

FACTUAL HISTORY

On January 3, 2011 appellant, then a 42-year-old program analyst, filed a claim for traumatic injury, alleging that he sustained an injury to his right shoulder on December 30, 2010 while moving a portable on demand storage (PODS) unit. OWCP received the claim on June 16, 2011.²

By letter dated June 27, 2011, OWCP advised appellant that he should submit further evidence in support of his claim, including a medical report that provided a diagnosis of his right shoulder condition and a physician's opinion explaining the causal relationship to his alleged work event.

In response, appellant submitted a July 6, 2011 medical report from Dr. Michael Mikolajczak, an osteopathic physician, who noted that appellant helped three other men move a PODS unit on December 30, 2010 and had some immediate shoulder pain, which had gotten progressively worse. Dr. Mikolajczak also noted that appellant had a prior right shoulder injury a year ago. He diagnosed right shoulder impingement, possible partial rotator cuff tear, but offered no opinion regarding the cause of this condition.

A July 8, 2011 magnetic resonance imaging (MRI) scan report from Dr. Stanley Higgins, a Board-certified physician in diagnostic radiology, noted that appellant's impingement could have been caused by a "low lying Type I acromion" with respect to the distal clavicle.

On July 29, 2011 OWCP denied appellant's claim on the grounds that he had failed to establish that his condition was causally related to his work incident.

After the decision, appellant submitted a July 26, 2011 report from Dr. Mikolajczak, wherein he noted that the MRI scan showed some tendon changes. Dr. Mikolajczak also diagnosed appellant with "post[-]traumatic work-related rotator cuff tendinitis with impingement."

On August 26, 2011 appellant requested reconsideration of the July 29, 2011 decision.

Along with the request, appellant submitted a supplemental statement wherein he explained that he had an accepted right shoulder injury which occurred on January 22, 2009. He submitted a February 2, 2009 medical report from Dr. Mikolajczak, noting a work incident on January 22, 2009, that led to the onset of shoulder/periscapular pain. Appellant also submitted a July 6, 2011 report from Dr. Mikolajczak wherein he diagnosed right shoulder impingement and possible partial rotator cuff tear.

OWCP also received a February 2, 2009 report from Dr. Mikolajczak, who noted that appellant had onset of right shoulder/periscapular pain while carrying an object at work on January 22, 2009.

² Appellant filed a notice on June 16, 2011 alleging a recurrence of his right shoulder condition, with an onset date of June 8, 2011. He stated that recurrences to his shoulder injury occurred "on and off" after December 30, 2010.

On October 19, 2011 OWCP affirmed the denial of appellant's claim on the grounds that the medical evidence did not support that his right shoulder condition was causally related to the December 30, 2011 work incident.

LEGAL PRECEDENT

An employee seeking benefits under FECA³ has the burden to establish the essential elements of his claim including the fact that the individual is an employee of the United States within the meaning of FECA, that the claim was timely filed, that an injury was sustained in the performance of duty as alleged and that any disability or medical condition for which compensation is claimed is causally related to the employment injury.⁴

To determine whether a federal employee has sustained a traumatic injury in the performance of duty, it first must be determined whether the fact of injury has been established. There are two components involved in establishing the fact of injury. First, the employee must submit sufficient evidence to establish that he or she actually experienced the employment incident at the time, place and in the manner alleged.⁵ Second, the employee must submit evidence, in the form of medical evidence, to establish that the employment incident caused a personal injury.⁶

To establish a causal relationship between a claimant's condition and the employment event or incident, he must submit rationalized medical opinion evidence based on a complete factual and medical background supporting such a causal relationship. Rationalized medical opinion evidence is medical evidence which includes a physician's opinion on the issue of whether there is a causal relationship between the claimant's diagnosed condition and the implicated employment factors. The opinion of the physician must be based on a complete factual and medical background of the claimant, must be one of reasonable medical certainty and must be supported by medical rationale explaining the nature of the relationship between the diagnosed condition and the specific employment factors identified by the claimant.⁷

ANALYSIS

OWCP has accepted that the December 30, 2010 incident occurred as alleged. The Board finds that the evidence appellant submitted in support of his claim did not provide a rationalized medical opinion explaining how his right shoulder condition was causally related to the employment incident. Appellant therefore did not meet his burden of proof.

³ 5 U.S.C. §§ 8101-8193.

⁴ *Steven S. Saleh*, 55 ECAB 169 (2003); *Elaine Pendleton*, 40 ECAB 1143 (1989).

⁵ *Bonnie A. Contreras*, 57 ECAB 364, 367 (2006); *Edward C. Lawrence*, 19 ECAB 442, 445 (1968).

⁶ *T.H.*, 59 ECAB 388 (2008); *John J. Carlone*, 41 ECAB 354, 356-57 (1989).

⁷ *Gary J. Watling*, 52 ECAB 278 (2001).

Dr. Higgin's MRI scan examination of July 8, 2011 indicates that appellant had a congenital right shoulder condition of low lying Type I acromion with respect to the distal clavical, which could have caused an impingement syndrome. The record also indicates that appellant had a previous work-related 2009 right shoulder injury.

While the evidence of record substantiates that appellant experienced right shoulder pain after helping move a PODS unit on December 30, 2010, he has not submitted a medical report which correlates the December 30, 2010 event to a diagnosed right shoulder condition, with supporting medical rationale.

The Board has consistently held that medical reports lacking rationale regarding causal relationship have little probative value.⁸ While the medical reports from Dr. Mikolajczak, appellant's description of the employment incident, and his onset of right shoulder pain, they did not provide medical rationale explaining how the incident caused his right shoulder condition. Such medical explanation is especially important in cases such as this where appellant has congenital and or preexisting conditions which might be the cause of the current condition. As such, these medical reports are insufficient to satisfy the causal relationship requirement of his claim.

Dr. Mikolajczak's July 26, 2011 medical report opined that appellant's rotator cuff tendinitis condition was "work related," but it did not provide a rational medical basis to support this conclusion. He did not explain how appellant's reported injury occurred, given appellant's preexisting right shoulder conditions and the mechanics of the PODS move he carried out with three other individuals on December 30, 2010. The Board has held that medical reports consisting solely of conclusory statements without supporting rationale are of diminished probative value.⁹ In the absence of rationalized medical opinion evidence explaining how moving a PODS unit caused a diagnosed right shoulder condition, appellant did not meet his burden of proof.

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 did not establish that his right shoulder condition was causally related to his December 30, 2010 employment incident.

⁸ See *Mary E. Marshall*, 56 ECAB 420 (2005).

⁹ *William C. Thomas*, 45 ECAB 591 (1994).

ORDER

IT IS HEREBY ORDERED THAT the October 19 and July 29, 2011 decisions of the Office of Workers' Compensation Programs are affirmed.

Issued: July 9, 2012
Washington, DC

Colleen Duffy Kiko, Judge
Employees' Compensation Appeals Board

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

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