

evidence in support of appellant's claim including a detailed medical report. Appellant submitted two form reports. On December 18, 2007 Dr. Martin Glynn, a general practitioner, noted appellant's history of injury as "bending over to pick up an object." He indicated with a checkmark that this was work related. Dr. Glynn diagnosed acute lumbar muscle sprain. In a report dated January 4, 2008, he again diagnosed acute lumbar muscle sprain and stated that appellant's symptoms were improving. By decision dated January 30, 2008, the Office denied appellant's claim on the grounds that he failed to submit any medical evidence with an accurate history of injury.

LEGAL PRECEDENT

The Office's regulations define a traumatic injury as a condition of the body caused by a specific event or incident, or series of events or incidents, within a single workday or shift. Such condition must be caused by external force, including stress or strain, which is identifiable as to time and place of occurrence and member or function of the body affected.¹ In order to determine whether an employee sustained a traumatic 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 that must be considered in conjunction with one another. The first component to be established is that the employee actually experienced the employment incident that is alleged to have occurred. The second component is whether the employment incident caused a personal injury. Causal relationship is a medical question that can generally be resolved only by rationalized medical opinion evidence.²

ANALYSIS

Appellant filed a claim alleging that he injured his back when he bent over to lift a bag in the performance of duty on December 18, 2007. He sought medical treatment on that date from Dr. Glynn, a general practitioner. In a December 18, 2007 form report, Dr. Glynn reviewed the history that appellant bent over to lift an object on that day. He advised that appellant's claim was work related and diagnosed acute lumbar muscle sprain. This report contains a consistent history of injury, a diagnosis and an opinion that appellant's condition was work related. While this report is not sufficient to meet appellant's burden of proof, it does raise an uncontroverted inference of causal relation between his lifting incident on December 18, 2007 and his diagnosed acute lumbar strain. The evidence is sufficient to require the Office to undertake further development of appellant's claim.³ On remand, the Office should formulate a statement of accepted facts and a list of specific questions and request a supplemental report from Dr. Glynn addressing the causal relationship between appellant's lifting incident on December 18, 2007 and the diagnosed acute lumbar muscle sprain. After this and such other development as the Office deems necessary, the Office should issue an appropriate decision.

¹ 20 C.F.R. § 10.5(ee).

² *Steven S. Saleh*, 55 ECAB 169, 171-72 (2003).

³ *John J. Carlone*, 41 ECAB 354, 358-60 (1989).

CONCLUSION

The Board finds that this case is not in posture for decision. Appellant submitted contemporaneous medical evidence supporting that he developed an acute lumbar strain due to bending over and lifting an object in the performance of duty which requires additional development by the Office.

ORDER

IT IS HEREBY ORDERED THAT the January 30, 2008 decision of the Office of Workers' Compensation Programs is set aside and remanded for additional development consistent with this decision of the Board.

Issued: November 26, 2008
Washington, DC

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

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

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