

U. S. DEPARTMENT OF LABOR

Employees' Compensation Appeals Board

In the Matter of DONALD CAMPBELL and DEPARTMENT OF THE NAVY,
NORTH ISLAND NAVAL STATION, San Diego, CA

*Docket No. 02-1514; Submitted on the Record;
Issued November 21, 2002*

DECISION and ORDER

Before ALEC J. KOROMILAS, COLLEEN DUFFY KIKO,
DAVID S. GERSON

The issue is whether appellant established that he sustained a foot condition in the performance of duty.

On December 21, 2001 appellant, then a 47-year-old insulator, filed a notice of occupational disease alleging that he developed right foot pain as a result of standing and walking for long hours at a time in a temporary duty assignment.¹ The nature of disease or illness was listed as right foot plantar fasciitis. He indicated that his left foot was also beginning to bother him but that it was due to an abnormal gait. Appellant did not indicate on his CA-2 form that he had stopped work.

In support of his claim, appellant submitted a treatment note dated November 28, 2001 by Dr. William W. Peterson which stated as follows, “[Appellant’s] plantar fasciitis is work related on a more than probable basis. He was unable to work from [October 22 to November 9, 2001].”

Dispensary notes dated November 29 and December 19, 2001 indicate that appellant was treated for plantar fasciitis at Branch Medical Clinic.

In a report of “return to work status” signed by Dr. Peterson on December 14, 2001, the physician approved appellant for regular duty.

The record also contains a report of physical limitation, dated December 19, 2001, by Dr. Garrett W. Duckworth noting work limitations of minimal prolonged walking and standing from November 29 to December 18, 2001.

In a February 19, 2002 letter, the Office of Workers’ Compensation Programs advised appellant of the factual and medical evidence required to establish his claim for compensation.

¹ Appellant’s temporary duty assignment was to the North Island Naval Station, while his permanent workstation was located at Puget Sound Naval Shipyard, in Bremerton, WA.

In a letter dated March 21, 2002, the Office requested that Dr. Peterson provide a detailed, narrative report responding to specific questions regarding the nature of appellant's diagnosed foot condition. Dr. Peterson was directed to prepare detailed analysis of how appellant's diagnosed foot condition was causally related to work factors.

In a decision dated April 25, 2002, the Office denied compensation on the grounds that the medical evidence was insufficient to establish a causal relationship between appellant's diagnosed foot condition and factors of his federal employment.

The Board finds that appellant failed to establish that he sustained a right foot condition in the performance of duty.

To establish that an injury was sustained in the performance of duty in an occupational disease claim, a claimant must submit the following: (1) medical evidence establishing the presence or 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 presence or occurrence of the disease or 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 a causal relationship, generally, is rationalized medical opinion evidence. Rationalized medical opinion evidence is medical evidence which includes a physician's opinion on the issue of 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 upon 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 the claimant.²

In this case, appellant has not carried his burden of proof to establish a causal relationship between his right foot plantar fasciitis and his work duties. Although Dr. Peterson stated that appellant's foot condition was due to work conditions on a "more than probable basis," he did not provide any rationale for his opinion. The record is also devoid of any objective evidence to corroborate Dr. Peterson's statement. Treatment notes and work restrictions forms submitted by appellant do not address the issue of causal relationship. The Board further notes that Dr. Peterson did not respond to the Office's request that he provided a reasoned medical opinion regarding the nature of appellant's foot condition and how it related to the alleged work factors. In the absence of a reasoned medical opinion establishing a causal relationship between appellant's right foot plantar fasciitis and factors of his employment, the Office correctly denied compensation.³

² *George A. Ross*, 43 ECAB 346 (1991); *James D. Carter*, 43 ECAB 113 (1991)

³ The Board does not have jurisdiction to review evidence that was not before the Office at the time it issued its decision. See *Carroll R. Davis*, 46 ECAB 361 (1994). 20 C.F.R. § 501.2(c). The Board's decision does not preclude appellant from submitting additional evidence along with a request for reconsideration to the Office to further pursue his claim.

The decision of the Office of Workers' Compensation Programs dated April 25, 2002 is hereby affirmed.

Dated, Washington, DC
November 21, 2002

Alec J. Koromilas
Member

Colleen Duffy Kiko
Member

David S. Gerson
Alternate Member