

U. S. DEPARTMENT OF LABOR

Employees' Compensation Appeals Board

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In the Matter of CALVIN D. LITTLE and DEPARTMENT OF THE INTERIOR,  
NATIONAL PARK SERVICE, Asheville, NC

*Docket No. 02-1644; Submitted on the Record;  
Issued November 26, 2002*

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DECISION and ORDER

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

The issue is whether appellant sustained an injury in the performance of duty, as alleged.

On November 14, 2000 appellant, then a 41-year-old maintenance worker, filed a claim asserting that he sustained a recurrence of disability on September 8, 2000 as a result of his June 7, 1991 employment injury. He stated: "I was out on fire working ground support taking paper work up and down hill 5 [to] 10 times a day and knee started being sore and also working at ETS work on knees on concrete floor and knee swollen." Appellant submitted an emergency room record from November 6, 2000 and a return-to-work certificate dated November 14, 2000.

The Office of Workers' Compensation Programs noted that appellant's earlier claim was accepted for left knee contusion. Because he was attributing his disability beginning September 8, 2000 to additional employment factors and not to a spontaneous worsening of his 1991 employment injury, the Office treated appellant's claim as one of occupational injury rather than recurrence.<sup>1</sup> The Office requested that he submit additional information to support his claim for compensation.

In a decision dated March 6, 2001, the Office denied appellant's claim. Although the evidence of record supported that he actually experienced the claimed incident, it failed to establish that a medical condition was diagnosed in connection with the incident.

Appellant requested a review of the written record by an Office hearing representative. He submitted a magnetic resonance imaging (MRI) report dated December 20, 2000, which found osteochondral defects posteriorly in the medial and lateral tibial plateaus of the left knee, more prominently medially. No meniscal or ligamentous injury was appreciated. Appellant also

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<sup>1</sup> A "recurrence of disability" means an inability to work after an employee has returned to work, caused by a spontaneous change in a medical condition which resulted from a previous injury or illness without an intervening injury or new exposure to the work environment that caused the illness. 20 C.F.R. § 10.5(x) (1999).

submitted treatment notes from his attending orthopedist, who concluded that there was an internal derangement problem from degeneration, possibly some early arthritis in the knee.

In a decision dated February 27, 2002, the hearing representative affirmed the denial of appellant's claim on the grounds that the evidence failed to establish that he sustained an injury in the performance of duty.

The Board finds that appellant has not met his burden of proof to establish that he sustained an injury in the performance of duty, as alleged.

An employee seeking benefits under the Federal Employees' Compensation Act<sup>2</sup> has the burden of proof to establish the essential elements of his claim. When an employee claims that he sustained an injury in the performance of duty, he must submit sufficient evidence to establish that he experienced a specific event, incident or exposure occurring at the time, place and in the manner alleged. He must also establish that such event, incident or exposure caused an injury.<sup>3</sup>

The Office accepts that appellant experienced a specific event, incident or exposure occurring at the time, place and in the manner alleged, specifically, that he was taking paper work up and downhill 5 to 10 times a day and was working on his knees on a concrete floor. The employing establishment confirmed that appellant's description of duties was generally accurate and provided an official position description. The question for determination is whether the specific event, incident or exposure caused an injury.

Causal relationship is a medical issue,<sup>4</sup> and the medical evidence generally required to establish causal relationship is rationalized medical opinion evidence. Rationalized medical opinion evidence is medical evidence that includes a physician's rationalized opinion on whether there is a causal relationship between the claimant's diagnosed condition and the established incident or factor of employment. The opinion of the physician must be based on a complete factual and medical background of the claimant,<sup>5</sup> must be one of reasonable medical certainty,<sup>6</sup> and must be supported by medical rationale explaining the nature of the relationship between the diagnosed condition and the established incident or factor of employment.<sup>7</sup>

Appellant has submitted no such medical opinion. The treatment notes, MRI report, emergency room record and return-to-work certificate offer no medical rationale explaining how the implicated work activities caused or contributed to appellant's diagnosed left knee condition.

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<sup>2</sup> 5 U.S.C. §§ 8101-8193.

<sup>3</sup> See *Walter D. Morehead*, 31 ECAB 188, 194 (1979) (occupational disease or illness); *Max Haber*, 19 ECAB 243, 247 (1967) (traumatic injury). See generally *John J. Carlone*, 41 ECAB 354 (1989); *Elaine Pendleton*, 40 ECAB 1143 (1989).

<sup>4</sup> *Mary J. Briggs*, 37 ECAB 578 (1986).

<sup>5</sup> *William Nimitz, Jr.*, 30 ECAB 567, 570 (1979).

<sup>6</sup> See *Morris Scanlon*, 11 ECAB 384, 385 (1960).

<sup>7</sup> See *William E. Enright*, 31 ECAB 426, 430 (1980).

Without a reasoned medical opinion to support the essential element of causal relationship, appellant has not met his burden of proof.

The February 27, 2002 decision of the Office of Workers' Compensation Programs is affirmed.

Dated, Washington, DC  
November 26, 2002

David S. Gerson  
Alternate Member

Willie T.C. Thomas  
Alternate Member

A. Peter Kanjorski  
Alternate Member