

U. S. DEPARTMENT OF LABOR

Employees' Compensation Appeals Board

---

In the Matter of SANDRA L. GRAY and DEPARTMENT OF LABOR,  
OFFICE OF WORKERS' COMPENSATION, Denver, CO

*Docket No. 01-244; Submitted on the Record;  
Issued September 27, 2001*

---

DECISION and ORDER

Before DAVID S. GERSON, WILLIE T.C. THOMAS,  
A. PETER KANJORSKI

The issue is whether appellant established that her back condition was causally related to factors of her federal employment.

On June 8, 1998 appellant, then a 49-year-old claims examiner, filed an occupational claim, alleging that on June 8, 1998 she became aware that she had a work-related chronic cervical strain, aggravation of degenerative disc disease, arthritis and a herniated, protruded or bulging disc. Appellant stated that the condition was caused by bending, stooping, lifting and carrying heavy files at work or carrying a large number of files in a day and constant, repetitive computer work. Appellant stated that she had had lumbar back problems for many years but the pain had got progressively worse in the past four years and the stooping, bending and carrying heavy files or a lot of files made the lumbar pain worse and additionally caused her pain in her sacroiliac joint which began for the first time two and a half years ago. She stated that the pain in her neck began two years ago and was aggravated when she keyed for long periods of time at her computer.

By decision dated August 6, 1998, the Office denied the claim, stating that appellant did not submit medical evidence establishing that she sustained an injury as alleged.

By letter dated September 3, 1998, appellant requested reconsideration of the decision and submitted two magnetic resonance imaging (MRI) scans dated November 23, 1993 and April 19, 1996, and a report from her treating physician, Dr. Eric R. Jamrich, a Board-certified orthopedic surgeon, dated August 16, 1998. In his August 16, 1998 report, Dr. Jamrich considered appellant's history of injury, reviewed the 1993 and 1996 MRI scans, and diagnosed degenerative disc disease, chronic lumbar and cervical strain, and a central disc herniation at L5-S1. He stated:

“[Inasmuch] as [appellant's] job involves continual stooping and bending to lift files from the floor, carrying heavy loads of files and constant repetitive computer work, these are likely to have significantly aggravated the underlying conditions

noted in the 1993 MRI scan and accelerated the degenerative changes which appeared evident.”

By decision dated January 13, 1999, the Office denied appellant’s request for modification.

By letter dated April 16, 1999, appellant requested reconsideration of the Office’s decision and submitted a medical report from Dr. Jamrich dated January 26, 1999. In his January 26, 1999 report, Dr. Jamrich stated that sitting in itself puts more stress on the low back than many other activities, and stated that it was “probably not” the lifting of files weighing only a few ounces that caused appellant’s problem. He stated that patients who have sedentary jobs have a higher incidence of lumbar spine problems. In response to the Office’s question of whether it was possible that appellant’s current condition was the natural progression of her underlying condition, Dr. Jamrich replied that “many things are possible.”

By decision dated April 20, 1999, the Office denied appellant’s request for modification.

By letter dated April 19, 2000, appellant requested reconsideration of the Office’s decision and submitted a report from Dr. Stewart K. Weinerman, a Board-certified orthopedic surgeon, dated May 11, 1999 and from Dr. Phillip Heyman, a Board-certified orthopedic surgeon, dated June 27, 2000. In his May 11, 1999 decision, Dr. Weinerman considered appellant’s history of injury, performed a physical examination and reviewed the 1993 and 1996 MRI scans. He opined that appellant had chronic low back pain relative to degenerative changes in the lumbosacral spine with multiple failed discs at L4-5 and L5-S1. Dr. Weinerman opined that her back condition was exacerbated by her sedentary job at work where she did a lot of sitting, bending and twisting.

In his June 27, 2000 report, Dr. Heyman described appellant’s symptoms of shoulder, hand, wrist and forearm pain, performed a physical examination and diagnosed unchanged left upper extremity pain. He prescribed exercises and full-duty work.

The Board finds that appellant failed to establish that her back condition was causally related to factors of her federal employment.

To establish that an injury was sustained in the performance of duty, appellant must submit the following: (1) medical evidence establishing the presence or existence of the condition for which compensation is claimed; (2) a factual statement identifying employment factors alleged to have caused or contributed to the condition; and (3) medical evidence establishing that the employment factors identified by the claimant were the proximate cause of the condition for which compensation is claimed or, stated differently, medical evidence establishing that the diagnosed condition is causally related to the employment factors identified by the claimant. The medical evidence required to establish causal relationship, generally, is rationalized medical evidence. Rationalized medical opinion evidence is medical evidence which includes a physician’s rationalized opinion on the issue of whether there is a causal relationship between appellant’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, and must be supported by medical

rationale explaining the nature of the relationship between the diagnosed condition and the specific employment factors identified by appellant.<sup>1</sup>

The mere fact that a disease manifests itself during a period of employment does not raise an inference that there is a causal relationship between the two. Neither the fact that the disease became apparent during a period of employment, nor the belief of appellant that the disease was caused or aggravated by employment conditions, is sufficient to establish causal relation.<sup>2</sup>

In this case, Dr. Jamrich's opinion is not probative because in his August 16, 1998 report, Dr. Jamrich was speculative stating that appellant's activities at work of stooping, bending, carrying heavy loads and working at a computer were "likely" to have significantly aggravated her underlying degenerative changes.<sup>3</sup> Further, in his January 26, 1999 report, he stated in general that sitting puts more stress on the low back than other activities, appellant's lifting of the files probably was not the cause of the problem and patients who have sedentary jobs have a higher incidence of lumbar spine problems. He presented no opinion as to the cause of appellant's back and neck condition specific to her situation.<sup>4</sup>

Dr. Heyman's June 27, 2000 opinion in which he diagnosed left upper extremity pain and prescribed exercises and full-duty work provides no opinion on causation and is not probative.

In his May 11, 1999 decision, Dr. Weinerman opined that appellant had chronic low back pain relative to degenerative changes in the lumbosacral spine with multiple failed discs at L4-5 and L5-S1. He opined that appellant's back condition was exacerbated by her sedentary job at work where she did a lot of sitting, bending and twisting. Although Dr. Weinerman opined that appellant's back condition was exacerbated by her activities of sitting, bending and twisting, he did not provide a rationalized medical opinion explaining how appellant's specific activities at work contributed to her back problems. He did not explain the effect of appellant's work on the degenerative changes in her back and multiple failed discs at L4-5 and L5-S1. The Board has held that that a medical opinion not fortified by medical rationale is of little probative value.<sup>5</sup> Inasmuch as none of the medical evidence appellant presented established that her back condition arose from her employment with supporting medical rationale, appellant has failed to establish her claim.

---

<sup>1</sup> See *Victor J. Woodhams*, 41 ECAB 345, 352 (1989).

<sup>2</sup> *Lucrecia M. Nielsen*, 42 ECAB 583, 593 (1991); *Joseph T. Gulla*, 36 ECAB 516, 519 (1985).

<sup>3</sup> See *Wendell D. Harrell*, 49 ECAB 289, 291 (1998).

<sup>4</sup> See *Durwood H. Nolin*, 46 ECAB 818, 821-22 (1995).

<sup>5</sup> See *Ronald C. Hand*, 49 ECAB 113, 118 (1997).

The August 25, 2000 decision of the Office of Workers' Compensation Programs is affirmed.

Dated, Washington, DC  
September 27, 2001

David S. Gerson  
Member

Willie T.C. Thomas  
Member

A. Peter Kanjorski  
Alternate Member