

**United States Department of Labor
Employees' Compensation Appeals Board**

SHERRY TEEL, Appellant

and

**U.S. POSTAL SERVICE, POST OFFICE,
Tampa, FL, Employer**

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**Docket No. 06-796
Issued: July 17, 2006**

Appearances:

Capp P. Taylor, Esq., for the appellant

Office of Solicitor, for the Director

Case Submitted on the Record

DECISION AND ORDER

Before:

ALEC J. KOROMILAS, Chief Judge

DAVID S. GERSON, Judge

MICHAEL E. GROOM, Alternate Judge

JURISDICTION

On February 8, 2006 appellant timely appealed a December 8, 2005 decision of the Office of Workers' Compensation Programs which denied her claim for a complex regional pain disorder or reflex sympathetic dystrophy causally related to her January 20, 2001 employment injury. Pursuant to 20 C.F.R. §§ 501.2(c) and 501.3, the Board has jurisdiction over the merits of this claim.

ISSUE

The issue is whether appellant met her burden of proof to establish that her complex regional pain disorder or reflex sympathetic dystrophy are causally related to her January 20, 2001 employment injury.

FACTUAL HISTORY

This claim has previously been on appeal. The Office accepted appellant's claim for a traumatic injury on January 20, 2001 when she fell down a sack hole used for depositing mailbags onto a conveyor belt and sustained left shoulder and right ankle sprains. Appellant

stopped work on January 20, 2001 and did not return. She was eventually diagnosed as having reflex sympathetic dystrophy, complex regional pain disorder, and neuropathic pain disorder and depression. In an October 18, 2004 decision, the Board affirmed the termination of appellant's wage-loss compensation benefits effective July 23, 2001 on the grounds that she no longer had any disability causally related to her January 20, 2001 employment injury. The Board found that appellant failed to establish that her emotional condition, complex regional pain disorder or reflex sympathetic dystrophy was causally related to her accepted injury.¹ The facts of the case, as set forth in the Board's prior decision, are incorporated herein.

In an October 13, 2005 letter, appellant requested reconsideration. Medical records from Dr. Anthony F. Kirkpatrick, a specialist in pain management, were submitted. In a January 19, 2005 report, he noted the history of injury and appellant's medical treatment. Dr. Kirkpatrick listed his examination findings and diagnosed primary reflex sympathetic dystrophy (complex regional pain syndrome type 1) of the left upper extremity, left shoulder and left face region. A spreading reflex sympathetic dystrophy to the right lower extremity was also diagnosed. He provided objective findings for each of his diagnoses and advised that appellant's reflex sympathetic dystrophy was complicated by a severe depression. Stellate ganglion blocks and lumbar sympathetic blocks were recommended in addition to continuing follow-up with her psychiatrist. In a September 27, 2005 report, Dr. Kirkpatrick advised that appellant's reflex sympathetic dystrophy was causally related to her injury of January 20, 2001. He noted that there was no history of prior problems with the left upper extremity and appellant's evolution of clinical symptoms following the January 20, 2001 injury mirrored what one would expect for a reflex sympathetic dystrophy syndrome. Appellant noted pain spreading from her left shoulder region into her neck as well as distally into her entire left upper extremity. Dr. Kirkpatrick explained that appellant had spreading symptoms to the right lower extremity, which was also supportive of the diagnosis of reflex sympathetic dystrophy as a result of the January 20, 2001 injury.

By decision dated December 8, 2005, the Office denied modification of its March 26, 2004 decision.

LEGAL PRECEDENT

A claimant seeking benefits under the Federal Employees' Compensation Act² has the burden of establishing the essential elements of her claim by the weight of the reliable, probative and substantial evidence, including that any specific condition or disability for work for which she claims compensation is causally related to the employment injury.³ To establish a causal relationship between the condition, as well as any attendant disability claimed and the employment injury, an employee must submit rationalized medical evidence, based on a complete factual and medical background, supporting such a causal relationship.⁴

¹ Docket No. 04-1347 (issued October 18, 2004).

² 5 U.S.C. § 8101 *et seq.*

³ *Jacquelyn L. Oliver*, 48 ECAB 232, 2335-36 (1996).

⁴ *Id.*

Causal relationship is a medical issue and the medical evidence required to establish a causal relationship is rationalized medical evidence.⁵ 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.⁶ Neither the fact that a disease or condition manifests itself during a period of employment nor the belief that the disease or condition was caused or aggravated by employment factors or incidents is sufficient to establish causal relationship.⁷

ANALYSIS

In support of her contention that her claimed complex regional pain or reflex sympathetic dystrophy is causally related to the January 20, 2001 work injury, appellant submitted medical reports and progress notes from Dr. Kirkpatrick. The Board finds that Dr. Kirkpatrick's reports are insufficient to establish her claim.

In a September 27, 2005 report, Dr. Kirkpatrick stated that he related appellant's reflex sympathetic dystrophy condition to her January 20, 2001 injury because there was no history of prior problems with the left upper extremity and the evolution of her symptoms. The Board finds that Dr. Kirkpatrick did not provide sufficient medical rationale in support of his stated opinion on causal relationship between appellant's reflex sympathetic dystrophy condition to her left shoulder and to her right ankle. The only explanation provided was that appellant reported a pain spreading from her left shoulder region into her neck as well as distally into her entire left upper extremity and there was no history of prior problems with the left upper extremity. The Board has held that an opinion that a condition is causally related because the employee was asymptomatic before the injury is insufficient, without sufficient rationale, to establish causal relationship.⁸ Although Dr. Kirkpatrick noted objective evidence of appellant's reflex sympathetic dystrophy in her left upper extremity and right lower extremity and explained that such evidence was supportive of the diagnosis of the evolution of reflex sympathetic dystrophy, he did not explain how the reflex sympathetic dystrophy was caused or contributed by the January 20, 2001 work injury. He opined that there was a causal relationship, but he did not support his statement with adequate medical rationale. Dr. Kirkpatrick failed to explain how the diagnosed reflex sympathetic dystrophy would result in the accepted conditions of left shoulder and right ankle sprains. While generally supportive of appellant's claim, his opinion is of diminished probative value because it lacks sufficient medical rationale to establish that the injury of January 20, 2001 caused or contributed to an evolution of reflex sympathetic dystrophy.

⁵ *Elizabeth Stanislav*, 49 ECAB 540 (1998).

⁶ *Leslie C. Moore*, 52 ECAB 132 (2000); *Victor J. Woodhams*, 41 ECAB 345 (1989).

⁷ *Dennis M. Mascarenas*, 49 ECAB 215 (1997).

⁸ *See Cleopatra McDougal-Saddler*, 47 ECAB 480, 489 (1996); *Thomas D. Petrylak*, 39 ECAB 276 (1987).

Therefore, Dr. Kirkpatrick's reports are insufficient to establish that appellant's reflex sympathetic dystrophy is related to the accepted employment injury. As appellant has not discharged her burden of proof on the issue of causal relationship, the Office properly denied her claim.

CONCLUSION

Appellant has not established that her claimed reflex sympathetic dystrophy condition was caused or aggravated by the January 20, 2001 work injury.

ORDER

IT IS HEREBY ORDERED THAT the Office of Workers' Compensation Programs' decisions dated December 8, 2005 is affirmed.

Issued: July 17, 2006
Washington, DC

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

David S. Gerson, Judge
Employees' Compensation Appeals Board

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