U. S. DEPARTMENT OF LABOR

Employees' Compensation Appeals Board

In the Matter of GWYNETTE FOSTER and DRUG ENFORCEMENT ADMINISTRATION OFFICE OF PERSONNEL, FIELD STAFFING UNIT, Washington, DC

Docket No. 99-493; Submitted on the Record;
Issued May 5, 2000

DECISION and ORDER

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

The issue is whether appellant has met her burden of proof to establish that she sustained right carpal tunnel syndrome in the performance of duty as alleged.

On November 16, 1995 appellant, a personnel staffing specialist, filed a notice of occupational disease with the Office of Workers' Compensation Programs, alleging that she has developed a repetitive stress injury to her right wrist as a result of her employment. She indicated that she first became aware of her condition on October 28, 1996.

Appellant submitted various documents with her CA-2 form to evidence her claim for carpal tunnel syndrome, including statements from Patricia C. Otey, Chief, field staffing unit; Mary Garrett, personnel staffing specialist; Mary F. Washington, Rodnetta C. Williams, personnel staffing assistant; Robin D. Ford; Kimberly S. Beatty, personnel staffing assistant; Dianne Graham, personnel assistant; and Bonita Cox, staffing assistant who all indicated that appellant had complained about wrist pain. She provided an outline of her work history and stated that all previous positions required repeated movement of the wrist or hand including the use of a typewriter or computer keyboard. Ms. Otey, appellant's supervisor, noted that as a personnel staffing specialist, appellant is responsible for writing and preparing vacancy announcements, reviewing the qualifications of applicants, writing letters and memorandums, processing personnel actions and required to use a typewriter, personal computer and ink pen to carry out assigned tasks.

Appellant also submitted with her claim for compensation an electromyogram (EMG) from Dr. Heshmat Majlessi, a neurologist, dated February 12, 1997, who was consulted by Dr. Victor E. Herry, an internist and family practitioner, who attended to appellant after her alleged condition was discovered. Dr. Majlessi noted the following symptoms in his February 12, 1997 report: "pain and paresthesias involving the right wrist and right thumb. The pain is mostly in the flexor side of the wrist. Tinel's sign is positive on the right and negative on the left. No focal weaknesses. Thenar and hypothenar are within normal limits. Deep tendon

reflexes are present. There is no sensory deficit to pinprick." Dr. Majlessi's report noted that a sampling of appellant's right upper extremity was taken and his impression of appellant's condition was further indicated as "Right carpal tunnel syndrome by virtue of the sensory component involvement." Appellant also submitted a note from Dr. Herry dated May 1, 1997 that indicated she sustained a work-related injury of her right wrist which was diagnosed by the EMG of the right upper extremity. Dr. Herry noted in his report that appellant's prognosis was fair.

In a letter dated September 15, 1997, the Office requested additional information from appellant to establish that her condition resulted from factors of her employment. The Office referred to the statements offered by appellant's staff in support of her claim and also to appellant's statement, work history, description of duties, SF 171, application for federal employment, current position description for personnel staffing specialist and medical reports, but indicated that the case record is insufficient to determine her eligibility for benefits under the Federal Employees' Compensation Act. The Office made specific reference to Dr. Majlessi's February 12, 1997 medical report, which noted appellant's symptoms and findings from the EMG, and Dr. Herry's May 1, 1997 note regarding appellant's injury; however, it stated the reports fail to describe the employment factors that caused or contributed to appellant's condition. The Office in its September 15, 1997 request for additional information allotted approximately 30 days for the submission of all requisite evidence.

In a decision dated December 18, 1997, the Office found that appellant failed to establish fact of injury. The Office noted that it afforded appellant the opportunity to provide supportive evidence, however, such evidence was not received.[1] The Office found the medical evidence submitted of diminished value because it failed to establish a causal relationship between appellant's disability and specific employment factors allegedly causing the claimed condition.

The Board finds that appellant did not meet her burden of proof to establish that she sustained an injury in the performance of duties as a personnel staffing specialist.

An employee seeking benefits under the Act[2] 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 filed within the applicable time limitation of the Act, that an injury[3] 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

[1] Additional medical evidence was submitted to the Office following the December 18, 1997 decision; however, the Board's jurisdiction is limited to a review of the evidence in the case record at the time of the Office's final decision. 20 C.F.R. § 501.2(c).

[2] 5 U.S.C. § 8101 *et seq.*

[3] Section 8101(5) of the Act defines "injury" in relevant part as follows: "'injury' includes, in addition to injury by accident, disease proximately caused by employment." Section 10.5(a)(14) of Title 20 of the Code of Federal Regulations further defines "injury" in relevant part as follows: "'Injury' means a wound or condition of the body induced by accident or trauma, and includes a disease or illness proximately caused by the employment for which benefits are provided under the Act."

the employment injury.[4] These are the essential elements of each and every compensation claim regardless of whether the claim is predicated upon a traumatic injury or occupational disease.[5]

In an occupational disease claim such as this, claimant must submit: (1) medical evidence establishing the existence of the disease or condition for which compensation is claimed; (2) a factual statement identifying employment factors alleged to have caused or contributed to the disease; and (3) medical evidence establishing that the employment factors were the proximate cause of the disease or, stated differently, medical evidence that the diagnosed condition is causally related to the employment factors identified by claimant.[6]

Section 10.5(a)(16)[7] defines an occupational disease or illness as "a condition produced in the work environment over a period longer than a single workday or work shift by such factors as systemic infection; continued or repeated stress or strain; or exposure to hazardous elements." In claims not based on a specific incident, appellant must submit sufficient evidence to identify fully the particular work factors alleged to have caused the disease or condition and to show that he or she was exposed to the factors claimed; thus, appellant bears the burden of proving that work was performed under the specific factors at the time, in the manner and to the extent alleged.[8] While appellant's condition need not be caused by a specific injury or incident, or an unusual amount of stress or exertion,[9] appellant must submit medical evidence diagnosing a specific disease or condition and explaining how identified employment factors have inflicted injury.[10]

The medical evidence required is generally rationalized medical opinion evidence which includes a physician's opinion of reasonable medical certainty based on a complete factual and medical background of the claimant and supported by medical rationale explaining the nature of the relationship between the diagnosed condition and the specific employment factors identified by claimant.[11] Neither the fact that appellant's condition became apparent during a period of employment nor appellant's belief that the condition was caused by his employment is sufficient to establish a causal relationship.[12]

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[4] *Jerry D. Osterman*, 46 ECAB 500 (1995); *Victor J. Woodhams*, 41 ECAB 345, 352 (1989).

[5] *Id.*

[6] *Id.*

[7] 20 C.F.R. § 10.5(a)(16).

[8] Federal (FECA) Procedure Manual, Part 2 -- Claims, *Development of Claims*, Chapter 2.800.3 (April 1993).

[9] *George A. Johnson*, 43 ECAB 712, 716 (1992).

[10] *Judith A. Peot*, 46 ECAB 1036 (1995).

[11] *Victor J. Woodhams*, *supra* note 4.

[12] *Kathryn Haggerty*, 45 ECAB 383, 389 (1994).

In this case, there is medical evidence of record substantiating a diagnosis of carpal tunnel syndrome and appellant has alleged repetitive typing and use of a computer keyboard as factors of her employment that caused her condition. She has further offered factual evidence in support of her claim in the form of various statements submitted from her supervisor and colleagues who all support the claim that she suffered a work-related injury. But because appellant did not also provide rationalized medical evidence sufficient to establish that her diagnosed condition related to specific factors of her employment, she has failed to establish that the current condition is causally related to the accepted employment injury. Dr. Majlessi in his February 12, 1997 report offered no opinion regarding the cause of appellant's condition, which he diagnosed as carpal tunnel syndrome. While Dr. Herry stated in his May 1, 1997 report that appellant had a work-related injury of the right wrist, he offered no medical explanation in support of his opinion. The Board has held that a physician's opinion is not dispositive simply because it is offered by a physician.[13] To be of probative value to appellant's claim, the physician must provide a proper factual background and must provide medical rationale which explains the medical issue at hand, be that whether the current condition is disabling or whether the current condition is causally related to the accepted employment injury. Where no such rationale is present, the medical opinion is of diminished probative value.

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

Dated, Washington, D.C.
May 5, 2000

Michael J. Walsh
Chairman

George E. Rivers
Member

A. Peter Kanjorski
Alternate Member

[13] *See Michael Stockert*, 39 ECAB 1186 (1988).