

U. S. DEPARTMENT OF LABOR

Employees' Compensation Appeals Board

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In the Matter of THOMAS J. MATTHEWS and DEPARTMENT OF TRANSPORTATION,  
FEDERAL AVIATION ADMINISTRATION, Jamaica, NY

*Docket No. 02-2099; Submitted on the Record;  
Issued February 14, 2003*

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DECISION and ORDER

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

The issue is whether appellant established that his cardiovascular disease is related to his employment.

On May 6, 2001 appellant, then a 57-year-old air traffic control specialist, filed a claim for compensation alleging that on May 3, 2001 he experienced symptoms of cardiac disease due to a hostile workplace. He stated that the event occurred on May 3, 2001. Although the Office of Workers' Compensation Programs' decision refers to May 4, 2001 as the date appellant filed his Form CA-1, the employing establishment noted that the date of injury was May 3 and May 4, 2001.

In a report dated May 25, 2001, Dr. Mark Kirschebaum, the employing establishment's flight surgeon, stated that, based on an electrocardiogram on May 7, 2001, appellant had a myocardial infarction.

By letter dated June 11, 2001, the Office requested additional information from appellant including a description of the employment factors which he believed caused his medical condition, copies of grievances or Equal Employment Opportunity (EEO) complaints filed with regard to the work factors included in his claim, medical history of any emotional or psychological conditions, a description of stress outside his employment and a complete medical report including his doctor's opinion regarding the causal relationship between the work activities cited in his claim and his medical condition.

In a narrative dated June 27, 2001, appellant stated that he was asked to determine the destination of a certain aircraft which had filed two flight plans with different destinations. He checked with the pilot and made the necessary documentary corrections noting the correct destination. At that time, another controller who apparently was unaware that the matter had been corrected, "saw fit to yell and scream" about two flight plans for one plane on the Departure Spacing Program (DSP). Appellant then stated that the flight was destined for Santa Monica Airport (SMO) and thought that the other air traffic controller had heard him. The other

controller “kept up his tirade which he directed at me and elevated it to the use of profanity and personal attack.” Appellant asked for relief and reported a hostile work environment.

On June 29, 2001 appellant filed a claim for wage loss from July 9 to August 24, 2001.

In an undated report received by the Office on August 6, 2001, Dr. Kirschebaum stated that appellant sustained chest pain on May 3, 2001, that he had a history of hypertensive cardiovascular disease, that his diagnosis was anterolateral subendocardial infarction and that it was not caused or aggravated by the May 3, 2001 incident. Dr. Kirschebaum noted that he treated appellant on May 7, June 14 and July 3, 2001 and that he was released to return to regular work on June 1, 2001.

In a report dated August 8, 2001, Dr. Kirschebaum stated that appellant was under his care since May 7, 2001 when an electrocardiogram was read as abnormal, that appellant had an underlying cardiac history “and that the event that took place on May 4, 2001 may have aggravated it, but [I] cannot say it was the exact cause of his cardiac problems.”<sup>1</sup>

In a decision dated September 5, 2001, the Office determined that, although appellant had identified a compensable factor of employment, the medical evidence which established a cardiovascular disease did not establish a causal relationship between that condition and the compensable factor of employment.<sup>2</sup>

By letter dated February 27, 2002, appellant, through counsel, requested reconsideration. In support of his request, appellant submitted a report from Dr. Peter J. Imbornone dated January 10, 2002. Dr. Imbornone stated that he treated appellant on May 4, 2001, the day after appellant had an altercation at work. He also treated appellant on May 7, 2001 due to complaints of “some chest tightness while thinking of the incident that had occurred at work.” Dr. Imbornone performed an electrocardiogram that revealed anterolateral wall ischemic changes for which he was hospitalized and was subsequently “treated for an acute anterolateral miocardial (sic) infarction.” Appellant underwent cardiac catheterization with angioplasty and an intracoronary stent placement. Dr. Imbornone opined that “The altercation at work was not the cause of [appellant’s] cardiac condition; but was an aggravating factor leading to miocardial infarction.”

By decision dated May 3, 2002, the Office denied modification of its September 5, 2001 decision.

The Board finds that appellant failed to establish that his cardiovascular disease was causally related to his employment.

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<sup>1</sup> Dr. Kirschebaum meant May 3 vice May 4, 2001.

<sup>2</sup> The Office determined that the verbal altercation between appellant and a coworker which occurred on May 4, 2001 was an employment factor.

An employee seeking benefits under the Federal Employees' Compensation Act<sup>3</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. These are essential elements of each compensation claim regardless of whether the claim is predicated upon a traumatic injury or an occupational disease.<sup>4</sup>

Causal relationship is a medical issue and the medical evidence required to establish a causal relationship is rationalized medical evidence. Rationalized medical evidence is medical evidence which includes a physician's rationalized medical 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 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 the claimant.<sup>5</sup>

In this case, appellant has alleged that his cardiovascular disease was caused by a verbal altercation which occurred at work on May 3, 2001. The record establishes that such an altercation took place on that date. However, the medical evidence does not establish that appellant's cardiovascular condition is employment related. While he submitted an August 8, 2001 report from Dr. Kirschebaum that advised the May 3, 2001 incident "may have aggravated" appellant's preexisting heart condition, Dr. Kirschebaum did not provide a rationalized medical opinion explaining with specificity how appellant's heart condition was caused or aggravated by the May 3, 2001 incident. Similarly, Dr. Imbornone's opinion that the altercation at work aggravated appellant's myocardial infarction was not supported by a rationalized medical opinion. The medical evidence is, therefore, insufficient to establish that appellant's heart condition is employment related.

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<sup>3</sup> 5 U.S.C. §§ 8101-8193.

<sup>4</sup> *Trina Bornejko*, 53 ECAB \_\_\_\_ (Docket No. 01-1118, issued February 27, 2002).

<sup>5</sup> *Allen C. Hundley*, 53 ECAB \_\_\_\_ (Docket No. 02-107, issued May 17, 2002).

The decisions of the Office of Workers' Compensation Programs dated May 3, 2002 and September 5, 2001 are affirmed.

Dated, Washington, DC  
February 14, 2003

David S. Gerson  
Alternate Member

Willie T.C. Thomas  
Alternate Member

A. Peter Kanjorski  
Alternate Member