



In a decision dated March 9, 2009, the Office denied appellant's claim, finding that there was no medical evidence providing a diagnosis of a condition that could be related to her accepted employment exposure.

On March 25, 2009 appellant's counsel requested a telephonic hearing before an Office hearing representative, which was held on July 17, 2009.

In a December 31, 2008 attending physician's report (Form CA-20) received on March 12, 2009, Dr. Heba S. Ferguson, a Board-certified family practitioner, diagnosed acute onset of wrist and arm pain on December 6, 2008. She checked "yes" to the form question of whether the condition was employment related. Under explanation, Dr. Ferguson wrote "typing, key entry." She noted that appellant had a history degenerative disc disease and cervical stenosis.

In a January 14, 2009 certification of health care provider, Dr. Ferguson diagnosed degenerative disc disease and stenosis of the neck. She noted December 6, 2008 as the approximate date the condition began and that it was chronic with acute exacerbations which could last up to three weeks.

On March 12, 2009 Dr. Ferguson stated that appellant was disabled from working due to neck, back and hand pain which was caused by her thoracic and cervical disc disease.

In an October 19, 2009 decision, the hearing representative affirmed the March 9, 2009 denial of appellant's claim. He found that the medical evidence did not adequately explain how her accepted work duties caused or contributed to any diagnosed conditions of the upper extremities or cervical spine.

### **LEGAL PRECEDENT**

An occupational disease or illness means a condition produced in the work environment over a period longer than a single workday or shift by such factors as systemic infection, continued or repeated stress or strain or other continued or repeated conditions or factors of the work environment.<sup>1</sup>

To establish that an injury was sustained in the performance of duty in an occupational disease claim, an employee must submit the following: (1) medical evidence establishing the presence or existence of a condition for which compensation is claimed; (2) a factual statement identifying employment factors alleged to have caused or contributed to the condition; and (3) medical evidence establishing that the employment factors identified by the employee were the proximate cause of the condition or illness, 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 employee.<sup>2</sup>

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<sup>1</sup> *Donald W. Wenzel*, 56 ECAB 390 (2005); *William Taylor*, 50 ECAB 234 (1999); *see also* 20 C.F.R. § 10.5(q).

<sup>2</sup> *D.D.*, 57 ECAB 734 (2006); *Donna L. Mims*, 53 ECAB 730 (2002).

Causal relationship is a medical issue and the medical evidence required to establish causal relationship is rationalized medical evidence.<sup>3</sup> Rationalized medical evidence is medical evidence which includes a physician's rationalized medical opinion on the issue of whether there is a causal relationship between an employee's diagnosed conditions and the implicated employment factors.<sup>4</sup> The opinion of the physician must be based on a complete factual and medical background of the employee, must be one of reasonable medical certainty and must be supported by medical rationale explaining the nature of the relationship between the diagnosed conditions and the specific employment factors identified by the employee.<sup>5</sup>

### ANALYSIS

Appellant attributed her upper extremity and neck conditions to repetitive work of typing and key entry. The Office accepted the employment factors identified by her, but denied her claim on the grounds that she failed to submit sufficient medical evidence. The issue is whether the medical evidence submitted by appellant is sufficient in explaining how her wrist and arm pain, degenerative disc disease or cervical stenosis were caused or aggravated by her federal employment. The Board finds that she did not provide sufficient medical evidence to meet her burden of proof.

In a December 31, 2008 attending physician's report, Dr. Ferguson diagnosed acute onset of wrist and arm pain and checked "yes" as to whether the conditions were employment related with a supporting explanation of "typing, key entry." This report is of reduced probative value for several reasons. Dr. Ferguson did not provide any detailed findings from examination or make a specific diagnosis. The Board has held that a diagnosis of pain, without more by way of an explanation, does not constitute a basis of payment for compensation, as pain is considered to be a symptom rather than a specific diagnosis.<sup>6</sup> Moreover, the Board has held that, when a physician's opinion on causal relationship consists only of checking "yes" to a form question, without explanation or rationale, it is of diminished probative value and is insufficient to establish a claim.<sup>7</sup> Dr. Ferguson provided no supporting rationale beyond a checkmark and a statement attributing appellant's condition to her work duties.

Dr. Ferguson's January 14, 2009 health care note and March 12, 2008 disability note are also insufficient to establish appellant's claim. She diagnosed degenerative disc disease and stenosis of the neck and noted December 6, 2008 as the approximate date the condition began. Dr. Ferguson noted that it was a chronic condition with acute exacerbations which could last up to three weeks. The disability note attributed disability due to neck, back and hand pain which was caused by thoracic and cervical disc disease. Dr. Ferguson provided no narrative opinion as to the cause of these conditions. She did not provide a full or accurate factual or medical history

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<sup>3</sup> *I.R.*, 61 ECAB \_\_\_\_ (Docket No. 09-1229, issued February 24, 2010); *David Apgar*, 57 ECAB 137 (2005).

<sup>4</sup> *G.G.*, 58 ECAB 389 (2007); *Kathryn E. Demarsh*, 56 ECAB 677 (2005).

<sup>5</sup> *J.M.*, 58 ECAB 303 (2007); *Roy L. Humphrey*, 57 ECAB 238 (2005).

<sup>6</sup> *C.F.*, 60 ECAB \_\_\_\_ (Docket No. 08-1102, issued October 10, 2008); *Robert Broome*, 55 ECAB 339 (2004).

<sup>7</sup> *D.D.*, 57 ECAB 734 (2006); *Cecelia M. Corley*, 56 ECAB 662 (2005).

of appellant's condition or explain how her work as a data conversion operator was sufficient to contribute to any of the medical conditions listed. The Board has long held that 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.<sup>8</sup> The medical evidence from Dr. Ferguson is not sufficient to establish appellant's claim.

The Board finds that appellant did not meet her burden of proof to establish that she sustained an occupational disease in the performance of duty. Appellant failed to provide a rationalized medical opinion explaining how these conditions were related to the employment factors she identified.

### **CONCLUSION**

The Board finds that appellant did not establish that she sustained upper extremity back or cervical condition, causally related to factors of her federal employment.

### **ORDER**

**IT IS HEREBY ORDERED THAT** the October 19, 2009 decision of the Office of Workers' Compensation Programs be affirmed.

Issued: September 7, 2010  
Washington, DC

Colleen Duffy Kiko, 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>8</sup> A.D., 58 ECAB 149 (2006); *Robert Broome*, *supra* note 6.