stanley's report³ nor did he properly calculate the loss of range of motion of appellant's DIP joint of her little finger.⁴

On remand, the Office should consider the additional impairment ratings offered in Dr. Stanley's report and request additional information regarding any impairment due to pain. After this and any other development, the Office should issue an appropriate decision.

The decision of the Office of Workers' Compensation Programs dated October 31, 1996 is hereby set aside and remanded for further development consistent with this decision.

Dated, Washington, D.C.
February 8, 1999

George E. Rivers
Member

Willie T.C. Thomas
Alternate Member

Bradley T. Knott
Alternate Member

² Correlating Dr. Stanley's loss of range of motion figures with the A.M.A., *Guides*, appellant had an additional seven percent impairment to her wrist due to loss of range of motion. A.M.A., *Guides*, 36, Figure 26.

³ A review of the A.M.A., *Guides* indicates that this impairment is 15 percent of the finger. A.M.A., *Guides*, 32, Figure 19.

⁴ This impairment rating should be 21 percent rather than 10 percent as found by the District medical adviser. *Id.*