United States Department of Labor
Employees' Compensation Appeals Board

S.G., Appellant	)	
and	)	**Docket No. 14-1759**
	)	**Issued: December 19, 2014**
U.S. POSTAL SERVICE, POST OFFICE, Detroit, MI, Employer	)	

Appearances:
Appellant, pro se
Office of Solicitor, for the Director

Case Submitted on the Record

DECISION AND ORDER

Before:
COLLEEN DUFFY KIKO, Judge
PATRICIA HOWARD FITZGERALD, Judge
JAMES A. HAYNES, Alternate Judge

JURISDICTION

On August 11, 2014 appellant filed a timely appeal from a June 2, 2014 merit decision of the Office of Workers' Compensation Programs (OWCP). Pursuant to the Federal Employees' Compensation Act[1] (FECA) and 20 C.F.R. §§ 501.2(c) and 501.3, the Board has jurisdiction over the merits of this case.

ISSUE

The issue is whether appellant has established bilateral carpal tunnel syndrome or trigger finger casually related to her federal employment.

[1] 5 U.S.C. § 8101 *et seq.*

FACTUAL HISTORY

On March 4, 2014 appellant, then a 54-year-old safety specialist team leader, filed an occupational disease or illness claim (Form CA-2)[2] alleging that she sustained bilateral carpal tunnel syndrome and trigger finger as a result of her federal employment. She stated that she performed repetitive activity such as typing and writing in her job. The reverse of the claim form indicated that appellant had stopped working on April 8, 2013.

Appellant submitted a statement regarding her work history She reported that she worked as a mail processing clerk (1997-1998), a parcel post distribution machine operator (1998-1999), a human resources associate (1999-2001), a safety specialist (2001-2005), and a safety specialist team leader since September 2005. According to appellant, in October 2011 she had a new manager and there was increased typing and fine manipulation of fingers to complete projects. She asserted that she communicated only by e-mail with her supervisor, and her hands began to bother her more in 2012. Appellant stated that she underwent carpal tunnel surgery in April 2013 and began having intermittent trigger finger in January 2014. In addition, she stated that as of July 20, 2013 her job assignment and workload increased. As to her present job, appellant stated that the job involved continuous typing, and 90 percent of her time was spent with typing, data entry, and responding to e-mails.

The record contains job descriptions for the positions of mail processing clerk, parcel post distribution machine operator, safety specialist, and safety specialist team leader. The team leader position description provides that the position involved overseeing and coordinating the activities of safety specialists, driving safety instructors, and general clerks.

Appellant's supervisor since October 2011 provided a statement dated February 27, 2014. The supervisor stated that, while the position of safety specialist included data entry and typing e-mails, this would involve approximately two hours a day. The supervisor stated that there was not a great deal of continuous typing, as the majority of keyboard work is clicking on buttons or drop down lists. With respect to an increase in work as of July 2013, the supervisor asserted appellant's typing decreased as a result of an office reassignment and her accident record processing numbers did not show an increase in data entry.

On March 28, 2014 appellant submitted a March 25, 2014 statement asserting that she spent more than two hours a day on data entry and e-mails. She agreed she did not compose letters or prepared reports, but the majority of work involved keyboard work and this required moving and clicking on a mouse.

With respect to medical evidence, appellant submitted a report dated March 18, 2004 from Dr. Michael Litman, a Board-certified internist, stating that she had been complaining of hand symptoms since December 2008. Dr. Litman stated that she had been diagnosed with bilateral carpal tunnel syndrome and continued to have intermittent symptoms. He stated that he had "reviewed patient's work assignments since 1997 to now" at the employing establishment

[2] OWCP regulations provide that an occupational disease or illness is a condition produced by the work environment over a period longer than a single workday of shift. 20 C.F.R. § 10.5(q).

and "I believe that repetitive work with the hands has led to [appellant's] carpal tunnel syndrome."

In a report dated March 20, 2014, Dr. Peter Janevski, a Board-certified surgeon, provided a history of carpal tunnel symptoms since 2008. He stated that appellant had been working as a safety specialist, and during the last three years had spent a lot more time on the computer. Dr. Janevski stated that she reported she does a lot of typing, and she felt her trigger finger was related to this type of work. He noted that appellant had left carpal tunnel surgery and provided results on examination. Dr. Janevski opined that as to right carpal tunnel, she "spends seven hours on the computer, typing" and it "appears that the right carpal tunnel syndrome has been exacerbated by the type of work she is performing." He also stated that trigger thumbs appeared to be secondary to repetitive typing.

In a statement dated May 28, 2014, the supervisor stated that appellant's work did not increase since October 2011. The supervisor stated that appellant was assigned two additional driver safety instructors, but these individuals schedule their own training and enter data into a spreadsheet themselves. According to the supervisor, appellant was now responsible for closing accident records at two Detroit facilities, but these employees contribute little to overall accident processing. The supervisor stated that some of appellant's safety inspection workload, and corresponding data entry, and writing had decreased.

By decision dated June 2, 2014, OWCP denied the claim for compensation. It found the evidence did not establish the factual allegations with respect to work duties.

LEGAL PRECEDENT

A claimant seeking benefits under FECA[3] has the burden of establishing the essential elements of his or her claim by the weight of the reliable, probative, and substantial evidence, including that an injury was sustained in the performance of duty as alleged and that any specific condition or disability claimed is causally related to the employment injury.[4]

To establish that an injury was sustained in the performance of duty, a claimant must submit: (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 diagnosed condition is causally related to the employment factors identified by the claimant.[5]

Causal relationship is a medical question that can generally be resolved only by rationalized medical opinion evidence.[6] A physician's opinion on the issue of whether there is a

[3] 5 U.S.C. §§ 8101-8193.

[4] 20 C.F.R. § 10.115(e), (f); *see Jacquelyn L. Oliver*, 48 ECAB 232, 235-36 (1996).

[5] *Ruby I. Fish*, 46 ECAB 276, 279 (1994).

[6] *See Robert G. Morris*, 48 ECAB 238 (1996).

causal relationship between the claimant's diagnosed condition and the implicated employment factors must be based on a complete factual and medical background of the claimant.[7] Additionally, in order to be considered rationalized the opinion must be expressed in terms of a reasonable degree of medical certainty, and must be supported by medical rationale, explaining the nature of the relationship between the diagnosed condition, and appellant's specific employment factors.[8]

ANALYSIS

In the present case, appellant has alleged that she sustained carpal tunnel syndrome and trigger finger causally related to repetitive activity, such as typing, writing, and working on the computer. The Board finds that she did not establish the factual element of the claim, but it is clear from the record that her work history involved some typing, data entry, and work on the computer. The question is the nature, extent, and duration of such activity. Once that is determined based on the evidence. The medical evidence is then reviewed to determine if there is a rationalized opinion, based on an accurate background, on causal relationship between a diagnosed condition, and the work factors.

Appellant indicated that she had worked at the employing establishment since 1997 in a number of positions, including mail processing clerk, distribution machine operator and a safety specialist team leader since 2005. The job descriptions indicate that she would perform some repetitive motion with her hands in these positions. As to the safety specialist position, there was no dispute that appellant performed some typing in responding to e-mails, and performed some data entry with respect to processing accident reports, and other assigned duties.

The conflicting evidence from the employing establishment supervisor was in regard to the actual amount of typing or data entry performed, and appellant's assertion that her workload, and corresponding keyboard activity, increased after October 2011 and particularly after July 2013. Based on the job description and the statements from appellant and the supervisor, it is clear that the position since 2005 did not involve continuous typing. She acknowledged that she did not type reports or letters. A reasonable interpretation of the evidence is that appellant spent significant portions of the workday at the computer, engaged in typing e-mails, some data entry, and some use of a computer mouse in accessing drop down lists and other common methods of using computer software. The supervisor's statement that appellant spent two hours a day on typing and data entry does not preclude other use of the computer in processing reports, and related duties. The Board finds that appellant has established that she performed some repetitive computer duties in her position.

As to the assertion that repetitive activities increased after October 2011, the evidence of record does not support such a finding. The supervisor's statements were unequivocal in this regard that appellant's job did not require additional repetitive typing or data entry.

[7] *Victor J. Woodhams*, 41 ECAB 345, 352 (1989).

[8] *Id.*

The issue then becomes whether the medical evidence contains a proper factual background that demonstrates an understanding of appellant's work history and the actual repetitive activity performed. Dr. Litman provided a brief March 18, 2014 report stating that he had reviewed appellant's "work assignments" without further explanation. This does not constitute a complete and accurate factual history. It is not clear to what "assignments" Dr. Litman is referring as he does not discuss appellant's work history. Dr. Janevski provided some detail as to appellant's work history, but he did not provide an accurate background. He reported that she typed for seven hours a day, which is not an accurate assessment of appellant's job duties. As noted above, the job did not involve continuous typing, but rather some intermittent typing and other activity, such as use of a computer mouse. Dr. Janevski also stated that appellant's workload had increased, which is not established by the record.

The Board finds that the evidence is not sufficient to establish the claim for compensation. The record does not contain a rationalized medical opinion, based on a complete and accurate background, between a diagnosed condition, and the established factors of federal employment. It is appellant's burden of proof, and for the reasons stated, the Board finds that she did not meet her burden of proof.

On appeal, appellant stated that her current supervisor was incorrect regarding the amount of data entry performed. The Board has reviewed the factual evidence of record and made findings as noted above. As the above analysis indicates, to establish a claim, appellant must submit probative medical evidence based on an accurate background. She 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 bilateral carpal tunnel syndrome or trigger finger casually related to her federal employment.

ORDER

IT IS HEREBY ORDERED THAT the decision of the Office of Workers' Compensation Programs dated June 2, 2014 is affirmed, as modified.

Issued: December 19, 2014
Washington, DC

Colleen Duffy Kiko, Judge
Employees' Compensation Appeals Board

Patricia Howard Fitzgerald, Judge
Employees' Compensation Appeals Board

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