

U. S. DEPARTMENT OF LABOR

Employees' Compensation Appeals Board

In the Matter of CHERLYN D. HALL and DEPARTMENT OF VETERANS AFFAIRS,
MEDICAL CENTER, Louisville, KY

*Docket No. 98-560; Submitted on the Record;
Issued April 17, 2000*

DECISION and ORDER

Before MICHAEL J. WALSH, GEORGE E. RIVERS,
A. PETER KANJORSKI

The issue is whether appellant met her burden of proof in establishing that she sustained a low back condition in the performance of duty on July 15, 1996.

On July 18, 1996 appellant, a 42-year-old program support assistant, filed a traumatic injury claim alleging that she felt a sharp pain in her lower back on July 15, 1996 when she stood up from her chair.¹ The record indicates that appellant stopped work on July 16, 1996 to approximately September 23, 1996.

Evidence submitted by the employing establishment indicated that appellant had a history of a low back condition since at least August 1990 when she was involved in a motor vehicle accident that was not employment related. The evidence also indicates that appellant was treated over the years for obesity and a left knee condition, and that she had filed 11 prior compensation claims,² most of which involved the low back and legs.

In an August 29, 1996 report, Dr. J.J. Guarnaschelli, a neurosurgeon, stated that appellant reported an onset of low back pain on July 15, 1996 while bending over and lifting some objects from a box. He indicated that the pain had evolved into low back, bilateral hip and leg pain that was aggravated by standing and walking. Dr. Guarnaschelli stated that this was the first time that appellant had back and leg pain of this nature and that appellant had denied previous trauma, injury or fall. He listed an impression of bilateral lumbar radiculopathy and ordered diagnostic

¹ At her June 24, 1997 hearing, appellant noted that she experienced a "few seconds" of "sharp pain" in her lower back upon standing up after she had been picking up, while seated in her chair, medical charts from a tub on the floor. Appellant stated that she experienced similar pain, along with leg numbness, the next day after performing similar duties.

² These other claims are not before the Board on the present appeal.

testing. Dr. Guarnaschelli signed an attached certification that he had “reasonable grounds” to believe that appellant had a work-related injury.

In a September 13, 1996 decision, the Office of Workers’ Compensation Programs denied the claim on the grounds that there was insufficient medical evidence to establish that her claimed condition or disability was causally related to her employment.

Appellant requested a hearing before an Office hearing representative which was held on June 24, 1997. Appellant also submitted additional evidence prior to the hearing.

In a July 16, 1996 report, Dr. Paranita Bratton, a family practitioner, noted treating appellant for low back pain that date and advised that appellant reported having increased low back pain the previous day at work after making a “movement.” He diagnosed obesity and chronic low back pain “with exacerbation.” In an August 20, 1996 report, Dr. Bratton noted appellant’s history in a manner similar to that of her July 16, 1996 report and also noted appellant’s history of treatment for “disc disease” in 1990. He noted findings on examination and concluded that appellant had “a long history of back pain that seems to have been exacerbated by an unusual movement while at work on July 15, 1996.”

In an August 18, 1997 decision, an Office hearing representative affirmed the Office’s September 13, 1996 decision.

The Board finds that appellant did not meet her burden of proof in establishing that she sustained a low back condition in the performance of duty on July 15, 1996.

An employee seeking benefits under the Federal Employees’ Compensation Act³ has the burden of establishing the essential elements of his or her claim including the fact that the individual is an “employee of the United States” within the meaning of the Act, that the claim was timely filed within the applicable time limitation period of the Act, that an injury was sustained in the performance of duty as alleged and that any disability and/or specific condition for which compensation is claimed are causally related to the employment injury.⁴ These are essential elements of each compensation claim regardless of whether the claim is predicated upon a traumatic injury or an occupational disease.⁵

There is no dispute that appellant is a federal employee, that she timely filed her claim for compensation benefits, and that the workplace incidents or exposure occurred as alleged. However, appellant did not submit sufficient medical evidence to establish that she sustained an injury in the performance of duty.⁶

³ 5 U.S.C. §§ 8101-8193.

⁴ *Joe D. Cameron*, 41 ECAB 153 (1989); *Elaine Pendleton*, 40 ECAB 1143 (1989).

⁵ *Victor J. Woodhams*, 41 ECAB 345 (1989).

⁶ Part of a claimant’s burden of proof includes the submission of rationalized medical evidence based upon a complete factual and medical background showing causal relationship between the claimed injury and employment factors; see *Mary J. Briggs*, 37 ECAB 578 (1986); *Joseph T. Gulla*, 36 ECAB 516 (1985).

The evidence indicates that appellant has a history of a low back condition since at least August 1990 when she was involved in a motor vehicle accident. The only medical evidence mentioning the July 15, 1996 employment incident are the July 16 and August 20, 1996 reports from Dr. Bratton and the August 29, 1996 report of Dr. Guarnaschelli.

Dr. Bratton's reports are insufficient to establish appellant's claim because they are unrationalized and only offer speculative support for causal relationship between appellant's claimed condition and specific employment factors. For example, Dr. Bratton, in her August 20, 1996 report, couches support for causal relationship in speculative terms by stating that appellant's back pain "seems to have been exacerbated by an unusual movement while at work on July 15, 1996."⁷ Further, in view of appellant's preexisting history of low back problems and obesity, it is important that the doctor provide medical rationale explaining why appellant's condition would be caused or aggravated by employment factors instead of being solely due to preexisting conditions.⁸

Dr. Guarnaschelli's report is of diminished probative value because it is based on an inaccurate history⁹ and also lacks medical rationale explaining the basis of his opinion on causal relationship. For example, Dr. Guarnaschelli did not provide an opinion, demonstrating a knowledge of appellant's preexisting low back problems, which explained the medical reasons why her condition was caused or aggravated by employment factors instead of being solely the result of her preexisting condition.

For these reasons, appellant has not met her burden of proof in establishing that she sustained an injury in the performance of duty.

⁷ See *Leonard J. O'Keefe*, 14 ECAB 42, 48 (1962) (where the Board held that medical opinions based upon an incomplete history or which are speculative or equivocal in character have little probative value).

⁸ See *George Randolph Taylor*, 6 ECAB 986, 988 (1954) (where the Board found that a medical opinion not fortified by medical rationale is of little probative value).

⁹ See *Vernon R. Stewart*, 5 ECAB 276, 280 (1953) (where the Board held that medical opinions based on histories that do not adequately reflect the basic facts are of little probative value in establishing a claim).

The August 18, 1997 decision of the Office of Workers' Compensation Programs is affirmed.

Dated, Washington, D.C.
April 17, 2000

Michael J. Walsh
Chairman

George E. Rivers
Member

A. Peter Kanjorski
Alternate Member