

In a May 18, 2004 report, Dr. Daryl A. Ruark, an attending Board-certified orthopedic surgeon, provided a history of appellant's condition and findings on physical examination. He indicated that his diagnosis when he first examined her on December 12, 2003 was acromioclavicular (AC) joint arthritis, impingement syndrome and a partial rotator cuff tear. Dr. Ruark's current diagnosis was secondary adhesive capsulitis. He stated that appellant's right shoulder condition was caused by her work-related motor vehicle accident in August 2001 and her repetitive overhead lifting at work.

By decision dated July 2, 2004, the Office denied appellant's claim on the grounds that the evidence failed to establish that her right shoulder condition was causally related to factors of her employment.

On February 18, 2005 appellant requested reconsideration and submitted additional evidence.

In an August 3, 2004 report, Dr. Ruark noted that appellant's right shoulder pain had resolved following her August 2001 motor vehicle accident. Appellant developed right shoulder pain again when she began performing a position which involved overhead reaching. Dr. Ruark indicated that the cause of appellant's right shoulder pain was most likely AC joint arthritis, impingement syndrome, possible rotator cuff tearing and adhesive capsulitis. On August 11, 2004 appellant underwent surgery consisting of right shoulder diagnostic arthroscopy, distal clavicle excision and acromioplasty.

By decision dated June 1, 2005, the Office denied modification of its July 2, 2004 decision.

On October 12, 2005 appellant requested reconsideration and submitted additional evidence. In an August 18, 2005 report, Dr. Kelly R. Armstrong, an attending Board-certified internist, provided findings on physical examination and diagnosed right shoulder pain in the rotator cuff area. She noted that appellant's right shoulder condition was not causally related to her August 14, 2001 work-related motor vehicle accident. Dr. Armstrong stated:

“[Appellant] states the right shoulder problem began [May 2003] while working at the [employing establishment] doing repetitive overhead lifting.... My [June 5, 2003] note does not detail circumstances of her right shoulder pain other than duration [of] three weeks and no specific date of injury recalled, and she was thereafter seen by orthopedists for this problem. I do not have the [May 31, 2003] emergency room notes but I do have a copy of the emergency room [n]ote to [e]mployer on [May 31, 2003] which states diagnosis as ‘overuse injury right shoulder’ and ‘cannot use right arm’ and ‘may do alternative duty’ and follow-up recommendation with ‘Company medical department’ which implies to me that this was a work-related shoulder injury as [appellant] states.”²

² Appellant submitted numerous other clinical notes and reports dated 2003 to 2005. However, this medical evidence does not contain any medical rationale explaining how her right shoulder condition was causally related to factors of her employment.

By decision dated December 2, 2005, the Office denied modification of its June 1, 2005 decision.

LEGAL PRECEDENT

To establish a causal relationship between appellant's right shoulder condition and her employment, she must submit rationalized medical opinion evidence based on a complete factual and medical background supporting such a causal relationship. Rationalized medical opinion evidence is medical evidence which includes a physician's opinion on the issue of whether there is a causal relationship between the claimant's 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.³

ANALYSIS

The Board finds that appellant failed to establish that her right shoulder condition is causally related to her federal employment.

Dr. Ruark diagnosed AC joint arthritis, an impingement syndrome, a partial rotator cuff tear and secondary adhesive capsulitis. He stated that appellant's right shoulder condition was caused by her work-related motor vehicle accident in August 2001 and repetitive overhead lifting at work. However, Dr. Ruark did not provide sufficient medical rationale to explain his opinion on causal relationship. Medical reports not containing adequate rationale on causal relationship are of diminished probative value and are generally insufficient to meet an employee's burden of proof.⁴ Also, in an August 3, 2004 report, Dr. Ruark indicated that appellant's right shoulder pain resolved completely following her August 2001 motor vehicle accident. He did not explain how her diagnosed right shoulder conditions in 2003, AC joint arthritis, an impingement syndrome, a partial rotator cuff tear and adhesive capsulitis, were causally related to her 2001 right shoulder condition accepted injury, a right trapezius muscle whiplash sprain/strain. Such explanation is particularly important in light of the fact that the 2001 condition had resolved. Due to these deficiencies, Dr. Ruark's report is not sufficient to establish that appellant's right shoulder condition in 2003 is causally related to factors of her federal employment or to her 2001 employment injury.

Dr. Armstrong diagnosed right shoulder pain in the rotator cuff area. She stated her opinion that appellant's right shoulder condition was not causally related to her August 14, 2001 work-related motor vehicle accident. Her impression that appellant's condition was caused by repetitive overhead lifting at work in 2003 was based on appellant's opinion of causal relationship and to May 31, 2003 emergency room notes. Dr. Armstrong noted that her June 5, 2003 clinical note did not detail the circumstances involved in the onset of appellant's right shoulder pain, only that she had been experiencing pain for three weeks. She indicated that the

³ Gary J. Watling, 52 ECAB 278 (2001); Gloria J. McPherson, 51 ECAB 441 (2000).

⁴ Ceferino L. Gonzales, 32 ECAB 1591 (1981).

May 31, 2003 emergency room note to appellant's employer provided a diagnosis of overuse injury of the right shoulder which "implies to me that this was a work-related shoulder injury as [appellant] states." However, Dr. Armstrong did not provide sufficient medical rationale addressing the issue of causal relationship. As noted, medical reports not containing adequate rationale on causal relationship are of diminished probative value and are generally insufficient to meet an employee's burden of proof. Lacking adequate medical rationale, Dr. Armstrong's report is not sufficient to establish that appellant's right shoulder condition is causally related to factors of her federal employment.

CONCLUSION

The Board finds that appellant did not meet her burden of proof to establish that her right shoulder condition was causally related to factors of her employment.

ORDER

IT IS HEREBY ORDERED THAT the decisions of the Office of Workers' Compensation Programs dated December 2 and June 1, 2005 are affirmed.

Issued: April 13, 2006
Washington, DC

Alec J. Koromilas, Chief Judge
Employees' Compensation Appeals Board

Michael E. Groom, Alternate Judge
Employees' Compensation Appeals Board