The issue is whether appellant has established disability commencing March 19, 1994 causally related to his employment injuries.

In the present case, appellant filed a claim on October 25, 1993 alleging that his heart condition was causally related to his federal employment. The Office of Workers’ Compensation Programs accepted the claim for a single episode of angina pectoris and coronary bypass surgery on October 4, 1993. Appellant was off work from September 30 to November 29, 1993. The employing establishment terminated appellant’s employment effective March 19, 1994.

On September 17, 1997 appellant filed a claim for continuing compensation (Form CA-8) commencing March 19, 1994. By decision dated June 2, 1998, the Office determined that appellant was not entitled to compensation for wage loss commencing March 19, 1994.

The Board has reviewed the record and finds that appellant has not established that he had an employment-related disability commencing March 19, 1994.

An employee seeking benefits under the Federal Employees’ Compensation Act1 has the burden of establishing the essential elements of his or her claim, including that any disability or specific condition for which compensation is claimed is causally related to the employment injury.2

In the present case, the Office advised appellant by letter dated May 9, 1994 that his claim had been accepted for single episode angina pectoris and coronary bypass surgery. The

Board notes that subsequent to acceptance of the claim the Office sent the case record to an Office medical adviser for review. The questions posed to the medical adviser, however, were related to causal relationship of angina pectoris, a condition that had been accepted by the Office. The Office issued a May 22, 1995 decision which purported to deny the claim, but this decision was reversed by an Office hearing representative in a decision dated June 10, 1997. The hearing representative indicated that the Office had attempted to rescind acceptance of the claim and had not met its burden of proof.

The case, therefore, remained in its initial posture, which was an accepted episode of angina pectoris. Since appellant had returned to work in November 1993, it is his burden of proof to establish that as of March 19, 1994 he was disabled as a result of an employment injury.

The Board notes that the record indicates that appellant stopped working on March 19, 1994 due to termination of his position. In order to establish entitlement to compensation, appellant must submit medical evidence that establishes an employment-related disability from the food service adviser position on or after March 19, 1994.

In this case, the medical evidence is not of sufficient probative value to meet appellant’s burden of proof. In a report dated May 10, 1996, Dr. Michael Schoolman, a cardiovascular disease specialist, opined that “stress perhaps by stimulating the release of catecholemines and hypercoagulability factors may contribute to the rupture of vulnerable atherosclerotic plaque with subsequent coronary artery thrombosis which may certainly have occurred under the significant emotional and physical stress created by the job [appellant] had.” He concluded that appellant’s coronary artery disease may have been accelerated by the emotional and physical demands of his job. The Board notes that the underlying condition of coronary artery disease has not been accepted as employment related. To the extent that Dr. Schoolman is relating coronary artery disease to appellant’s federal employment, it must be established that compensable work factors contributed to the condition. The Office properly accepted that the performance of appellant’s regular or specially assigned duties are compensable factors, but those relating to the employing establishment’s reorganization have not been established as compensable. An administrative or personnel matter will not be considered a compensable factor of employment unless the evidence discloses that the employing establishment erred or acted abusively. Dr. Schoolman refers to “stress” but does not specifically identify compensable factors of employment, clearly explain causal relationship between coronary artery disease and the employment factors or provide a reasoned opinion as to disability on or after March 19, 1994.

3 A December 22, 1994 report from the medical adviser does not discuss disability commencing March 19, 1994.


5 Appellant had been reassigned from manager to food service adviser in August 1993 as part of a reorganization of the employing establishment. The position was abolished effective March 19, 1994.

6 See Lillian Cutler, 28 ECAB 125 (1976).

In a report dated August 29, 1997, Dr. Dennis M. Hall, a cardiologist, stated that appellant’s cardiovascular status was stable and he recommended that appellant avoid high stress situations. He did not address the relevant issues in this case. In a form report (Form CA-20a) dated October 3, 1997, Dr. Hall diagnosed coronary artery disease and hyperlipidemia and checked a box “yes” that appellant’s condition is related to an employment injury. The checking of a box “yes” in a form report, without additional explanation or rationale, is not sufficient to establish causal relationship.8

The record does not contain a reasoned medical opinion, based on a complete factual and medical background, as to a disability commencing on or after March 19, 1994 and the accepted employment injury. It also fails to contain a reasoned opinion establishing an additional diagnosed condition as causally related to compensable work factors and causing disability on or after March 19, 1994. Accordingly, appellant has not met his burden of proof in this case.

The decision of the Office of Workers’ Compensation Programs dated June 2, 1998 is affirmed.

Dated, Washington, D.C.
   April 10, 2000

Michael J. Walsh
Chairman

David S. Gerson
Member

Willie T.C. Thomas
Alternate Member

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8 See Barbara J. Williams, 40 ECAB 649, 656 (1989).