



from one position for an extended period of time. She did not stop work. OWCP accepted appellant's claim for sciatica, left leg, aggravation of lumbosacral spondylosis without myelopathy and aggravation of general osteoarthritis of the left hip.

Appellant claimed compensation for disability beginning October 18, 2010. She stated that while at work she lost feeling from her waist down and was taken to the emergency room and admitted to the hospital, where she was treated for blood clots, bladder infection, neuropathy and five deteriorated discs. OWCP explained that to be entitled to compensation for lost time associated with appellant's injury, the medical evidence must establish that she was totally disabled for the period claimed and that the disability was a result of the accepted employment injury. It asked her to submit a narrative medical report from a physician who identifies the diagnoses necessitating hospitalization and who offers a rationalized medical opinion on whether and how the hospitalization beginning October 14, 2010 was medically related to the accepted conditions of sciatica, aggravation of lumbosacral spondylosis and aggravation of left hip osteoarthritis. OWCP added: "It is suggested that your treating physician review this letter so that he is aware of the evidence required."

Appellant submitted a number of hospital records, but OWCP advised that they did not address the specific cause of disability. OWCP explained that a narrative report previously described was still necessary to support her claim for disability compensation.

In a decision dated January 25, 2011, OWCP denied appellant's disability claim. It found that none of the medical evidence submitted contained a rationalized opinion regarding the cause of her hospitalization and disability. Thus, OWCP remained unclear whether appellant's disability was medically related to her accepted lumbar condition or to an arterial insufficiency unrelated to employment.

On May 17, 2011 OWCP's hearing representative reviewed the written record at appellant's request and affirmed the denial of her disability claim. He found that the medical evidence established multiple conditions that required extensive treatment and hospitalization; however, none of the medical evidence opined that appellant was disabled beginning October 15, 2010 as a result of her accepted employment injury.

Appellant noted on appeal that she does not understand why OWCP denied her claim.

### **LEGAL PRECEDENT**

FECA provides compensation for the disability of an employee resulting from personal injury sustained while in the performance of duty.<sup>2</sup> A claimant seeking benefits under FECA has the burden of proof to establish the essential elements of her claim by the weight of the evidence,<sup>3</sup> including that she sustained an injury in the performance of duty and that any specific

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<sup>2</sup> 5 U.S.C. § 8102(a).

<sup>3</sup> *Nathaniel Milton*, 37 ECAB 712 (1986); *Joseph M. Whelan*, 20 ECAB 55 (1968) and cases cited therein.

condition or disability for work for which she claims compensation is causally related to that employment injury.<sup>4</sup>

The claimant must submit a rationalized medical opinion that supports a causal connection between the claimed disability and the employment injury. The medical opinion must be based on a complete factual and medical background with an accurate history of the employment injury, and must explain from a medical perspective how the disabling condition is related to the injury.<sup>5</sup>

### ANALYSIS

OWCP accepted that appellant sustained three medical conditions as a result of standing and reaching from one position for an extended period of time in the performance of her duties as a meat inspector: sciatica, left leg, aggravation of lumbosacral spondylosis without myelopathy and aggravation of general osteoarthritis of the left hip. To establish that appellant's disability beginning October 18, 2010 was a result of her accepted work injury, she must submit a narrative medical report from her physician demonstrating an understanding of what her duties as a meat inspector entailed and addressing the specific medical conditions OWCP accepted as a result of those duties. There is no evidence a physician reviewed the record of appellant's hospitalization or explained whether her disability for work beginning October 18, 2010 was a result of the accepted employment injury or was instead a result of an unrelated arterial insufficiency or other medical condition.

Appellant has submitted a multitude of medical records, but none of them provides a medical narrative opinion necessary to establish the critical element of causal relationship. Because no physician has directly addressed the issue, the Board finds that she has not met her burden of proof to establish her entitlement to compensation for wage loss. The Board will affirm OWCP's May 17, 2011 decision.

Appellant may submit new evidence or argument with a written request for reconsideration to OWCP within one year of this merit decision, pursuant to 5 U.S.C. § 8128(a) and 20 C.F.R. §§ 10.605 through 10.607.

### CONCLUSION

The Board finds that appellant has not met her burden of proof to establish that her disability beginning October 18, 2010 was causally related to her accepted employment injury.

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<sup>4</sup> *Elaine Pendleton*, 40 ECAB 1143, 1145 (1989).

<sup>5</sup> *John A. Ceresoli, Sr.*, 40 ECAB 305 (1988).

**ORDER**

**IT IS HEREBY ORDERED THAT** the May 17, 2011 decision of the Office of Workers' Compensation Programs is affirmed.

Issued: January 10, 2012  
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