

U. S. DEPARTMENT OF LABOR

Employees' Compensation Appeals Board

In the Matter of THOMAS E. EZZELL and DEPARTMENT OF THE NAVY,
NAVAL SURFACE WARFARE CENTER, Bethesda, MD

*Docket No. 98-2111; Submitted on the Record;
Issued March 7, 2000*

DECISION and ORDER

Before MICHAEL J. WALSH, GEORGE E. RIVERS,
WILLIE T.C. THOMAS

The issue is whether appellant has a ratable hearing loss entitling him to a schedule award.

The Board has duly reviewed the case on appeal and finds that appellant is not entitled to a schedule award.

Appellant, a motor vessel captain supervisor, filed a claim on September 7, 1997 alleging that he developed hearing loss due to exposure in his federal employment. After development of the medical evidence, by decision dated May 27, 1998, the Office of Workers' Compensation Programs accepted that appellant sustained a hearing loss due to his federal employment. However, the Office found that appellant's hearing loss did not entitle him to a schedule award and that hearing aids were not medically supported.

In support of his claim, appellant submitted a report from Dr. Kenneth H. Farrell, a Board-certified otolaryngologist, including an audiogram. Dr. Farrell opined that appellant's hearing loss was causally related to his employment and recommended hearing aids. He provided an audiogram. The Office has set forth requirements for the medical evidence to be used in evaluating hearing loss and the Board has adopted these requirements. The requirements are that the claimant undergo audiological evaluation and otological examination, that the audiological testing precede the otological examination, that the audiological evaluation be performed by different individuals as a method of evaluating the reliability of the findings; that the audiologist and otolaryngologist be certified, that all audiological equipment authorized for testing meet calibration protocol and that the audiometric test results include both bone conduction and pure tone air condition thresholds; speech reception thresholds and monaural discrimination scores and that the otolaryngologist's report must include: date and hour of examination; date and hour of employee's last exposure to loud noise; a rationalized medical opinion regarding the relation of the hearing loss to employment-related noise exposure; and a

statement of the reliability of the tests.¹ Dr. Farrell's reports do not comport with the requirements of medical evidence in evaluating hearing loss and are of limited probative value in establishing appellant's degree of loss of hearing as well as his need for hearing aids.

The Office properly referred appellant for a second opinion evaluation with Dr. George T. Singleton, a Board-certified otolaryngologist. Dr. Singleton's report as well as the supporting audiograms, complied with the Office's requirements for medical evidence. The Office properly determined that his report was entitled to the weight of the medical evidence and applied the American Medical Association, *Guides to the Evaluation of Permanent Impairment* to that report. The losses at the frequencies of 500, 1,000, 2,000 and 3,000 cycles per second were added and averaged and the "fence of 25 decibels was deducted."² The remaining amount was multiplied by 1.5 to arrive at the percentage of monaural hearing loss. For a binaural hearing loss, the loss in each ear is calculated using the above formula. The lesser loss is then multiplied by five and added to the greater loss. This amount is then divided by six to arrive at the total binaural hearing loss. For levels recorded in the left ear of 25, 20, 20 and 35 decibels, the above formula derives 0 percent monaural loss and for levels recorded in the right ear of 30, 25, 20 and 25 decibels, the above formula derives 0 percent monaural loss. According to the accepted formula these combine to reach a 0 percent binaural loss of hearing.

As the weight of the medical evidence establishes that appellant does not have a ratable loss of hearing, the Office properly informed him that he was not entitled to a schedule award. Furthermore, Dr. Singleton opined that appellant did not require hearing aids. As Dr. Farrell's reports were not in conformance with the standard for medical evidence in this case, his report is not sufficient to establish the need for hearing aids or to create a conflict with Dr. Singleton regarding the need for hearing aids.

¹ *George L. Cooper*, 40 ECAB 296, 303 (1988); Federal (FECA) Procedure Manual, Part 3 -- Medical, *Requirements for Medical Reports*; Chapter 3.600(8)(a) (September 1994) and Exhibit 4 (September 1996).

² The A.M.A., *Guides* points out that the loss below an average of 25 decibels is deducted as it does not result in impairment in the ability to hear everyday sounds under everyday listening conditions.

The decision of the Office of Workers' Compensation Programs dated May 27, 1998 is hereby affirmed.

Dated, Washington, D.C.
March 7, 2000

Michael J. Walsh
Chairman

George E. Rivers
Member

Willie T.C. Thomas
Alternate Member