

In a January 22, 2004 report, the employing establishment advised that noise survey results indicated no exposure to noise in appellant's job except when the job required going to the other plant areas. Exposure was estimated at 84 to 89 decibels for one hour per day, five days per week. Hearing protection was provided and use was mandatory since 1973.

On February 17, 2004 the Office referred appellant, the record and a statement of accepted facts to Dr. Linda Mumford, a Board-certified otolaryngologist, for a second opinion. In a March 23, 2004 report, Dr. Mumford obtained an audiogram showing the following thresholds at 500, 1,000, 2,000 and 3,000 cycles per second (cps) for air conduction: on the left-- 15, 15, 10 and 55 decibels; on the right -- 10, 10, 10 and 20 decibels. The physician diagnosed a severe left noise-induced sensorineural hearing loss due to the noise exposure encountered in appellant's federal employment. Dr. Mumford did not note any noise-related hearing loss on the right. The physician noted that appellant had 30 years of significant noise exposure at the employing establishment and had the onset and progression of noise-induced sensorineural loss, on the left, while there. A left hearing aid evaluation was recommended.

On March 29, 2004 the Office accepted appellant's claim for a monaural left ear sensorineural hearing loss and payment of medical benefits. On March 29, 2004 an Office medical adviser reviewed the otologic and audiological findings submitted by Dr. Mumford and determined that, while appellant had a left monaural sensorineural hearing loss, he had no ratable hearing impairment as a result of noise exposure in the workplace. The medical adviser indicated that a hearing aid not be authorized.

On April 23, 2004 appellant filed a claim for compensation for a schedule award due to his hearing loss.

By decision dated May 3, 2004, the Office denied appellant's claim for entitlement to a schedule award as the medical opinion evidence regarding the extent of his permanent impairment of his left hearing loss was found not severe enough to be considered ratable. The Office further denied appellant's claim for additional medical benefits as the weight of the medical opinion evidence established that he would not benefit from hearing aids.

LEGAL PRECEDENT

The schedule award provision of the Federal Employees' Compensation Act¹ and its implementing regulation² set forth the number of weeks of compensation payable to employees sustaining permanent impairment from loss or loss of use, of scheduled members or functions of the body. However, the Act does not specify the manner in which the percentage of loss shall be determined. For consistent results and to ensure equal justice under the law to all claimants, good administrative practice necessitates the use of a single set of tables so that there may be uniform standards applicable to all claimants. The American Medical Association, *Guides to the*

¹ 5 U.S.C. § 8107.

² 20 C.F.R. § 10.404 (1999).

Evaluation of Permanent Impairment (A.M.A., *Guides*) has been adopted by the implementing regulation as the appropriate standard for evaluating schedule losses.³

The Office evaluates industrial hearing loss in accordance with the standards contained in the A.M.A., *Guides*.⁴ Using the frequencies of 500, 1,000, 2,000 and 3,000 cps, the losses at each frequency are added up and averaged.⁵ Then, the “fence” of 25 decibels is deducted because, as the A.M.A., *Guides* points out, losses below 25 decibels result in no impairment in the ability to hear everyday speech under everyday conditions.⁶ The remaining amount is multiplied by a factor of 1.5 to arrive at the percentage of monaural hearing loss.⁷ The binaural loss is determined by calculating the loss in each ear using the formula for monaural loss; the lesser loss is multiplied by five, then added to the greater loss and the total is divided by six to arrive at the amount of the binaural hearing loss.⁸ The Board has concurred in the Office’s adoption of this standard for evaluating hearing loss.⁹

ANALYSIS

On March 29, 2004 the Office medical adviser reviewed the otologic and audiologic testing performed on appellant by Dr. Mumford, a Board-certified otolaryngologist, and applied the Office’s standardized procedures to this evaluation. Testing for the left ear at the frequency levels of 500, 1,000, 2,000 and 3,000 cps revealed decibel losses of 15, 15, 10 and 55 respectively. These losses totaled 95 decibels and were divided by 4 to obtain the average hearing loss of 23.75 decibels. This average was then reduced by 25 decibels (25 decibels being discounted as discussed above) to equal 0 which was multiplied by the established factor of 1.5 to compute a 0 percent hearing loss in the left ear. The medical adviser did not apply the Office’s standardized procedures to the testing of appellant’s right ear as Dr. Mumford found that there was no causal relationship of appellant’s federal employment to the hearing of his right ear.

The Board finds that, although appellant’s claim for hearing loss of his left ear was accepted, his left ear hearing loss is not ratable for schedule award purposes under the Act. The percentage of hearing loss in his left ear was zero percent. Consequently, appellant is not entitled to a schedule award. Further, there is no reasoned medical evidence demonstrating the need for hearing aids and appellant is not entitled to additional medical benefits at this time.

³ A.M.A., *Guides* pp. 246-50 (5th ed. 2000).

⁴ *Id.*

⁵ A.M.A., *Guides* at 250 (5th ed. 2001).

⁶ *Id.*

⁷ *Id.*

⁸ *Id.*

⁹ *Jerome L. Simpson*, 54 ECAB ____ (Docket No. 02-1465, issued October 4, 2002); *Donald E. Stockstad*, 53 ECAB ____ (Docket No. 01-1570, issued January 23, 2002); *petition for recon. granted (modifying prior decision)*, Docket No. 01-1570 (issued August 13, 2002).

CONCLUSION

Appellant failed to establish that he is entitled to a schedule award for his employment-related monaural left ear sensorineural loss.

ORDER

IT IS HEREBY ORDERED THAT the May 3, 2004 decision of the Office of Workers' Compensation Programs is hereby affirmed.

Issued: November 10, 2004
Washington, DC

Alec J. Koromilas
Chairman

Colleen Duffy Kiko
Member

Michael E. Groom
Alternate Member