



On appeal, appellant noted that she worked for the Federal Government for 35 years, of which 25 years required repetitive use of her fingers on a daily basis. She worked at a workstation that was not ergonomically designed for her body. Appellant's carpal tunnel syndrome required surgical treatment.

### **FACTUAL HISTORY**

On March 9, 2012 appellant, then a 68-year-old safety and occupational health specialist, filed an occupational disease claim (Form CA-2) alleging that she sustained carpal tunnel syndrome due to factors of her federal employment, including computer keyboarding and typing.

On February 24, 2012 Dr. Nidal Shawahin, a Board-certified internist, found a positive Phalen's test on appellant's left hand and diagnosed possible carpal tunnel syndrome. He noted that appellant used her hands for typing at work and had similar symptoms in 2004 but was not under his care at that time.

In an April 3, 2012 letter, OWCP notified appellant of the deficiencies of her claim. It afforded her 30 days to submit additional evidence and respond to its inquiries.

Appellant submitted an April 27, 2012 statement, noting that her federal duties required frequent use of typing with a computer keyboard. She also submitted a position description and physical therapy notes dated December 30, 2004.

In a May 13, 2003 record of occupational injury or illness, appellant reported that she noticed her hands were swollen from typing. The employing establishment restricted her from typing for two weeks due to carpal tunnel syndrome.

On December 7, 2004 Hilda Williamson, a family nurse practitioner, diagnosed mid-back pain. She indicated that appellant's neck and back pain were aggravated by factors of her federal employment, including the postural position in the chair to perform selected job tasking.

In an August 16, 2007 report, Dr. Elizabeth Hughes, a family practitioner, diagnosed an occupational problem. She noted that appellant received an ergonomic chair following a prior assessment which had helped to somewhat relieve her lower back pain. Appellant continued to have bilateral shoulder pain and was provided with educational material on carpal tunnel syndrome.

On February 27, 2012 Dr. Shawahin prescribed a wrist splint for her keyboard disability.

Electromyography and nerve conduction studies (EMG/NCS) dated March 13, 2013 revealed advanced bilateral carpal tunnel syndrome.

By decision dated June 12, 2012, OWCP denied appellant's claim. It accepted her work duties but found that the medical evidence was not sufficient to establish a causal relationship between her wrist conditions to the employment factors.

On March 22, 2013 appellant requested reconsideration and submitted a March 20, 2013 report from Dr. Shawahin who stated that appellant had “carpal tunnel possibly caused by her typing/keyboard at work.”

By decision dated May 8, 2013, OWCP denied modification of the June 12, 2012 decision.

### **LEGAL PRECEDENT**

An employee seeking benefits under FECA<sup>3</sup> 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, and that an injury<sup>4</sup> was sustained in the performance of duty. These are the essential elements of each compensation claim, regardless of whether the claim is predicated upon a traumatic injury or an occupational disease.<sup>5</sup>

To establish that an injury was sustained in the performance of duty in a claim for an occupational disease claim, an employee must submit the following: (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.<sup>6</sup>

Causal relationship is a medical issue and the medical evidence generally required to establish causal relationship is rationalized medical evidence. 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.<sup>7</sup>

### **ANALYSIS**

The Board finds that appellant did not meet her burden of proof to establish that her federal employment caused or aggravated her carpal tunnel syndrome. Appellant submitted a statement in which she identified the factors of employment that she believed caused the condition, including computer keyboarding and typing. In order to establish a claim, she must

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<sup>3</sup> 5 U.S.C. § 8101 *et seq.*

<sup>4</sup> OWCP regulations define an occupational disease or illness as a condition produced by the work environment over a period longer than a single workday or shift. 20 C.F.R. § 10.5(q).

<sup>5</sup> *See O.W.*, Docket No. 09-2110 (issued April 22, 2010); *Ellen L. Noble*, 55 ECAB 530 (2004).

<sup>6</sup> *See D.R.*, Docket No. 09-1723 (issued May 20, 2010). *See also Roy L. Humphrey*, 57 ECAB 238, 241 (2005); *Ruby I. Fish*, 46 ECAB 276, 279 (1994); *Victor J. Woodhams*, 41 ECAB 345 (1989).

<sup>7</sup> *See O.W.*, *supra* note 5.

also submit rationalized medical evidence which explains how her medical conditions were caused or aggravated by her work factors.<sup>8</sup>

On February 24, 2012 Dr. Shawahin found a positive Phalen's test on appellant's left hand and diagnosed possible carpal tunnel syndrome. He noted generally that she used her hands for typing at work and had similar symptoms in 2004, but was not under his care at that time. On February 27, 2012 Dr. Shawahin prescribed a wrist splint. On March 20, 2013 he stated that she had "carpal tunnel possibly caused by her typing/keyboard at work." Dr. Shawahin failed to provide a rationalized opinion explaining how factors of appellant's federal employment, such as computer keyboarding and typing, caused or aggravated her carpal tunnel syndrome. He noted that her condition possibly occurred while she was at work, but such generalized statements are speculative and do not establish causal relationship. Dr. Shawahin's opinion is unsupported by adequate medical rationale explaining how her physical activity at work actually caused or aggravated the diagnosed conditions.<sup>9</sup>

In her August 16, 2007 report, Dr. Hughes diagnosed an "occupational problem" and noted that appellant received an ergonomic chair following a prior assessment. Appellant continued to have bilateral shoulder pain and was provided with educational material on carpal tunnel syndrome. Dr. Hughes failed to provide an opinion addressing how computer keyboarding or typing were competent to cause or aggravate appellant's carpal tunnel syndrome.

The March 13, 2013 EMG/NCS report is diagnostic in nature and does not address causal relationship.

Appellant also submitted a position description, a May 13, 2003 record of occupational injury or illness, a December 7, 2004 report from Ms. Williamson, a nurse practitioner, and the physical therapy notes dated December 30, 2004. These documents do not constitute competent medical evidence as they do not contain rationale by a physician relating appellant's disability to her employment.<sup>10</sup>

On appeal, appellant stated that she worked for the Federal Government for 35 years, 25 of which required repetitive use of her fingers on a daily basis. As noted she bears the burden of proof to establish her claim.<sup>11</sup> As the medical evidence of record lacks a sufficient opinion on causal relationship, appellant failed to meet her burden of proof. The Board finds that her arguments are not substantiated.

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<sup>8</sup> See *A.C.*, Docket No. 08-1453 (issued November 18, 2008); *Donald W. Wenzel*, 56 ECAB 390 (2005); *Leslie C. Moore*, 52 ECAB 132 (2000).

<sup>9</sup> See *K.W.*, Docket No. 10-98 (issued September 10, 2010).

<sup>10</sup> See 5 U.S.C. § 8101(2). Section 8101(2) of FECA provides as follows: "(2) 'physician' includes surgeons, podiatrists, dentists, clinical psychologists, optometrists, chiropractors, and osteopathic practitioners within the scope of their practice as defined by State law." See also *Paul Foster*, 56 ECAB 208, 212 n.12 (2004); *Joseph N. Fassi*, 42 ECAB 677 (1991); *Barbara J. Williams*, 40 ECAB 649 (1989).

<sup>11</sup> See *supra* notes 3 to 7.

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 she sustained carpal tunnel syndrome in the performance of duty causally related to factors of her federal employment.

**ORDER**

**IT IS HEREBY ORDERED THAT** the May 8, 2013 decision of the Office of Workers' Compensation Programs is affirmed.

Issued: May 20, 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