

redness on appellant's face and arms. She also stated that appellant informed a supervisor that she was breaking out in hives.

On July 2, 2007 the Office notified appellant that the evidence submitted was insufficient to establish her claim. The Office advised her to provide within 30 days additional information and documentation, including details surrounding the alleged incident, and a physician's report containing a specific diagnosis and an opinion supported by a medical explanation as to how the reported work incident caused or aggravated the claimed injury.

Appellant submitted a June 13, 2007 prehospital care report, signed by Chad Bauer, a paramedic. The report reflected that appellant was treated at the employing establishment on June 13, 2007 for an "acute onset face allergic reaction radiating to neck, chest and arms, provoked by none since 10 minutes." Mr. Bauer stated that appellant was searching baggage when she possibly came into contact with an unknown substance which "may be causing" her to have an allergic reaction. Appellant experienced a sudden onset of "not feeling well," and a burning and itching sensation to her face, neck, jaw, chest and arms. Mr. Bauer noted erythema to appellant's upper arms, anterior chest, neck and jaw area bilaterally. Appellant's clothing was placed in a biohazard bag and sealed.

Appellant submitted emergency room records from Memorial Hospital. In a report dated July 14, 2007, Dr. Timothy A. Jamison, Board certified in emergency medicine, related appellant's statement that, after checking a bag in her capacity as a security screener, she developed an abrupt reaction, involving itching in the skin of the neck, face and arms. Appellant also turned bright red and felt short of breath. When she attempted to "rinse it off" in the bathroom, the symptoms allegedly worsened, so paramedics were called. Appellant did not notice exposure to any chemicals, powder or other substance. Dr. Jamison's June 13, 2007 examination revealed diffuse mild erythema of the cheeks, no swelling of the eyes, tongue or uvula, no stridor or wheezing and regular heart rate. He diagnosed "allergic reaction." However, Dr. Jamison stated, "We cannot identify any particular substance that caused this reaction. It may have been some sort of pet hair or dander in the luggage that triggered an allergic reaction." Dr. Jamison found no evidence of any sort of toxidrome or anticholinergic crisis or evidence of poisoning. A June 13, 2007 initial triage assessment, signed by Stephanie Gifford, a registered nurse, reflected appellant's report that, while checking bags at work, she was exposed to an unknown substance and had a sudden onset of redness and hives to her upper extremity. Discharge instructions were prepared by Ms. Gifford on June 13, 2007.

Appellant submitted reports from Dr. Peter Walsh, Board-certified in the field of preventive medicine. On June 14, 2007 Dr. Walsh described the events of the previous day. Appellant stated that, after opening a number of suitcases at work, she noted an onset of itching and a rash on her face, trunk and arms, as well as shortness of breath. She was transported to the hospital and treated for an allergic reaction. Dr. Walsh diagnosed allergic reaction; etiology unclear. He stated, "It is unclear whether this is an occupational injury or not given the fact that the actual cause of the patient's reaction is unclear; hence occupational relatedness is undetermined."

On June 15, 2007 Dr. Walsh indicated that appellant was doing well following her June 13, 2007 allergic reaction. On June 19, 2007 he indicated that appellant's June 13, 2007

allergic reaction “may have been anaphylactic in nature,” but stated that emergency room reports were not available for his review. Dr. Walsh noted that appellant had not experienced a recurrence of her rash, shortness of breath or itching. He provided an assessment of “history of allergic reaction etiology unknown, however, symptoms resolved; probable benign positional vertigo, nonoccupational in etiology.” Dr. Walsh stated that the diagnosed condition was “likely occupational.” In a June 19, 2007 physician’s report, he indicated that appellant was able to return to unrestricted duty.

By decision dated August 30, 2007, the Office denied appellant’s claim on the grounds that the evidence failed to establish that appellant had sustained an injury in the performance of duty. The Office found that she had failed to identify the source of the irritation.

LEGAL PRECEDENT

An employee seeking benefits under the Federal Employees’ Compensation Act¹ has the burden of establishing that he or she sustained an injury while in the performance of duty.² 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 which is alleged to have occurred. An employee has the burden of establishing the occurrence of an injury at the time, place and in the manner alleged by a preponderance of the reliable, probative and substantial evidence.³ An injury does not have to be confirmed by eyewitnesses in order to establish the fact that an employee sustained an injury in the performance of duty, as alleged, but the employee’s statements must be consistent with surrounding facts and circumstances and his or her subsequent course of action. Such circumstances as late notification of injury, lack of confirmation of injury, continuing to work without apparent difficulty following the alleged injury, and failure to obtain medical treatment, may cast doubt on an employee’s statements in determining whether he or she has established a *prima facie* case.⁴ However, an employee’s statement alleging that an injury occurred at a given time and in a given manner is of great probative value and will stand, unless refuted by strong or persuasive evidence.⁵

The second component is whether the employment incident caused a personal injury, and generally this can be established only by medical evidence.⁶ As part of this burden, the claimant

¹ 5 U.S.C. §§ 8101-8193.

² *Melinda C. Epperly*, 45 ECAB 196, 198 (1993); *see also* 20 C.F.R. § 10.115.

³ *Charles B. Ward*, 38 ECAB 667 (1987).

⁴ *See Paul Foster*, 56 ECAB 208 (2004). *See also Merton J. Sills*, 39 ECAB 572, 575 (1988).

⁵ *Thelma S. Buffington*, 34 ECAB 104 (1982).

⁶ *See John J. Carlone*, 41 ECAB 354, 357 (1989).

must present rationalized medical opinion evidence.⁷ 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.⁸ The opinion of the physician must be based on a complete factual and medical background of the claimant,⁹ and must be one of reasonable medical certainty,¹⁰ explaining the nature of the relationship between the diagnosed condition and the specific employment factors identified by the claimant.¹¹

ANALYSIS

The Board finds that appellant has failed to meet her burden of proof in establishing that she sustained a traumatic injury on June 13, 2007. She noted on her CA-1 form that she broke out in hives while screening bags. However, appellant provided no detailed account of injury. She presented no evidence regarding the specific mechanism of injury, as required in a claim for traumatic injury; nor did she allege that she experienced a specific event, incident or exposure at a definite time, place and manner.¹² Although a coworker observed hives and redness on her face and arms, she did not witness her exposure to any item or chemical substance. Appellant told her doctors that, after opening a number of suitcases at work, she noted an onset of itching and a rash on her face, trunk and arms, as well as shortness of breath. She acknowledged that she did not notice exposure to any chemicals, powder or other substance. Appellant failed to identify any particular substance which may have caused her reaction. Her recitation of the facts does not establish her allegation that a specific exposure caused an injury.¹³

Dr. Jamison related appellant's report that, after checking a bag in her capacity as a security screener, she developed an abrupt reaction, involving itching in the skin of the neck, face and arms. Appellant turned bright red and felt short of breath. However, she stated that she did not notice exposure to any chemicals, powder or other substance, nor did she identify a specific piece of baggage which might have been inspected for toxic substances. Dr. Jamison stated that no particular substance could be identified as the cause to appellant's reaction. Other emergency room records, including a triage assessment, reflect appellant's allegation that she experienced an allergic reaction to an unknown substance.

⁷ *Joseph T. Gulla*, 36 ECAB 516 (1985).

⁸ *Conard Hightower*, 54 ECAB 796 (2003); *Leslie C. Moore*, 52 ECAB 132 (2000).

⁹ *Tomas Martinez*, 54 ECAB 623 (2003); *Gary J. Watling*, 52 ECAB 278 (2001).

¹⁰ *John W. Montoya*, 54 ECAB 306 (2003).

¹¹ *Judy C. Rogers*, 54 ECAB 693 (2003).

¹² See *Tracey P. Spillane*, 54 ECAB 608 (2003) (where an employee filed a claim alleging that she sustained an allergic reaction at work, but failed to clearly identify, or report to her physicians, the aspect of her employment which she believed caused the claimed condition, the Board held that she did not adequately specify the employment factors which caused her need for medical treatment; nor did she specify details such as the extent and duration of exposure to any given employment factors). See also *Betty J. Smith*, 54 ECAB 174 (2002).

¹³ See *Dennis M. Mascarenas*, 49 ECAB 215 (1997).

Appellant told Dr. Walsh that, after opening a number of suitcases at work, she noted an onset of itching and a rash on her face, trunk and arms, as well as shortness of breath. Again, she did not identify or describe a specific bag, or substance within a bag, which may have been responsible for her reaction. Dr. Walsh stated that, as the cause of appellant's reaction was unclear, "occupational relatedness is undetermined."

The paramedic who treated appellant at the work site stated that she was searching baggage when she possibly came into contact with an unknown substance which "may be causing" her to have an allergic reaction. This report does not identify a specific causative event and reflects uncertainty as to the derivation of appellant's condition.

Appellant alleged that she sustained an allergic reaction at work on June 13, 2007. However, she has not established exposure to any specific agent or chemical on that date. Appellant has not clearly identified the aspect of her employment which she believed caused her to suffer the claimed condition on June 13, 2007. She made reference to possibly having a reaction to some substance contained in any number of pieces of baggage checked, but she did not clearly specify such details as the extent and duration of exposure to any given employment factor. The Office provided appellant with an opportunity to clarify her claim, but she failed to do so. Appellant expressed her belief that her condition resulted from exposure to an unidentified substance contained in baggage she was required to check on June 13, 2007. 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.¹⁴ Neither the fact that the condition became apparent during a period of employment, nor the belief that the condition was caused or aggravated by employment factors or incidents, is sufficient to establish causal relationship.¹⁵ Causal relationship must be substantiated by reasoned medical opinion evidence, which it is appellant's responsibility to submit. Therefore, appellant's belief that her condition was caused by a work-related injury is not determinative.

The Board finds that appellant has failed to establish the fact of injury: she did not submit sufficient evidence to establish that she actually experienced an employment incident at the time, place and in the manner alleged; or that the alleged incident caused a diagnosed condition. As she has not met her burden of proof to establish the fact of injury, it is not necessary to discuss the probative value of the medical reports.¹⁶

CONCLUSION

The Board finds that appellant has not met her burden of proof to establish that she sustained a traumatic injury on June 13, 2007 causally related to her employment.

¹⁴ See *Joe T. Williams*, 44 ECAB 518, 521 (1993).

¹⁵ *Id.*

¹⁶ *Id.*

ORDER

IT IS HEREBY ORDERED THAT the October 30, 2007 decision of the Office of Workers' Compensation Programs is affirmed.

Issued: April 8, 2008
Washington, DC

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

Colleen Duffy Kiko, Judge
Employees' Compensation Appeals Board

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