

noted that he was on limited duty and that his condition began to worsen when he was moving some equipment at work. Appellant indicated that his left leg began to grow numb and the pain was unbearable. On July 5, 2012 he alternatively filed a traumatic injury claim alleging that on March 12, 2012 he sustained an injury to his back and both legs while moving equipment in the performance of duty. Appellant alleged that he was at work moving some equipment and putting it in order when he had pain. He stopped work on March 12, 2012.

In a March 16, 2012 treatment note, Dr. Carl Otten, Board-certified in preventative medicine, noted that appellant was totally disabled for the period March 16 to April 7, 2012. He indicated that appellant related that he was unable to work since he was sent home from work on March 12, 2012. Dr. Otten indicated that appellant advised him that he had received injections from another physician and had the “worst pain that he has had for the past three years.” He examined appellant and provided findings to include tenderness with allodynia over the lumbosacral soft tissue and antalgic restlessness along with distress. Dr. Otten diagnosed neck, thoracic and lumbar degenerative disease. In an April 5, 2012 treatment note, he advised that appellant was totally disabled through May 5, 2012. In a May 3, 2012 report, Dr. Otten diagnosed thoracic disc, lumbar disc, cervical osteoarthritis and degenerative thoracic disc. He advised that appellant had not worked since March 12, 2012 and that he related that his inability to work was due to a job assignment from his supervisor beginning on March 1, 2012, which required working in excess of his written physical limitations over a five-day week. Dr. Otten indicated that appellant related that his job tasks included bending, squatting, twisting, pushing and pulling. He also noted that appellant had anxiety symptoms. In a May 4, 2012 report, Dr. Otten opined that the work assignments during the week of March 1, 2012 exceeded appellant’s physical limitations and caused an exacerbation of his allowed conditions. He continued to treat appellant and submit reports.

In a July 17, 2012 letter, OWCP advised appellant that he filed a claim for a traumatic injury which originally appeared to be for a minor injury resulting in minimal or no lost time. It advised him that his claim was reopened because of telephone contact from him under another claim, No. xxxxxx314, indicated medical concerns and wage loss that would exceed a minor injury status.² OWCP informed appellant of the type of evidence needed to support his claim and requested that he submit such evidence within 30 days.

By decision dated August 22, 2012, OWCP denied appellant’s claim finding that the evidence was not sufficient to establish that the claimed events occurred as alleged.³

On August 31, 2012 appellant’s representative requested a telephonic hearing, which was held on December 17, 2012. In a November 27, 2012 treatment note, Dr. Otten provided a statement of causality. He noted that at the time of his evaluation on October 6, 2012 appellant denied prior similar problems and that x-rays on the date showed cervical and lumbar degenerative disc disease and thoracic degenerative changes. Dr. Otten diagnosed work-related

² Claim number xxxxxx314 pertains to an injury to the lower/cervical back on September 8, 2008 and is not presently before the Board.

³ OWCP noted that it was treating the claim as an occupational disease.

lumbar, thoracic and cervical strains. He opined that the preexisting degenerative findings contributed to appellant's delayed recovery.

In a December 17, 2012 statement, Daniel P. Riley, a coworker, explained that in March 2012, he was going into the equipment room where appellant was working. He noted that appellant indicated that he was doing the inventory and checking serial numbers by taking everything out and moving it back in its place. Dr. Riley indicated that appellant informed him that he was experiencing burning and tingling in his left foot and leg.

By decision dated February 21, 2013, OWCP's hearing representative affirmed OWCP's August 22, 2012 decision, as modified. He found that the work activity occurred as alleged. However, the medical evidence failed to establish a diagnosed condition causally related to the work activity.

LEGAL PRECEDENT

An employee seeking benefits under FECA⁴ 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 FECA, that the claim was timely filed within the applicable time limitation period of FECA, that an injury was sustained in the performance of duty as alleged and that any disability and/or specific condition for which compensation is claimed are causally related to the employment injury.⁵ 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.⁶

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

⁴ 5 U.S.C. §§ 8101-8193.

⁵ *Joe D. Cameron*, 41 ECAB 153 (1989); *Elaine Pendleton*, 40 ECAB 1143, 1145 (1989).

⁶ *Victor J. Woodhams*, 41 ECAB 345 (1989).

⁷ *Id.*

ANALYSIS

The evidence establishes that appellant has a neck, shoulder and back condition and was involved in activities such as pushing and pulling heavy machinery at work. However, appellant submitted insufficient medical evidence to establish that his lumbosacral condition was caused or aggravated by these activities or any other specific factors of his federal employment.

Appellant submitted several reports from Dr. Otten. In his May 3, 2012 report, Dr. Otten diagnosed thoracic disc, lumbar disc, cervical osteoarthritis and degenerative thoracic disc. He indicated that appellant related that his inability to work was due to a job assignment beginning on March 1, 2012, which required working in excess of his written physical limitations over a five-day week. The Board finds that while the physician noted that appellant believed that his condition was related to his work, Dr. Otten did not offer his own opinion on causal relationship. To the extent that this report supports causal relationship, Dr. Otten did not provide medical rationale in which he explained why particular work factors contributed to a diagnosed condition. In a May 4, 2012 report, he opined that the work assignments during the week of March 1, 2012 exceeded appellant's limitations and exacerbated appellant's allowed conditions. However, Dr. Otten did not adequately explain exactly what incident or incidents at work to which he was referring and how such particular incidents may have exacerbated a particular condition. His November 27, 2012 report noted that he had previously offered work-related diagnoses. However, this report does not specifically explain why particular work factors caused or aggravated appellant's diagnosed condition.

Other reports from Dr. Otten are insufficient to establish the claim because, while they note appellant's status, they do not specifically address how particular work factors contributed to a diagnosed medical condition. 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.⁸ Consequently, the Board finds that this evidence is insufficient to establish appellant's claim.

The Board has held that the mere fact that a condition manifests itself during a period of employment does not raise an inference that there is a causal relationship between the two.⁹ Neither the fact that the condition became apparent during a period of employment nor the belief that the condition was caused or aggravated by employment factors or incidents is sufficient to establish causal relationship.¹⁰ Causal relationship must be substantiated by reasoned medical opinion evidence, which is appellant's responsibility to submit.

As there is no reasoned medical evidence explaining how appellant's employment duties caused or aggravated a neck, shoulder or back condition, appellant has not met his burden of proof in establishing that he sustained a medical condition in the performance of duty causally related to factors of his employment.

⁸ *Michael E. Smith*, 50 ECAB 313 (1999).

⁹ *See Joe T. Williams*, 44 ECAB 518, 521 (1993).

¹⁰ *Id.*

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 his burden of proof to establish that he sustained an injury causally related to factors of his federal employment.

ORDER

IT IS HEREBY ORDERED THAT the February 21, 2013 decision of the Office of Workers' Compensation Programs is affirmed.

Issued: September 9, 2013
Washington, DC

Richard J. Daschbach, Chief Judge
Employees' Compensation Appeals Board

Colleen Duffy Kiko, Judge
Employees' Compensation Appeals Board

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