

and packages from bins and then loading postal containers for 15 minutes. Appellant did not stop work.

Appellant submitted February 20 and 27, 2006 slips from Dr. Marc J. Lamb, an attending Board-certified orthopedic surgeon, who diagnosed “work-related” left lateral epicondylitis and prescribed a brace and physical therapy.

In a March 9, 2006 letter, the employing establishment stated that, during one work shift, appellant processed flats for 30 minutes, performed keying for 45 minutes then emptied postal containers weighing 20 to 25 pounds for 15 minutes. Appellant performed these tasks in rotation for 90 minutes. He then took a 15- to 20-minute break. This sequence repeated four times each workday.

In a March 13, 2006 letter, the Office advised appellant of the additional evidence needed to establish his claim. The Office emphasized the importance of submitting a report from his attending physician explaining how and why the identified work tasks would cause or contribute to the claimed left lateral epicondylitis. The Office afforded appellant 30 days in which to submit such evidence.

In a December 19, 2005 report, Dr. Lamb related appellant’s complaints of left elbow pain. He diagnosed lateral epicondylitis and prescribed a brace and medication. Dr. Lamb noted that appellant should not lift or carry more than five pounds “at his job or at home” through late April 2006. In a January 18, 2006 report, he noted that appellant’s condition remained symptomatic with lifting and reaching at work. In a February 27, 2006 report, Dr. Lamb noted appellant’s “continued pain with some lifting and gripping activities at his job.

By decision dated June 5, 2006, the Office denied appellant’s claim on the grounds that causal relationship was not established. The Office accepted that appellant performed repetitive motions as set forth in the employing establishment’s job description. The Office found, however, that appellant did not submit sufficient rationalized medical evidence supporting a causal relationship between the identified work factors and his left elbow condition.

In a June 30, 2006 letter, appellant requested reconsideration. He submitted a March 27, 2006 report from Dr. Lamb opining that appellant’s left lateral epicondylitis was “the direct result” of “repetitive activity ... as a postal” worker.

By decision dated October 5, 2006, the Office denied appellant’s claim on the grounds that causal relationship was not established. The Office found that, although Dr. Lamb generally supported causal relationship, he did not mention any of the identified work factors or explain how they would cause or contribute to the diagnosed lateral epicondylitis.

LEGAL PRECEDENT

An employee seeking benefits under the Federal Employees’ Compensation Act¹ has the burden of establishing the essential elements of his or her claim, including the fact that the

¹ 5 U.S.C. §§ 8101-8193.

individual is an “employee of the United States” within the meaning of the Act; that the claim was filed within the applicable time limitation; that an injury was sustained while 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.² These are the essential elements of each and every compensation claim regardless of whether the claim is predicated on a traumatic injury or an occupational disease.³

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) 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 causal relationship is generally 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.⁴

ANALYSIS

Appellant alleged that he developed left lateral epicondylitis due to repetitive motions while processing mail. The Office accepted that appellant performed such duties, but denied his claim on the grounds that the medical evidence was not sufficient to establish that these work factors caused or aggravated any medical condition.

Appellant submitted reports from Dr. Lamb, an attending Board-certified orthopedic surgeon, who noted on January 18 and February 27, 2006 that lifting and reaching at work aggravated appellant’s left elbow symptoms. Dr. Lamb stated that appellant’s work duties caused pain related to underlying conditions. However, the fact that work activities produce symptoms revelatory of an underlying condition does not raise an inference of an employment relationship.⁵ Dr. Lamb did not address how appellant’s job activities would cause or contribute to the diagnosis of lateral epicondylitis.

² *Joe D. Cameron*, 41 ECAB 153 (1989).

³ *See Irene St. John*, 50 ECAB 521 (1999); *Michael E. Smith*, 50 ECAB 313 (1999).

⁴ *Solomon Polen*, 51 ECAB 341 (2000).

⁵ *Judith A. Peot*, 46 ECAB 1036 (1995).

In a March 27, 2006 report, Dr. Lamb opined that appellant's left lateral epicondylitis was "the direct result" of repetitive activities at work. Again he did not explain how or why repetitive upper extremity motion or any of the identified work factors would cause or aggravate the diagnosed condition. Dr. Lamb did not mention appellant's duties processing mail, placing packages on a conveyor belt, keying mail or emptying postal containers. He did not describe the duration or combination of these activities in appellant's workday and how they would impact his physical condition. Dr. Lamb's opinion is insufficiently rationalized to meet appellant's burden of proof in establishing causal relationship.⁶

The Board finds that appellant has not established that he sustained left lateral epicondylitis in the performance of duty, as he submitted insufficient rationalized medical evidence to establish the asserted causal relationship.

CONCLUSION

The Board finds that appellant has not established that he sustained left lateral epicondylitis in the performance of duty.

ORDER

IT IS HEREBY ORDERED THAT the decisions of the Office of Workers' Compensation Programs dated October 5 and June 5, 2006 are affirmed.

Issued: June 12, 2007
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

⁶ See *Jimmie H. Duckett*, 52 ECAB 332 (2001); *Frank D. Haislah*, 52 ECAB 457 (2001) (medical reports not containing rationale on causal relationship are entitled to little probative value).