

By letter dated February 2, 2007, the Office advised appellant that the evidence submitted was insufficient to establish her claim. It addressed the additional factual and medical evidence she needed to submit.

In an undated statement, appellant further described the January 8, 2007 employment incident, stating that she fell, landing on her left knee and right hand which hurt immediately. An hour or so later, she noticed pain and discomfort in her left low back area. Appellant did not believe that she needed immediate medical attention and continued to work. She experienced discomfort and pain off and on and filed a traumatic injury claim a few days later. Appellant tried to make an appointment with her physician but was advised that the earliest available appointment was on February 6, 2007 because the physician was going to be out of the office. She was further advised that if she experienced severe pain, then she should go to a hospital. Appellant indicated that, since the pain was not great or continuous, she accepted the February 6, 2007 appointment.

In a February 6, 2007 medical report, Dr. Ann R. Stroink, an attending Board-certified neurosurgeon, provided a history that appellant was two years' postposterior lumbar interbody fusion and she was doing well. A history of injury noted that she fell two weeks prior on her left knee and, since that time, complained of low back and left buttock pain. Dr. Stroink stated that a magnetic resonance imaging (MRI) scan was necessary due to persistent unexplained low back pain that she could not relate to a hardware fracture at that time. She opined that appellant sustained a traumatic injury.

On February 6, 2007 Dr. Ajeet Gordhan, a Board-certified radiologist, performed an MRI scan of appellant's lumbar spine. Dr. Gordhan found a posterior instrumented fusion at L3-4 that was unchanged. He stated that there was no device fracture, migration or loosening. Dr. Gordhan also found five percent anterolisthesis of L4 on L5 with concomitant diminution in disc height at this level, a lumbar vertebrae that was normally aligned and of average height, marked diminution in disc height with end plate sclerosis at L5-S1 and mild left scoliosis centered at L2.

By decision dated March 14, 2007, the Office denied appellant's claim on the grounds that the evidence of record was insufficient to establish that she sustained an injury causally related to the accepted January 8, 2007 employment incident.

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 individual is an employee of the United States within the meaning of the Act; that the claim was filed within 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

¹ 5 U.S.C. §§ 8101-8193.

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

and every compensation claim regardless of whether the claim is predicated on a traumatic injury or an occupational disease.³

In order to determine whether an employee actually sustained an injury in the performance of duty, the Office begins with an analysis of whether fact of injury has been established. Generally, fact of injury consists of two components, which must be considered in conjunction with one another. The first component to be established is that the employee actually experienced the employment incident or exposure, which is alleged to have occurred.⁴ In order to meet her burden of proof to establish the fact that she sustained an injury in the performance of duty, an employee must submit sufficient evidence to establish that she actually experienced the employment injury or exposure at the time, place and in the manner alleged.⁵

The second component is whether the employment incident caused a personal injury and generally can be established only by medical evidence.⁶ The evidence required to establish causal relationship is rationalized medical opinion evidence, based upon complete factual and medical background, showing a causal relationship between the claimed condition and the identified factors.⁷ The belief of the claimant that a condition was caused or aggravated by the employment is insufficient to establish a causal relationship.⁸

ANALYSIS

The record supports that on January 8, 2007 appellant tripped at work when her left foot became caught in plastic strapping on the floor. The Board finds, however, that the medical evidence of record is insufficient to establish that the accepted employment incident caused a low back condition.

In a February 6, 2007 report, Dr. Stroink noted a history of the January 8, 2007 employment incident. However, the physician did not explain the cause of appellant's persistent low back pain because she could not relate it to a hardware fracture at that time. She recommended an MRI scan of the lumbar spine. Notwithstanding a definitive diagnosis, Dr. Stroink opined that appellant sustained a traumatic injury. A physician's mere diagnosis of pain does not constitute a basis for payment of compensation.⁹ Dr. Stroink did not provide medical rationale explaining how or why the January 8, 2007 incident was competent to cause or

³ See *Irene St. John*, 50 ECAB 521 (1999); *Michael E. Smith*, 50 ECAB 313 (1999); *Elaine Pendleton*, *supra* note 2.

⁴ See Federal (FECA) Procedure Manual, Part 2 -- Claims, *Fact of Injury*, Chapter 2.803(2)(a) (June 1995).

⁵ *Linda S. Jackson*, 49 ECAB 486 (1998).

⁶ *John J. Carlone*, 41 ECAB 354 (1989); see 5 U.S.C. § 8101(5) (injury defined); 20 C.F.R. §§ 10.5(ee), 10.5(q) (traumatic injury and occupational disease defined).

⁷ *Lourdes Harris*, 45 ECAB 545 (1994); see *Walter D. Morehead*, 31 ECAB 188 (1979).

⁸ *Charles E. Evans*, 48 ECAB 692 (1997).

⁹ *Robert Broome*, 55 ECAB 339 (2004).

contribute to appellant's preexisting low back condition. The Board finds that her report is insufficient to establish appellant's claim.

Dr. Gordhan's February 6, 2007 MRI scan report did not address how appellant's low back symptoms were caused or aggravated by the accepted employment incident. The Board finds that his report is insufficient to establish that appellant sustained a work-related back injury on February 6, 2007.

Appellant did not submit sufficient medical evidence establishing the causal relationship between her back condition and the accepted January 8, 2007 employment incident. The Board finds that there is insufficient rationalized medical evidence of record to establish that appellant sustained a back injury in the performance of duty on January 8, 2007. Therefore, she failed to meet her burden of proof.

CONCLUSION

As appellant did not provide the necessary medical evidence to establish that she sustained an injury caused by the January 8, 2007 employment incident, she has failed to meet her burden of proof.

ORDER

IT IS HEREBY ORDERED THAT the March 14, 2007 decision of the Office of Workers' Compensation Programs is affirmed.

Issued: September 18, 2007
Washington, DC

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

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