

U. S. DEPARTMENT OF LABOR

Employees' Compensation Appeals Board

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In the Matter of TOM A. WILLIAMS and U.S. POSTAL SERVICE, SOUTH SUBURBAN  
POSTAL & DISTRIBUTION CENTER, Bedford Park, IL

*Docket No. 99-192; Submitted on the Record;  
Issued November 21, 2000*

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DECISION and ORDER

Before MICHAEL J. WALSH, WILLIE T.C. THOMAS,  
PRISCILLA ANNE SCHWAB

The issue is whether appellant has met his burden of proof in establishing that his heart attack was causally related to compensable factors of employment.

On June 7, 1998 appellant, then, a 62-year-old custodian, filed a notice of traumatic injury and claim for compensation, Form CA-1, alleging that, on May 12, 1998, he sustained a heart attack in the performance of duty. A witness confirmed that, at the time of appellant's heart attack, appellant was cutting grass for the employing establishment. Appellant sought emergency medical treatment.

In a discharge summary dated May 17, 1998, Dr. Edwin Palileo, a Board-certified internist, noted that appellant presented to the emergency room on May 12, 1998 with severe substernal chest discomfort associated with diaphoresis. The physician diagnosed acute inferior, posterior wall myocardial infarction and coronary artery disease.

On July 24, 1998 the employing establishment controverted the claim.

In response to the Office of Workers' Compensation Programs' request for more information, appellant submitted the following medical evidence on July 28, 1998. On May 12, 1998 Dr. A. Tom Petropulos, a Board-certified internist, treated appellant at the Christ Hospital and Medical Center Emergency Room. The physician reported that appellant presented with an acute inferior myocardial infarction and developed severe substernal chest discomfort associated with diaphoresis after lunch. Dr. Petropulos noted no prior history of heart problems and indicated that appellant would be undergoing emergency cardiac catheterization and coronary angioplasty by Dr. Stephen Wiet, a Board-certified internist, who performed a cardiac catheterization and an echocardiogram, which revealed "evidence of a luminal dissection which probably caused [appellant's] myocardial infarction."

In a duty status report, Form CA-17, dated June 23, 1998, Dr. Petropulos indicated that appellant's heart attack occurred while he was mowing the lawn. The physician diagnosed a myocardial infarction and concluded that appellant was capable of returning to his regular work on June 25, 1998. In an attending physician's report, Form CA-20, dated June 19, 1998, Dr. Thomas Bump, a Board-certified internist, diagnosed an acute myocardial infarction but indicated with a checkmark that it was not caused or aggravated by an employment activity. Dr. Bump noted that appellant was totally disabled from May 12 through June 25, 1998 but could resume light-duty work as long as he did not operate a lawnmower.

In a statement received by the Office on July 28, 1998, appellant explained that on the day of his injury, it was very hot outside and that "the large lawn mower contributed to the heart attack." He further stated that he had no prior heart problems, felt pain in his arm and chest, and was at home 24 hours before the heart attack.

By decision dated August 3, 1998, the Office denied appellant's claim. The Office found that there was no rationalized medical evidence establishing that appellant's heart attack was caused by or aggravated by factors of his federal employment.

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

An employee seeking benefits under the Federal Employees' Compensation Act<sup>1</sup> 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.<sup>2</sup> These are essential elements of each compensation claim regardless of whether the claim is predicated upon a traumatic injury or an occupational disease.<sup>3</sup>

Causal relationship is a medical issue,<sup>4</sup> and the medical evidence required to establish causal relationship is rationalized medical opinion evidence. Rationalized medical opinion evidence is medical evidence which includes a physician's rationalized medical opinion on whether there is a causal relationship between the claimant's diagnosed condition and the implicated employment factors. The opinion of the physician must be based on a complete factual and medical background of the claimant, must be one of reasonable medical certainty,<sup>5</sup>

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<sup>1</sup> 5 U.S.C. §§ 8101-8193.

<sup>2</sup> *Elaine Pendleton*, 40 ECAB 1143 (1989).

<sup>3</sup> *Victor J. Woodhams*, 41 ECAB 345 (1989).

<sup>4</sup> *Mary A. Howard*, 45 ECAB 646 (1994); *Cynthia M. Judd*, 42 ECAB 246 (1990); *Terry R. Hedman*, 38 ECAB 222 (1986).

<sup>5</sup> *See Morris Scanlon*, 11 ECAB 394, 385 (1960).

and must be supported by medical rationale explaining the nature of the relationship between the diagnosed condition and the specific employment factors identified by the claimant.<sup>6</sup>

In this case, Dr. Petropulos indicated in a duty status report that appellant's heart attack occurred while he was cutting the lawn, the physician did not state whether any specific employment factors caused an employment activity in which appellant was engaged when he experienced severe substernal chest pains. Although Dr. Bump specifically checked "no" in response to the question of whether appellant's condition was caused or aggravated by an employment activity, he provided no reasoned explanation for his negative response in light of the symptoms appellant experienced while cutting grass and being taken immediately to the hospital, where a diagnosis of myocardial infarction was made.

While Dr. Petropulos' duty status report was insufficient to establish a causal relationship between appellant's May 12, 1998 heart attack and factors of his employment, the Board finds that his report constitutes sufficient evidence to require further development of the record by the Office.<sup>7</sup>

On remand the Office should refer appellant, along with the case record and a statement of accepted facts, to an appropriate medical specialist for a well-rationalized opinion, based on a complete and accurate factual and medical background, as to whether appellant's duties of cutting grass with a lawn mower on a reportedly hot day, contributed to or caused the May 12, 1998 myocardial infarction. The Office should thereafter issue a *de novo* opinion on appellant's entitlement to compensation.

The August 3, 1998 decision of the Office of Workers' Compensation Programs is hereby set aside, and the case is remanded for further development to be followed by a *de novo* opinion in accordance with this decision of the Board.

Dated, Washington, DC  
November 21, 2000

Willie T.C. Thomas  
Member

Priscilla Anne Schwab  
Alternate Member

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<sup>6</sup> Gary L. Fowler, 45 ECAB 365 (1994); Victor J. Woodhams, *supra* note 3.

<sup>7</sup> See John J. Carlone, 41 ECAB 354 (1989).

Michael J. Walsh, Chairman, dissenting:

I respectfully dissent in this case for the reason that there is no medical opinion even remotely connecting the claimant's heart attack with the events of May 12, 1998 when appellant was taken to a hospital emergency room. The opposite is true. His treating physician, Dr. Thomas Bump, a Board-certified internist, indicated on a CA-20 medical form dated June 19, 1998 that appellant's myocardial infarction was not caused or aggravated by an employment activity. Dr. Abdul Ghani discussed a test administered on June 8, 1998 stating, "The patient had a history of myocardial infarction, status post percutaneous transluminal coronary angioplasty on May 14, 1998. Risk factors include smoking and family history of heart disease...."

The majority cites the medical report of Dr. A. Tom Petropulos, a Board-certified internist who treated appellant in the emergency room as a basis for developing the evidence. In a Form CA-17 dated June 23, 1998, Dr. Petropulos indicated "cutting lawn -- heart attack." Such a statement on a medical form in no way addresses, even in a conclusory fashion, the cause of the heart attack. The only report that touches on the issue of causation is Dr. Bump's and that is in the negative.

The burden of proof is on the claimant to establish the claim. In this case, there is only neutral or negative evidence from which no inference of causality can be drawn. For this reason I would affirm the Office's August 3, 1998 decision.

Michael J. Walsh  
Chairman