



her claimed condition on June 15, 2004 and that she first realized that it was related to her employment on the same date. She stopped work on June 15, 2004.<sup>1</sup>

By letter dated July 14, 2004, the Office requested that appellant submit additional factual and medical evidence in support of her claim. The Office advised her that she had 30 days to submit the requested evidence.

Appellant submitted a July 30, 2004 statement in which she further described her job duties. She indicated that she used both hands to pick up magazines, parcels, flats, bundles of letters, and other materials and then placed them into case slots or hampers. Appellant stated that she also used both hands to pull mail from the cases, load her delivery vehicle, operate her vehicle and deliver the mail to customers.<sup>2</sup>

Appellant submitted a July 16, 2004 report in which Dr. Paul M. Legant, an attending Board-certified orthopedic surgeon, indicated that she had reported having a burning pain, numbness and loss of strength in her left wrist for the prior two and a half years.<sup>3</sup> Dr. Legant stated that appellant's right forearm showed healed scars of an old radial nerve and muscle injury and indicated that she reported she could not "tell what is going on with the pain in her right arm or wrist because of old nerve damage when she put her arm through a window when she was about 18 years old." He noted that on examination the Tinel's sign was questionable positive on the left with some flattening of the thenar prominence, more in the left palm than the right, and indicated that fine touch sensation was diminished in both hands, more in the left hand than the right. Dr. Legant diagnosed "bilateral carpal tunnel syndrome by history, job history, and pain history" and recommended that she undergo electromyogram (EMG) and nerve conduction studies.

The results of EMG and nerve conduction studies obtained on July 22, 2004 revealed that appellant had a bilateral median neuropathy, more severe on the left, which was consistent with bilateral carpal tunnel syndrome.

In his follow-up report dated July 29, 2004, Dr. Legant provided examination findings which were similar to those described in his previous report and summarized the findings of the July 22, 2004 diagnostic testing. Under the assessment heading of the report, he stated, "Patient with bilateral carpal tunnel syndrome, etiology uncertain. The patient has had symptoms for a number of years." He further noted, "Advise patient I cannot tell her what caused her problems but repetitive work with her hands and wrist exacerbates her symptoms." Dr. Legant indicated

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<sup>1</sup> Appellant stopped work for at least a month but it is unclear from the record whether she has returned to work for the employing establishment.

<sup>2</sup> She also submitted an official description of her mail carrier position and a medical history form which she completed in 1998.

<sup>3</sup> He noted that appellant attributed her condition to the duties of her job.

that appellant would be scheduled for surgery and noted that he gave her a note for light-duty work status at the post office.<sup>4</sup>

By decision dated August 16, 2004, the Office denied appellant's claim on the grounds that she did not submit sufficient medical evidence to establish that she sustained an upper extremity condition in the performance of duty.

### **LEGAL PRECEDENT**

An employee seeking benefits under the Federal Employees' Compensation Act<sup>5</sup> has the burden of establishing the essential elements of 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 or specific condition for which compensation is claimed is causally related to the employment injury.<sup>6</sup> These are the essential elements of each compensation claim regardless of whether the claim is predicated upon a traumatic injury or an occupational disease.<sup>7</sup>

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 is rationalized medical opinion evidence. Rationalized medical opinion evidence is medical evidence which includes a physician's rationalized 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>8</sup>

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<sup>4</sup> Appellant also submitted the results of a June 30, 1998 examination which appears to have been conducted by a physician contracted by the employing establishment. The signature of the physician is illegible.

<sup>5</sup> 5 U.S.C. § 8101 *et seq.*

<sup>6</sup> *Elaine Pendleton*, 40 ECAB 1143, 1145 (1989).

<sup>7</sup> *See Delores C. Ellyett*, 41 ECAB 992, 994 (1990); *Ruthie M. Evans*, 41 ECAB 416, 423-25 (1990).

<sup>8</sup> *Victor J. Woodhams*, 41 ECAB 345, 351-52 (1989).

## ANALYSIS

Appellant filed an occupational disease claim alleging that she sustained bilateral carpal tunnel syndrome due to the repetitive duties of her job, including lifting, sorting and delivering mail. She did not submit sufficient medical evidence to establish that she sustained an upper extremity condition in the performance of duty.

Appellant submitted a July 16, 2004 report in which Dr. Legant, an attending Board-certified orthopedic surgeon, indicated that she had reported having a burning pain, numbness and loss of strength in her left wrist for the prior two and a half years and experiencing nerve and muscle damage in her right arm when she was about 18 years old. Dr. Legant diagnosed “bilateral carpal tunnel syndrome by history, job history, and pain history” and recommended that she undergo EMG and nerve conduction studies.

After the results of EMG and nerve conduction studies obtained on July 22, 2004 showed results consistent with bilateral carpal tunnel syndrome, Dr. Legant produced a July 29, 2004 report in which he explicitly indicated that he did not know the cause of appellant’s bilateral upper extremity condition. He diagnosed “[B]ilateral carpal tunnel syndrome, etiology uncertain” and indicated that appellant “has had symptoms for a number of years.” The Board has found that a report which lacks a clear opinion on causal relationship or is equivocal regarding causal relationship is of limited probative value.<sup>9</sup> Dr. Legant further highlighted the fact that he could not provide a clear opinion on causal relationship by indicating he advised appellant that he could not “tell her what caused her problems.” He noted that appellant reported that repetitive work with her hands and wrists exacerbated her symptoms, but he did not provide an opinion that the implicated employment duties caused or aggravated appellant’s diagnosed upper extremity condition.<sup>10</sup> Therefore, the record does not contain an opinion relating employment factors to the claimed upper extremity condition.

## CONCLUSION

The Board finds that appellant did not meet her burden of proof to establish that she sustained an upper extremity condition in the performance of duty.

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<sup>9</sup> See *Charles H. Tomaszewski*, 39 ECAB 461, 467-68 (1988); *Jennifer Beville*, 33 ECAB 1970, 1973 (1982).

<sup>10</sup> Appellant also submitted the results of a June 30, 1998 examination, but the report contains no indication that appellant had an employment-related upper extremity condition.

**ORDER**

**IT IS HEREBY ORDERED THAT** the August 16, 2004 decision of the Office of Workers' Compensation Programs is affirmed.

Issued: March 2, 2005  
Washington, DC

Alec J. Koromilas  
Chairman

Willie T.C. Thomas  
Alternate Member

A. Peter Kanjorski  
Alternate Member