

U. S. DEPARTMENT OF LABOR

Employees' Compensation Appeals Board

In the Matter of GIRISH SHAH and U.S. POSTAL SERVICE,
BULK MAIL CENTER, Jersey City, NJ

*Docket No. 01-971; Submitted on the Record;
Issued January 18, 2002*

DECISION and ORDER

Before DAVID S. GERSON, WILLIE T.C. THOMAS,
PRISCILLA ANNE SCHWAB

The issue is whether appellant sustained an injury while in the performance of duty.

On November 10, 1999 appellant, then a 46-year-old temporary mailhandler, filed a traumatic injury claim alleging that he tripped and fell and hit his head on the ground or a conveyer belt, but he was "not sure" which, and sustained cuts to his scalp.

In a treatment note dated November 17, 1999, Dr. Antwan Abdulahad indicated that appellant had "loss of consciousness while at work and trauma to his head associated with tongue biting."

Appellant's employing establishment controverted his claim noting a conflict in the medical evidence regarding the description of appellant's injury on November 10, 1999. The employing establishment noted that on several medical documents appellant stated that he tripped, fell, and hit his head on the ground or a conveyor belt, but that he was not sure which. Alternately, Dr. Abdulahad noted that appellant lost consciousness and bit his tongue, suggesting that appellant suffered a seizure.

By letter dated November 23, 1999, the Office of Workers' Compensation Programs requested that appellant submit additional factual and medical information to support his claim.

Appellant submitted a handwritten medical report from Dr. Antwan Ahad, dated November 24, 1999, indicating that appellant had "an episode of loss of consciousness with trauma to his head due to the fall." He further stated: "Patient was found on the floor bleeding and bited (sic) his tongue."

Appellant also submitted a personal statement dated November 29, 1999 in which he described the events of November 10, 1999, stating that he was loading a truck with boxes and parcels using a conveyor belt, when he tripped and fell and hit his head and does "not know what happened afterwards."

Appellant underwent a magnetic resonance imaging (MRI) examination on December 15, 1999, performed by Dr. Douglas M. Noble, a Board-certified diagnostic radiologist, which found:

“No definite intracranial pathology. Findings most compatible with prominent Virchow-Robin spaces however possibility of nonspecific white matter disease cannot be excluded. Small mucous retention cyst versus polyp right maxillary sinus.”

By decision dated September 6, 2000, the Office denied appellant’s claim since the evidence submitted did not establish fact of injury.

The Board finds that appellant met his burden of proof to establish that he sustained an injury while in the performance of duty.

It is a well-settled principle of workers’ compensation law, and the Board has so held, that an injury resulting from an idiopathic fall -- where a personal, nonoccupational pathology causes an employee to collapse and to suffer injury upon striking the immediate supporting surface and there is no intervention or contribution by any hazard or special condition of employment -- is not within coverage of the Federal Employees’ Compensation Act. Such an injury does not arise out of a risk connected with the employment and is therefore not compensable. However, as the Board has made equally clear, the fact that the cause of a particular fall cannot be ascertained, or that the reason it occurred cannot be explained, does not establish that it was due to an idiopathic condition. This follows the general rule that an injury occurring on the industrial premises during working hours is compensable unless the injury is established to be within an exception to such general rule.¹ If the record does not establish that the particular fall was due to an idiopathic condition, it must be considered as merely an unexplained fall, one which is distinguishable from a fall in which it is definitely proved that a physical condition preexisted the fall and caused the fall.²

In this case, the medical evidence does not establish that appellant’s syncopal episode on November 10, 1999 was due to a personal, nonoccupational pathology. Dr. Abdulahad only noted that appellant had a loss of consciousness at work and bit his tongue, but did not opine as to the nature of appellant’s fall. Dr. Ahad also noted that appellant had an episode of loss of consciousness with trauma to his head but did not opine as to the nature of appellant’s fall. In addition, the MRI performed on December 15, 1999 found “no definite intracranial pathology,” providing no idiopathic cause of appellant’s syncopal episode. The Board, thus, finds that the syncopal episode remains an unexplained fall while appellant was engaged in activities related to his employment duties and is therefore compensable.

¹ *John R. Black*, 49 ECAB 624 (1998).

² *Id.*

The September 6, 2000 decision of the Office of Workers' Compensation Programs is hereby reversed and the case is remanded to the Office for a determination of the nature and extent of any disability causally related to the November 10, 1999 fall.

Dated, Washington, DC
January 18, 2002

David S. Gerson
Member

Willie T.C. Thomas
Member

Priscilla Anne Schwab
Alternate Member