



Office accepted appellant's claim on October 25, 2005 for the following diagnosed conditions: "lesion of ulnar nerve, bilateral, 354.2; carpal tunnel syndrome, bilateral, 354.0; fanflion/cyst of synovium/tendon, right, 727.4." It authorized surgery for these conditions on December 15, 2005 to Dr. S. Vic Glogovac, an attending orthopedic surgeon. However, the Office denied authorization for surgery for the condition of right trigger thumb because it was not an accepted condition and was not diagnosed until it appeared briefly in a November 22, 2005 note from Dr. Glogovac.

In the November 22, 2005 note, Dr. Glogovac stated that appellant "also notes a right trigger thumb" and that "[t]here is triggering of the A1 pulley of the thumb." He again stated that she had a right trigger thumb, by letter to the Office dated December 6, 2005. The letter listed appellant's diagnoses and discussed work restrictions and future surgery. A report and a note from Dr. Glogovac each dated November 30, 2005, addressed general work restrictions.

By report dated December 27, 2005, Dr. Glogovac stated that people who "develop carpal tunnel syndrome quite frequently are seen to have a triggering phenomenon of their fingers." In appellant's case, the condition presented itself "long after the symptoms of the carpal tunnel syndrome had been present."

By decision dated January 30, 2006, the Office denied the request for expansion of appellant's claim to include right trigger thumb. It found that Dr. Glogovac's opinion on causal relationship was too speculative, was not definite and did not establish the causal link between the condition and her employment.<sup>1</sup>

Appellant requested reconsideration and submitted duplicates of the November 22 and 30, 2005, December 6 and 27, 2005 reports from Dr. Glogovac on February 2 and 9, 2006. In an operative report dated February 1, 2006, appellant underwent treatment by Dr. Glogovac for "left cubital and carpal tunnel syndrome." The Office also received notes from Dr. Glogovac, between February 15 to March 21, 2006, stating that appellant was disabled for work from: February 7 to 16, 2006, February 16 to March 2, 2006, March 2, 2006 until next office visit and March 15 to 22, 2006.

By decision dated March 21, 2006, the Office denied modification of its January 30, 2006 decision. It found that the medical reports submitted from Dr. Glogovic were speculative and in that none of the medical evidence demonstrated that appellant's right trigger thumb was related to her employment or prior accepted conditions.

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<sup>1</sup> The Board notes that, by decision dated December 28, 2005, the Office denied appellant's claim for compensation for lost wages for the period November 17 to 25, 2005 as the evidence submitted was insufficient to support temporary total disability. By decision dated January 20, 2006, the Office denied a recurrence of disability on the grounds that the medical evidence failed to establish a material worsening of the accepted conditions which would preclude her from performing restricted duty. However, appellant is not appealing from these decisions. *See* 20 C.F.R. § 501.3(c). Appellant has one year from the date of issuance of the Office's December 28, 2005 and January 20, 2006 decisions to file an appeal with this Board. *See* 20 C.F.R. § 501.3(d)(2).

## LEGAL PRECEDENT

An occupational disease or illness means a condition produced in the work environment over a period longer than a single workday or shift by such factors as systemic infection, continued or repeated stress or strain or other continued or repeated conditions or factors of the work environment.<sup>2</sup>

To establish that an injury was sustained in the performance of duty in an occupational disease claim, an employee must submit the following: (1) medical evidence establishing the presence or existence of a condition for which compensation is claimed; (2) a factual statement identifying employment factors alleged to have caused or contributed to the condition; and (3) medical evidence establishing that the employment factors identified by the employee were the proximate cause of the condition or illness, 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 employee.<sup>3</sup>

Causal relationship is a medical issue and the medical evidence required to establish causal relationship 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 an employee's diagnosed conditions and the implicated employment factors. The opinion of the physician must be based on a complete factual and medical background of the employee, must be one of reasonable medical certainty and must be supported by medical rationale explaining the nature of the relationship between the diagnosed conditions and the specific employment factors identified by the employee.<sup>4</sup>

The mere fact that a disease manifests itself during a period of employment does not raise an inference that there is a causal relationship between the two. Neither the fact that the disease became apparent during a period of employment, nor the belief of appellant that the disease was caused or aggravated by employment conditions, is sufficient to establish causal relation.<sup>5</sup>

## ANALYSIS

Appellant filed a claim for compensation due to occupational disease on August 26, 2005. On October 25, 2005 her claim was accepted by the Office for three conditions: bilateral lesion of ulnar nerve, bilateral carpal tunnel syndrome and right fanflion/cyst of synovium/tendon. She also claims a right trigger thumb condition as causally related to her federal employment as a clerk.

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<sup>2</sup> *William Taylor*, 50 ECAB 234 (1999); *see also* 20 C.F.R. § 10.5(q).

<sup>3</sup> *Donna L. Mims*, 53 ECAB 730 (2002).

<sup>4</sup> *Id.*

<sup>5</sup> *Id.*

Dr. Glogovic first mentioned appellant's trigger thumb condition on November 22, 2005 when he noted her complainant of a right trigger thumb. This appears to be the first time the symptoms were presented to him. There is no reference in this medical report describing how the thumb condition was related to the accepted conditions or caused or aggravated by appellant's employment activities. The condition is again mentioned briefly without comment in a December 6, 2005 letter to the Office. These reports are insufficient to establish appellant's claim. Dr. Glogovic did not provide any discussion explaining how her work duties would cause or contribute to this condition.

In Dr. Glogovic's December 27, 2005 letter, he states that patients with carpal tunnel syndrome often have a "triggering phenomenon of their fingers." He did not explain how carpal tunnel caused trigger thumb or discuss the relationship, if any, between carpal tunnel and trigger thumb. Dr. Glogovic failed to describe those work duties that could cause or aggravate such a condition. Additionally, he acknowledged that appellant's trigger thumb presented itself. Dr. Glogovic's opinion on causal relationship is speculative and insufficient to establish appellant's claim. There are no other medical reports in the record that discuss her right thumb condition.

#### **CONCLUSION**

The Board finds that appellant has failed to meet her burden of proof to establish that she sustained a right trigger thumb condition causally related to her accepted employment injuries or to other factors of her federal employment.

**ORDER**

**IT IS HEREBY ORDERED THAT** the decisions of the Office of Workers' Compensation Programs dated March 21 and January 30, 2006 are affirmed.

Issued: October 27, 2006  
Washington, DC

David S. Gerson, Judge  
Employees' Compensation Appeals Board

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

James A. Haynes, Alternate Judge  
Employees' Compensation Appeals Board