



Appellant first realized her condition on February 5, 2007 and first related it to her employment on February 10, 2007. She did not stop work.

On March 7, 2007 the Office requested additional information concerning appellant's claim.

The employing establishment provided personnel records documenting appellant's physical condition at the time she was hired. Also provided was a July 21, 1993 preemployment medical evaluation from Dr. Richard R. Wagoner,<sup>1</sup> who found that appellant had no physical limitations and no medical risks or restrictions.

Appellant provided a February 23, 2007 report of a magnetic resonance imaging (MRI) scan of her right upper extremity, performed by Dr. Lawrence Tang.<sup>2</sup> He diagnosed diffuse tendinopathy of supraspinatus and infraspinatus tendons, diffuse moderate tendinopathy of the superior two-thirds of the distal subscapularis tendon with partial tear, mild to moderate tendinopathy of the long head biceps tendon without tear and with surrounding tenosynovitis, moderate subacromial-subdeltoid bursitis, Type-II acromion, small acromial spur and acromioclavicular osteoarthritis with inferior oriented small osteophytes and moderate osteoarthritis at the acromioclavicular joint with minimal bone marrow edema.

Appellant also provided an April 4, 2007 statement in response to the Office's request for information. She explained that her job responsibilities included sorting parcels weighing up to 70 pounds for approximately two to three hours per day, sorting "chunkies" for one to two hours per day, keying for one hour per day, and spending three to four hours per day sorting letters, flats and "nixie mail," all of which required use of her right hand, arm and shoulder. Appellant stated that she experienced continuing pain but that her pain worsened when working on parcels and "chunkies" and sorting mail. She also noted that she had not had any problems with her right upper extremity prior to her employment.

By decision dated May 30, 2007, the Office denied appellant's claim on the grounds that the medical evidence provided did not establish a causal relationship between her diagnosed medical condition and her accepted employment factors.

### **LEGAL PRECEDENT**

An employee seeking benefits under the Federal Employees' Compensation Act<sup>3</sup> 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 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 disabilities and/or specific conditions for which compensation is claimed are causally related to the employment injury.<sup>4</sup>

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<sup>1</sup> The Board was unable to ascertain Dr. Wagoner's specialty based on the record.

<sup>2</sup> The Board was unable to ascertain Dr. Tang's specialty based on the record.

<sup>3</sup> 5 U.S.C. §§ 8101-8193.

<sup>4</sup> *Elaine Pendleton*, 40 ECAB 1143 (1989).

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>5</sup>

An occupational disease or injury is one caused by specified employment factors occurring over a longer period than a single shift or workday.<sup>6</sup> The test for determining whether appellant sustained a compensable occupational disease or injury is three-pronged. To establish the factual elements of the claim, appellant must submit: “(1) medical evidence establishing the presence or existence of the disease or condition for which compensation is claimed; (2) a factual statement identifying the factors alleged to have caused or contributed to the presence or occurrence of the disease or condition; and (3) medical evidence establishing that the 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 factors identified by the claimant.”<sup>7</sup>

The medical evidence required to establish causal relationship generally is 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.<sup>8</sup> The opinion of the physician must be based on a complete factual and medical background of the claimant<sup>9</sup> and must be one of reasonable medical certainty<sup>10</sup> explaining the nature of the relationship between the diagnosed condition and the specific employment factors identified by the claimant.<sup>11</sup>

### ANALYSIS

The evidence supports that appellant moves parcels as alleged as part of her work duties. However, the medical evidence is insufficient to establish that her employment activities caused or aggravated a diagnosed condition.

In support of her claim, appellant provided her July 21, 1993 preemployment medical evaluation form from Dr. Wagoner, who found that she had no physical limitations or restrictions and was not at any medical risk. However, his report is not relevant to appellant’s claim arising in 2007. Dr. Wagoner provides some support for the proposition that appellant was asymptomatic before beginning her tenure with the employing establishment. However, the

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<sup>5</sup> *Victor J. Woodhams*, 41 ECAB 345 (1989).

<sup>6</sup> *D.D.*, 57 ECAB \_\_\_ (Docket No. 06-1315, issued September 14, 2006).

<sup>7</sup> *Michael R. Shaffer*, 55 ECAB 386, 389 (2004), citing *Lourdes Harris*, 45 ECAB 545 (1994); *Victor J. Woodhams*, *supra* note 5.

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

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

<sup>10</sup> *John W. Montoya*, 54 ECAB 306 (2003).

<sup>11</sup> *Judy C. Rogers*, 54 ECAB 693 (2003).

Board has held that the mere fact that symptoms arise coincidentally with a period of federal employment is not sufficient to raise an inference of causal relationship.<sup>12</sup>

Appellant also provided a February 23, 2007 MRI scan report from Dr. Tang. The report was diagnostic in nature, as it was merely a report of an MRI scan of appellant's right upper extremity. Dr. Tang did not discuss appellant's history of injury or provide any opinion concerning causal relationship. The Board has previously held that a medical report that does not offer an opinion on causal relationship is of no probative value on that issue.<sup>13</sup> Because Dr. Tang did not render an opinion on causal relationship, his report is insufficient to establish that appellant's diagnosed condition was caused by the accepted employment factors.

Consequently, the medical evidence of record is insufficient to establish that specific employment activities caused or aggravated a diagnosed condition.

### **CONCLUSION**

The Board finds that appellant did not meet her burden of proof in establishing that she developed an occupational disease in the performance of duty.

### **ORDER**

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

Issued: January 14, 2008  
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

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<sup>12</sup> *William Nimitz, Jr.*, 30 ECAB 567, 570 (1979).

<sup>13</sup> *See, e.g. Charles H. Tomaszewski*, 39 ECAB 461, 467-68 (1988) (medical evidence which does not offer any opinion regarding the cause of an employee's condition is of limited probative value on the issue of causal relationship).