

U.S. DEPARTMENT OF LABOR

Employees' Compensation Appeals Board

In the Matter of MARY C. KALBFELL and U.S. POSTAL SERVICE,
POST OFFICE, Pittsburgh, Pa.

*Docket No. 97-1659; Submitted on the Record;
Issued February 16, 1999*

DECISION and ORDER

Before GEORGE E. RIVERS, DAVID S. GERSON,
A. PETER KANJORSKI

The issue is whether appellant sustained an employment-related left wrist injury on April 11 or December 12, 1994.

On March 23, 1995 appellant, a mail handler, filed a claim asserting that she sustained a navicular injury as a result of her federal employment. She explained that she experienced a bluish discoloration, stiffness and discomfort in her left wrist after a functional capacity evaluation and a grip strength test.

The record indicates that appellant sustained a work-related cervical sprain on March 21, 1988 and a recurrence of disability in 1989. She worked four hours a day beginning in April 1989 and received compensation benefits through January 6, 1996, when the Office of Workers' Compensation Programs determined that her injury-related disability had ceased. It was as a result of this accepted employment injury that the employing establishment directed appellant to undergo a fitness-for-duty examination on April 11, 1994. Appellant attributes her left wrist condition to the functional capacity evaluation performed that day and to a grip strength test performed on December 12, 1994 at the direction of the Office. She was told that an x-ray taken on January 18, 1995 showed a hairline fracture in her left wrist from approximately one year ago.

A February 23, 1995 note from Dr. Andrew D. Kranik, appellant's attending orthopedic surgeon, indicated that appellant was seen that day for left wrist pain "due to injuries sustained at comp. evaluations."

In a decision dated September 15, 1995, the Office denied appellant's claim on the grounds that the evidence of record failed to demonstrate a causal relationship between the incident or exposure and the claimed condition or disability. The Office found that, because both evaluations at which appellant claimed to have injured herself were scheduled because of a prior claim, for which she was on the periodic compensation roll, any injury incurred at the

evaluations would be considered consequential to that claim; however, appellant failed to submit adequate medical evidence to support that she incurred a wrist condition as a result of performing grip tests at either examination.

Appellant requested an oral hearing before an Office hearing representative, which was held on October 24, 1996. After the hearing appellant submitted additional medical evidence, including a January 18, 1995 radiology report stating that appellant had a navicular fracture of indeterminate age and soft tissue swelling. Dr. Kranik stated in a November 19, 1996 report that the diagnosis of a fractured left wrist “occurred on April 11, 1994 when the patient was involved in another work-related accident.”¹ In a treatment note dated March 8, 1995, Dr. Paul H. Resnick stated that appellant was seen that day for wrist pain. He stated that appellant related this to a functional capacity examination “a few months ago” but that she did not really give a good trauma history to her wrist. Noting that appellant had a nonunion of a navicular fracture, Dr. Resnick stated: “I think the functional capacity evaluation may have flared her up and disturbed the fibrous union.”

In a report dated May 1, 1996, Dr. Kranik stated that he last saw appellant on April 9, 1996 and that she continued to complain of pain in her left wrist:

“Her left wrist problem began on [April 11, 1994]. She apparently reported for a functional capacity evaluation recommended by her employer. After the test began, she began complaining of increasing left wrist pain which progressively worsened. She now notes radiation of pain from the wrist both dorsally and laterally up toward the neck area. This left wrist problems [sic] is due to the functional capacity evaluation.”

Finally, in a report dated October 17, 1996, Dr. Kranik stated that appellant was asymptomatic with regard to her left wrist complaint until April 11, 1994, when she was involved in a work-related accident. Dr. Kranik diagnosed fracture of the left wrist and stated: “The fracture was caused during the functional capacity test.”

In a decision dated January 10, 1997, the Office affirmed the rejection of appellant’s claim of an employment-related left wrist injury.

The Board finds that the evidence fails to establish that appellant sustained an employment-related left wrist injury on April 11 or December 12, 1994.

An employee seeking benefits under the Federal Employees’ Compensation Act² has the burden of proof to establish the essential elements of his claim.³ When an employee claims that he sustained an injury in the performance of duty, he must submit sufficient evidence to establish

¹ Dr. Kranik also addressed the issue of continuing residuals of appellant’s March 21, 1988 employment injury, which is not the subject of the present appeal.

² 5 U.S.C. §§ 8101-8193.

³ See *Margaret A. Donnelley*, 15 ECAB 40 (1963).

that he experienced a specific event, incident or exposure occurring at the time, place and in the manner alleged. He must also establish that such event, incident or exposure caused an “injury” as defined in the Act and its regulations.⁴

There is no dispute in this case that appellant underwent a functional capacity evaluation on April 11, 1994 and a grip strength test on December 12, 1994. Further, the Office acknowledges that any injury sustained at these evaluations would be considered consequential to the employment injury she sustained on March 21, 1988. The question for purposes of this appeal is whether these incidents caused a left wrist injury.

Causal relationship is a medical issue,⁵ and the medical evidence required to establish causal relationship, generally, 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,⁶ must be one of reasonable medical certainty⁷ 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.⁸

The record on appeal contains no such medical opinion evidence. Dr. Resnick reported in a speculative manner that he thought the functional capacity evaluation may have “flared her up and disturbed the fibrous union.” Dr. Kranik more definitely reported that the fracture was caused during the functional capacity test. Such statements support appellant’s claim, but they are insufficient to establish the element of causal relationship. Neither Dr. Resnick nor Dr. Kranik described what occurred during these evaluations or how appellant performed. Neither described her complaints at the time of the evaluations or whether her relevant medical course thereafter was consistent with an evaluation-related left wrist injury. Critically, neither Dr. Resnick nor Dr. Kranik offered a well-reasoned discussion explaining the medical basis of their opinions. Dr. Resnick mentioned a disturbance of the fibrous union, implying a preexisting condition, but his statement is speculative and vague. Dr. Kranik appeared to rely at least in part on the fact that appellant was asymptomatic prior to her evaluation on April 11, 1994. While a temporal relationship is of course necessary, it is not alone sufficient to establish causal relationship. The Board has held that when a physician concludes that a condition is causally related to an employment because the employee was asymptomatic before the employment

⁴ See generally *John J. Carlone*, 41 ECAB 354 (1989); see also 5 U.S.C. § 8101(5) (“injury” defined); 20 C.F.R. §§ 10.5(a)(15), 10.5(a)(16) (“traumatic injury” and “occupational disease or illness” defined).

⁵ *Mary J. Briggs*, 37 ECAB 578 (1986).

⁶ *William Nimitz, Jr.*, 30 ECAB 567, 570 (1979).

⁷ See *Morris Scanlon*, 11 ECAB 384, 385 (1960).

⁸ See *William E. Enright*, 31 ECAB 426, 430 (1980).

injury, the opinion is insufficient, without supporting medical rationale, to establish causal relationship.⁹

Although the medical evidence is supportive of an employment-related left wrist injury, it is of diminished probative value because it lacks a sufficiently detailed discussion of the circumstances of the alleged injury and fails to offer sound medical reasoning to show how appellant's left wrist condition was caused or aggravated by the evaluations on April 11 or December 12, 1988.

The January 10, 1997 decision of the Office of Workers' Compensation Programs is affirmed.

Dated, Washington, D.C.
February 16, 1999

George E. Rivers
Member

David S. Gerson
Member

A. Peter Kanjorski
Alternate Member

⁹ *Thomas D. Petrylak*, 39 ECAB 276 (1987).