

bilateral rotator cuff condition. He did not realize that the condition was caused or aggravated by his employment duties of repetitive lifting of heavy and light boxes over his head daily until February 17, 2012.

By correspondence dated September 13, 2012, OWCP informed appellant that the evidence of record was insufficient to establish his claim. Appellant was advised as to the medical and factual evidence required to support his claim and given 30 days to submit this information.

OWCP received medical and factual evidence including an October 19, 2011 and February 17, 2012 magnetic resonance imaging (MRI) scans. The February 17, 2012 scan diagnosed a full-thickness supraspinatus tendon tear in the right shoulder. The October 19, 2011 scan revealed mild left acromioclavicular degenerative changes.

By decision dated December 3, 2012, OWCP denied appellant's claim. It found insufficient medical evidence to support that his claimed condition was causally related to his employment.

In a December 7, 2012 letter, appellant's counsel requested a telephonic hearing, which was held before an OWCP hearing representative on March 14, 2013.

In a December 13, 2012 report, Dr. Lauri Beth Hemsley, an examining Board-certified occupational physician, diagnosed chronic back pain and low back pain without radiculopathy. She placed appellant on modified work with restrictions until February 15, 2013.

By decision dated May 24, 2013, an OWCP hearing representative affirmed the December 3, 2012 decision.

On July 10, 2013 appellant's counsel requested reconsideration. In support of his request, appellant submitted a June 25, 2013 form report from Dr. James Huang, an examining physician, entitled Rationalized Medical Opinion Form to Establish Causal Relationship. Dr. Huang diagnosed rotator cuff tear, noted an MRI scan had been performed in February 2012 and opined that "there is causal relationship." Under description of work activity incident, he noted that appellant felt sharp pain in his neck and shoulder following lifting boxes in October 2011. The physical examination showed bilateral shoulder pain on abduction and flexion.

By decision dated October 7, 2013, OWCP denied modification of the December 3, 2012 decision.

LEGAL PRECEDENT

An employee seeking benefits under FECA² 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 filed within the applicable time

² *Id.*

limitation; that an injury was sustained while 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.³ These are the essential elements of each and every compensation claim regardless of whether the claim is predicated on a traumatic injury or an occupational disease.⁴

To establish that an injury was sustained in the performance of duty in a claim for occupational disease, an employee must submit: (1) a factual statement identifying employment factors alleged to have caused or contributed to the presence or occurrence of the disease or condition; (2) medical evidence establishing the presence or existence of the disease or condition for which compensation is claimed; and (3) medical evidence establishing that the diagnosed condition is causally related to the employment factors identified by the employee.⁵

Causal relationship is a medical issue and the medical evidence generally required to establish causal relationship is rationalized medical opinion evidence.⁶ Rationalized medical opinion evidence is medical evidence which includes a physician's rationalized opinion on whether there is a causal relationship between the employee's diagnosed condition and the compensable employment factors.⁷ 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 condition and the specific employment factors identified by the employee.⁸

ANALYSIS

It is undisputed that appellant performed work as a materials handler as alleged. He has established that he performed repetitive lifting in the performance of duty. The question that remains is whether appellant's duties caused a bilateral rotator cuff condition.

To discharge his burden of proof, appellant must submit a well-reasoned medical opinion explaining how his duties caused a diagnosed medical condition. In addition, any medical opinion evidence he may submit to support his claim for compensation under FECA should reflect a correct history. The physician should provide a medical sound explanation of the duties appellant performed as a materials handler, in particular, caused or aggravated his bilateral rotator cuff condition. There is only one document in the record that addresses this issue. Dr. Huang completed a form report on June 25, 2013 entitled Rationalized Medical Opinion Form to Establish Causal Relationship, in which he stated: "there is causal relationship." He did

³ *C.S.*, Docket No. 08-1585 (issued March 3, 2009); *Bonnie A. Contreras*, 57 ECAB 364 (2006).

⁴ *S.P.*, 59 ECAB 184 (2007); *Joe D. Cameron*, 41 ECAB 153 (1989).

⁵ *D.U.*, Docket No. 10-144 (issued July 27, 2010); *R.H.*, 59 ECAB 382 (2008); *Roy L. Humphrey*, 57 ECAB 238 (2005); *Donald W. Wenzel*, 56 ECAB 390 (2005).

⁶ *Y.J.*, Docket No. 08-1167 (issued October 7, 2008); *A.D.*, 58 ECAB 149 (2006); *D'Wayne Avila*, 57 ECAB 642 (2006).

⁷ *J.J.*, Docket No. 09-27 (issued February 10, 2009); *Michael S. Mina*, 57 ECAB 379 (2006).

⁸ *I.J.*, 59 ECAB 408 (2008); *Victor J. Woodhams*, 41 ECAB 345, 352 (1989).

not describe appellant's current job or any of the duties he performed, other than noting that appellant had lifted boxes in October 2011. Dr. Huang did not explain how such work activities caused the diagnosed rotator cuff tear. Medical opinions which contain no rationale or explanation are of little probative value.⁹ Thus, this report is insufficient to establish appellant's claim.

In a December 13, 2012 report, Dr. Hemsley diagnosed chronic back pain and low back pain without radiculopathy. She placed appellant on modified work with restrictions until February 15, 2013. Medical evidence that offers no opinion regarding the cause of an employee's condition is of diminished probative value and insufficient to meet his or her burden of proof on causal relationship.¹⁰

Appellant also submitted MRI scans dated October 19, 2011 and February 17, 2012. MRI scans are diagnostic in nature and therefore do not address causal relationship.¹¹ Thus, they are insufficient to establish appellant's claim.

The Board finds that appellant has not met his burden of proof. The medical evidence is insufficient to establish causal relationship. The Board will therefore affirm OWCP's October 7, 2013 decision.

On appeal appellant's counsel alleged that the medical and factual evidence are sufficient to establish his claim. Specifically, he argues that Dr. Huang's June 25, 2013 report establishes that appellant's bilateral shoulder condition was employment related. The Board finds that Dr. Huang's report is insufficient to meet appellant's burden as the physician did not provide adequate rationale or discuss his employment duties other than noting he was lifting boxes. Appellant also referenced reports dated March 13 and May 18, 2012. However a review of the record shows that no medical reports with those dates were submitted.

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 established that his bilateral rotator cuff condition was sustained in the performance of duty, causally related to factors of his federal employment.

⁹ *F.T.*, Docket No. 09-919 (issued December 7, 2009) (medical opinions not fortified by rationale are of diminished probative value); *Sedi L. Graham*, 57 ECAB 494 (2006) (medical form reports and narrative statements merely asserting causal relationship generally do not discharge a claimant's burden of proof).

¹⁰ *A.F.*, 59 ECAB 714 (2008); *Ellen L. Noble*, 55 ECAB 530 (2004).

¹¹ *C.B.*, Docket No. 09-2027 (issued May 12, 2010); *S.E.*, Docket No. 08-2214 (issued May 6, 2009); *Jaja K. Asaramo*, 55 ECAB 200 (2004) (medical evidence that does not offer any opinion regarding the cause of an employee's condition is of limited probative value on the issue of causal relationship).

ORDER

IT IS HEREBY ORDERED THAT the decision of the Office of Workers' Compensation Programs dated October 7, 2013 is affirmed.

Issued: April 22, 2014
Washington, DC

Colleen Duffy Kiko, Judge
Employees' Compensation Appeals Board

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

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