



On August 22, 2005 the Office advised appellant that it required additional factual and medical evidence to determine whether she was eligible for compensation benefits. The Office asked appellant to submit a comprehensive medical report from her treating physician describing her symptoms and the medical reasons for her condition and an opinion as to whether her claimed condition was causally related to her federal employment. The Office requested that appellant submit the additional evidence within 30 days. Appellant did not submit any additional medical evidence.

By decision dated September 23, 2005, the Office denied appellant's claim, finding that she failed to submit sufficient medical evidence in support of her claim.

On September 26, 2005 appellant requested reconsideration. She submitted a September 16, 2005 report from Dr. Goldberg, who stated:

“[Appellant] is a 40-year-old female who is a postal office worker, status post left open carpal tunnel release.... She has been seen here several times regarding left shoulder pain. [Appellant] feels considerably that this pain is worse when she is working in the post office and improved when she is off of work and she admits that this is due to her work. At the last visit, we ordered an MRI [magnetic resonance imaging] scan which was returned by [appellant], which showed some tendinosis of the supraspinatus on the left shoulder and also the C-spine showed some degenerative disc disease with a very small bulge at C5-6. There is no significant cord compression. Today, she is back in clinic. At the last visit, we have recommended physical therapy though [she] needs a proper letter sent to work prior to getting this done.

“On physical exam[ination] today, [appellant] is alert and oriented ... and in no apparent distress. Her passive range of motion in the left shoulder is 170 degrees forward flexion. External rotation is 70 degrees. Internal rotation is 90 degrees which is symmetric to the right shoulder. At this time, she does have significant pain particularly with the full forward flexion. She has 5/5 strength of her rotator cuff strength testing though again, it does cause her some pain in the shoulder. Neurovascularly intact distally.”

Dr. Goldberg related that appellant felt her left shoulder pain became worse when she was working. However, he stated that he was not able to “pinpoint” the specific reason for her pain. Dr. Goldberg reiterated his recommendation for physical therapy.

By decision dated April 21, 2006, the Office denied modification of the September 23, 2005 Office decision.

## LEGAL PRECEDENT

An employee seeking benefits under the Federal Employees' Compensation Act<sup>1</sup> has the burden of establishing that the essential elements of his or 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 and/or specific condition for which compensation is claimed are causally related to the employment injury.<sup>2</sup> These are the essential elements of each and every compensation claim regardless of whether the claim is predicated upon a traumatic injury or an occupational disease.<sup>3</sup>

To determine whether a federal employee has sustained a traumatic injury in the performance of duty, it must first be determined whether a "fact of injury" has been established. First, the employee must submit sufficient evidence to establish that he or she actually experienced the employment incident at the time, place and in the manner alleged.<sup>4</sup> Second, the employee must submit sufficient evidence, generally only in the form of medical evidence, to establish that the employment incident caused a personal injury.<sup>5</sup> The medical evidence required to establish causal relationship is usually rationalized medical 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>6</sup>

The Board has held that the mere fact that a condition manifests itself during a period of employment does not raise an inference that there is a causal relationship between the two.<sup>7</sup>

An award of compensation may not be based on surmise, conjecture or speculation. Neither the fact that appellant's condition became apparent during a period of employment nor the belief that her condition was caused, precipitated or aggravated by his employment is sufficient to establish causal relationship.<sup>8</sup> Causal relationship must be established by rationalized medical opinion evidence and appellant failed to submit such evidence.

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<sup>1</sup> 5 U.S.C. §§ 8101-8193.

<sup>2</sup> *Joe D. Cameron*, 41 ECAB 153 (1989); *Elaine Pendleton*, 40 ECAB 1143 (1989).

<sup>3</sup> *Victor J. Woodhams*, 41 ECAB 345 (1989).

<sup>4</sup> *John J. Carlone*, 41 ECAB 354 (1989).

<sup>5</sup> *Id.* For a definition of the term "injury," see 20 C.F.R. § 10.5(a)(14).

<sup>6</sup> *Id.*

<sup>7</sup> *See Joe T. Williams*, 44 ECAB 518, 521 (1993).

<sup>8</sup> *Id.*

## ANALYSIS

In this case, the Office has accepted that appellant experienced the employment incident at the time, place and in the manner alleged. However, appellant has not submitted sufficient medical evidence to establish that the employment incident caused a personal injury.<sup>9</sup>

The only medical documents appellant submitted were Dr. Goldberg's July 18, 2005 emergency room report and September 16, 2005 report, which stated findings on examination, noted appellant's complaints of left shoulder pain and diagnosed left shoulder rotator cuff tendinosis, degenerative disc disease of the cervical spine and a very small bulge at C5-6. These reports, however, did not relate these diagnoses to the December 16, 2004 incident at work. The weight of medical opinion is determined by the opportunity for and thoroughness of examination, the accuracy and completeness of physician's knowledge of the facts of the case, the medical history provided, the care of analysis manifested and the medical rationale expressed in support of stated conclusions.<sup>10</sup> Although the December 16, 2004 and September 16, 2005 reports do present a diagnosis of appellant's condition, they did not address whether these conditions were caused by the December 16, 2004 incident. Dr. Goldberg merely reiterated appellant's own belief that her work activities caused her shoulder condition, but noted that he could not "pinpoint" the cause of her condition. The Board has long held that the medical opinion regarding causal relationship must explain from a medical perspective how the current condition is related to the injury.<sup>11</sup> Appellant failed to provide a rationalized, probative medical opinion relating her diagnosed conditions to any factors of her employment.

The Office advised appellant of the evidence required to establish her claim; however, appellant failed to submit sufficient medical evidence addressing how the December 16, 2004 incident caused the claimed injury. The Office properly denied appellant's claim for compensation.

## CONCLUSION

The Board finds that appellant has failed to meet her burden of proof to establish that her claimed left arm, shoulder and neck injuries were sustained in the performance of duty.

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<sup>9</sup> *John J. Carlone*, *supra* note 4.

<sup>10</sup> *See Anna C. Leanza*, 48 ECAB 115 (1996).

<sup>11</sup> *Joan R. Donovan*, 54 ECAB 615 (2003).

**ORDER**

**IT IS HEREBY ORDERED THAT** the April 21, 2006 and September 23, 2005 decisions of the Office of Workers' Compensation Programs be affirmed.

Issued: October 13, 2006  
Washington, DC

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

David S. Gerson, Judge  
Employees' Compensation Appeals Board

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