

U. S. DEPARTMENT OF LABOR

Employees' Compensation Appeals Board

In the Matter of RUBY D. JOHNSON and DEPARTMENT OF AGRICULTURE,
RURAL DEVELOPMENT, St. Louis, MO

*Docket No. 03-7; Submitted on the Record;
Issued March 14, 2003*

DECISION and ORDER

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

The issue is whether appellant's condition is causally related to her employment.

On June 25, 2002 appellant, then a 57-year-old "ICC counselor/processor," filed a claim for a traumatic injury alleging that on June 21, 2002 she fell because her right foot got caught under the wheel on the leg of the chair that was almost in the aisle. She stated that she remembered hearing a "crunch" in her neck before her head hit the floor and her entire body hurt, was "burning and numb in places, hands and feet."

In an anonymous witness statement dated June 25, 2002, an individual stated that on June 21, 2002, when she and Melissa Bragg were talking, Tom Melvin came in and told Ms. Bragg that appellant had fallen and needed help. They went out to look and appellant was lying on her side on the floor. In another witness statement, Maggie White stated that on June 21, 2002 appellant told Ms. Bragg that she fell when she turned and hit a chair and that her neck and arms were sore. In a witness statement dated June 24, 2002, the individual (possibly Teaunna Brown) stated that on June 21, 2001 appellant was standing behind her waiting to sign in and when Ms. Brown turned around, she saw appellant stumble, a chair spin away from its station and appellant fall to the ground. In a statement dated June 24, 2002, Ms. Bragg stated that on June 21, 2002 Mr. Melvin came into her cubicle and told her that appellant fell. She went to look and appellant was lying on her side with her eyes shut. Appellant told Ms. Bragg that she fell and her neck and shoulder hurt. She went to the hospital. In a statement dated June 24, 2002, Mr. Melvin stated that on June 21, 2002 he was sitting at his workstation and saw appellant collapse. He went and got Ms. Bragg and Donna Tomlin.

An undated medical report stated that on July 22, 2002 appellant reported no improvement and felt numbness in her hands and feet.

A magnetic resonance imaging (MRI) scan dated July 3, 2002 showed degenerative disc disease at C5-6 and C6-7, neural foramina and no evidence of acute injury.

By letter dated August 8, 2002, the Office of Workers' Compensation Programs requested additional information from appellant including how her injury resulted in her diagnosed condition.

In a report dated August 20, 2002, Dr. Gregory H. Smith, an osteopath, considered appellant's history of injury, reviewed x-rays and an MRI scan and performed a physical examination. He diagnosed subacute multisite pain following an alleged fall at work sustained on June 21, 2002. Dr. Smith stated that appellant seemed to demonstrate rather extensive myofascial pain. He stated that it was "certainly possible that [appellant] may have sustained a mild brachioplexus stretch as a result of her fall as her current cervical MRI otherwise does not explain the numbness that she experiences in both CB distributions." Dr. Smith stated that appellant's mood expresses a possible post-traumatic type of syndrome which "hopefully would improve over time as her physical condition improves."

In an attending physician's report dated August 25, 2002, Dr. David Bean, an osteopath, diagnosed cervical paresthesia and checked the "yes" box that appellant's condition was caused or aggravated by her employment. He added that appellant's symptoms occurred after the injury.

By decision dated September 11, 2002, the Office denied appellant's claim, stating that the evidence was insufficient to meet the guidelines for establishing that appellant sustained an injury due to the claimed employment incident.

The Board finds that appellant did not establish that her condition was causally related to her federal employment.

An employee seeking benefits under the Federal Employees' Compensation Act 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 filed within the applicable time limitation 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.¹ These are the essential elements of each and every compensation claim regardless of whether the claim is predicated upon a traumatic injury or occupational disease.²

The medical evidence required to establish a causal relationship, generally, 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

¹ *Elaine Pendleton*, 40 ECAB 1143, 1145 (1989).

² *Daniel J. Overfield*, 42 ECAB 718, 721 (1991).

rationale explaining the nature of the relationship between the diagnosed condition and the specific employment factors identified by the claimant.³

In this case, none of the medical evidence of record contains a rationalized medical opinion explaining how appellant's myofascial pain or paresthesia arose from her employment. In his August 26, 2002 report, Dr. Smith stated that appellant had multisite pain following an alleged fall at work on June 21, 2002. He stated that appellant seemed to demonstrate rather extensive myofascial pain and it was "certainly possible" that appellant might have sustained a mild brachioplexus stretch as a result of her fall because the MRI scan did not explain the numbness in her "CB" distributions. Dr. Smith stated that appellant's mood indicated a possible traumatic stress type of syndrome. He, however, did not explain whether appellant's myofascial pain arose from her employment and was speculative in stating that it was possible she sustained a mild brachioplexus stretch due to her fall and that she had a type of post-traumatic stress syndrome. His opinion is, therefore, of diminished probative value.⁴ Similarly, in the August 26, 2002 attending physician's report, Dr. Bean's checking the "yes" box to indicate that appellant's cervical paresthesia is work related followed by his statement that appellant's symptoms occurred after the injury is insufficient to establish the requisite causation.⁵ Appellant has, therefore, failed to establish her claim.

The September 11, 2002 decision of the Office of Workers' Compensation Programs is hereby affirmed.

Dated, Washington, DC
March 14, 2003

David S. Gerson
Alternate Member

Willie T.C. Thomas
Alternate Member

A. Peter Kanjorski
Alternate Member

³ *Gary L. Fowler*, 45 ECAB 365, 371; *Ern Reynolds*, 45 ECAB 690, 695 (1994).

⁴ *See Anne L. Billingsley*, 50 ECAB 210, 213 n. 20 (1998); *Connie Johns*, 44 ECAB 560, 571 (1993).

⁵ *See Ruth S. Johnson*, 46 ECAB 237, 242 (1994).