

U. S. DEPARTMENT OF LABOR

Employees' Compensation Appeals Board

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In the Matter of CHARLENE J. CHAPMAN and U.S. POSTAL SERVICE,  
NEWTON POST OFFICE, Newton, PA

*Docket No. 99-300; Submitted on the Record;  
Issued May 17, 2000*

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DECISION and ORDER

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

The issue is whether appellant has met her burden of proof in establishing that her cervical condition is causally related to factors of her employment.

On August 20, 1996 appellant, then a 36-year-old postal clerk, filed a claim for compensation, stating that her right shoulder was irritated, causing weakness in the right arm and shoulder. She attributed her problem to repetitive motion in sorting mail. In a June 18, 1997 decision, the Office of Workers' Compensation Programs denied appellant's claim. The Office found that appellant had experienced the claimed employment factor but the medical evidence submitted had not established that a condition had been diagnosed in connection with the employment factor. The Office concluded that appellant had not demonstrated that she had an injury within the meaning of the Federal Employees' Compensation Act. In an April 20, 1998 letter, appellant, through her attorney, requested reconsideration. In a July 20, 1998 merit decision, the Office denied appellant's request for modification.

The Board finds that the case is not in posture for decision.

A person who claims benefits under the Act<sup>1</sup> has the burden of establishing the essential elements of his claim. Appellant has the burden of establishing by reliable, probative and substantial evidence that his medical condition was causally related to a specific employment incident or to specific conditions of employment.<sup>2</sup> As part of such burden of proof, rationalized medical opinion evidence showing causal relation must be submitted.<sup>3</sup> The mere fact that a condition manifests itself or worsens during a period of employment does not raise an inference

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<sup>1</sup> 5 U.S.C. §§ 8101-8193.

<sup>2</sup> *Margaret A. Donnelly*, 15 ECAB 40, 43 (1963).

<sup>3</sup> *Daniel R. Hickman*, 34 ECAB 1220, 1223 (1983).

of causal relationship between the condition and the employment.<sup>4</sup> Such a relationship must be shown by rationalized medical evidence of causal relation based upon a specific and accurate history of employment incidents or conditions which are alleged to have caused or exacerbated a disability.<sup>5</sup>

In an April 23, 1997 report, Dr. Frederick R. Struthers, an osteopath, indicated that appellant had pain and weakness in the right arm and shoulder. He noted appellant had impaired sensation in the left ulnar nerve region and decreased pin sensation in the C5 nerve distribution. Dr. Struthers reported that appellant had spasm of the cervical and thoracic spine. He noted that an electromyogram (EMG) and nerve conduction studies were compatible with a mild, acute left tardy ulnar syndrome and mild, chronic C5 radiculopathies, bilaterally. Dr. Struthers diagnosed C5 radiculopathy and cervical strain and sprain. He commented that he did not know how “this event” occurred.

In a May 27, 1997 report, Dr. Christine S. O’Donnell, a Board-certified orthopedic surgeon, noted that appellant sorted mail at the employing establishment. She indicated that appellant had been off work for two months because she felt she could not tolerate her position nor any position where she would sit for eight hours a day. Dr. O’Donnell noted that appellant had a positive Tinel’s test over the left cubital tunnel and a trace over the right cubital tunnel. She noted the results of the EMG and nerve conduction studies. Dr. O’Donnell diagnosed chronic cervical pain with a C5 radiculopathy, more on the right, with a mild right shoulder subacromial bursitis with no evidence of a rotator cuff tear. She also diagnosed a mild ulnar nerve irritation of the left elbow. In a June 24, 1997 report, Dr. O’Donnell indicated that appellant still had neck pain, bilateral shoulder pain and numbness of the left arm, ulnar forearm, ring and little fingers. She noted that the numbness was aggravated by hyperflexion and relieved by extension. Dr. O’Donnell related that appellant, in her work, held mail with her left hand and did repetitive sorting with her right hand. She reported that x-rays showed loss of intervertebral disc space at C5-6 with foraminal narrowing on the right. Dr. O’Donnell diagnosed chronic C5 radiculopathy with left ulnar nerve neuropathy, and mild right shoulder impingement.

In an August 8, 1997 report, Dr. Stephen Jaffe, a Board-certified radiologist, indicated that a magnetic resonance imaging (MRI) scan showed degenerative bulging of the C4-5 disc. The MRI scan also showed bulging of the C5-6 disc with moderate right-sided spurring from the Luschka joint at C5-6 contributing to right foraminal stenosis. An October 21, 1997 MRI scan of the right shoulder showed joint effusion but was otherwise normal.

In a January 27, 1998 report, Dr. John S. Taras, a Board-certified orthopedic surgeon, stated that his examination showed no objective abnormalities. He indicated that the Tinel’s, Phalen’s, Finkelstein’s and Grind tests were negative. Dr. Taras found appellant had normal sensibility. He noted appellant had tenderness at the perioscapular region and seemed to have a little bit of tightness to periscapular musculature, particularly in the trapezius region. Dr. Taras reported that appellant had a slight decreased range of motion of the neck but the neck motion

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<sup>4</sup> *Juanita Rogers*, 34 ECAB 544, 546 (1983).

<sup>5</sup> *Edgar L. Colley*, 34 ECAB 1691, 1696 (1983).

did not cause any pain radiating into the forearm. He diagnosed probable cervical radiculopathy and arm pain.

In an April 7, 1998 report, Dr. James J. White, an osteopath, indicated that he had been treating appellant since October 1997. He noted appellant's MRI and EMG results and stated:

"I do believe that most likely her upper extremity pain, cervical radiculopathy and ulnar neuropathy are as a result of her work situation. She does repetitively use her arms above shoulder height on a regular basis. This repetitive motion may cause stretch injury of the surrounding musculature and nerves in the shoulder and neck area. I find that no other causative agent for the patient's symptomatology other than her work requirements. I have reviewed her work requirements and do feel that they likely have caused and exacerbated her symptomatology."

A review of the medical evidence shows that Drs. Struthers, O'Donnell, Taras and White reached the same diagnosis of cervical radiculopathy. Drs. Struthers, O'Donnell and Taras noted appellant's work requirements but did not give an opinion on whether appellant's job caused her cervical condition. Dr. White was the only physician to give an opinion on causal relationship, concluding that appellant's condition was most likely due to repetitive motion in her job. His opinion was not contradicted by the other medical reports of record. Dr. White's opinion is not sufficiently well rationalized to establish that appellant's cervical condition is causally related to her employment duties. However, the report is sufficient to require further development of the record. The case therefore will be remanded for such development.<sup>6</sup>

On remand, the Office shall prepare a statement of accepted facts and refer appellant, together with a statement of accepted facts and the case record, to an appropriate specialist for an examination. The specialist should give a diagnosis of appellant's condition and state his opinion on whether the diagnosed condition or conditions are causally related to the factors of appellant's employment, particularly the requirement of repetitive motion. After further development as it may find necessary, the Office should issue a *de novo* decision.

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<sup>6</sup> *John J. Carlone*, 41 ECAB 354 (1989).

The decision of the Office of Workers' Compensation Programs dated July 20, 1998 is hereby set aside and the case remanded for further development as set forth in this decision.

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

Michael J. Walsh  
Chairman

George E. Rivers  
Member

Willie T.C. Thomas  
Alternate Member