

equipment, and lifting, and tossing heavy packages. She stopped work on February 5, 2014. Appellant resigned from the employing establishment on April 25, 2014.

With her claim, appellant submitted a supplemental statement dated February 14, 2014 and a February 19, 2014 statement from the employing establishment. In her supplemental statement, she explained that she went to the doctor on January 31, 2014 for pain in her right hand and arm with numbness in her fingers at night. The physician told appellant that she had carpal tunnel syndrome in the right hand due to overuse activity at work. The physician faxed paperwork to the employing establishment recommending that appellant not push, pull, or throw any packages over 10 pounds. Appellant was then told by her supervisor to work the cage, but on February 5, 2014 she was told not to come in because there were too many individuals working the cage. She was placed on sick leave on February 6, 2014 and told to inform the employing establishment when she could return to full duty.

In the February 19, 2014 statement, the employing establishment's customer services manager noted that appellant was placed on sick leave after medical documentation was received stating that she could not push, pull, or throw items greater than 10 pounds. She also noted that on February 19, 2014 she gave appellant a Form CA-1 to fill out, and then realized it should have been a Form CA-2 for occupational disease. When the manager tried to give appellant the Form CA-2 appellant stated that she was told to complete a Form CA-1, and that appellant then refused to accept the Form CA-2.

In a report of a January 31, 2014 visit to Riverside Mercury West, an assessment of right carpal tunnel syndrome, possibly secondary to overuse activity at work was provided. The report is devoid of information as to who provided the assessment.

In a February 3, 2014 note, Dr. Sohini Majumdar, a Board-certified family practitioner, recommended that appellant not push, pull, or throw items or packages greater than 10 pounds due to her current symptoms.

On February 24, 2014 OWCP advised appellant of the deficiencies in her claim and requested that she submit additional factual and medical information. Appellant was afforded 30 days to submit the requested information.

In response, OWCP received a March 7, 2014 personal statement, and medical documents from Riverside Mercury West. In a March 20, 2014 note, Dr. Majumdar advised that appellant was seen on January 31, 2014 for right hand symptoms that had been going on for two months. Onset of the symptoms by history appears to have been November 2013. Diagnosis was right hand carpal tunnel syndrome secondary to over-use, including lifting, and transferring heavy materials repeatedly. The January 31, 2014 office visit from Dr. Majumdar was included, which contained a history of right hand pain of two-month duration and notes that she works at the employing establishment for six months doing heavy lifting, transferring heavy materials, and boxes. No prior right hand symptoms were noted. An assessment of right carpal tunnel syndrome, possible secondary to overuse activity at work was provided.

By decision dated April 8, 2014, OWCP denied the claim on the grounds causal relationship was not established.

LEGAL PRECEDENT

An employee seeking benefits under FECA has the burden of proof to establish 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 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.² 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.³

To determine whether a federal employee has sustained a traumatic injury in the performance of duty, it must first be determined whether a fact of injury has been established. A fact of injury determination is based on two elements. First, the employee must submit sufficient evidence to establish that she actually experienced the employment incident at the time, place, and in the manner alleged. Second, the employee must submit sufficient evidence, generally only in the form of medical evidence, to establish that the employment incident caused a personal injury. An employee may establish that the employment incident occurred as alleged but fail to show that his or her condition relates to the employment incident.⁴

Whether an employee sustained an injury in the performance of duty requires the submission of rationalized medical opinion evidence.⁵ 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.⁶ The weight of the medical evidence is determined by its reliability, its probative value, its convincing quality, the care of analysis manifested, and the medical rationale expressed in support of the physician's opinion.⁷ Neither the mere fact that a disease or condition manifests itself during a period of employment nor the belief that the disease or condition was caused or aggravated by employment factors or incidents is sufficient to establish causal relationship.⁸

ANALYSIS

OWCP accepted that appellant performed work duties on January 21, 2014 which included pulling and pushing heavy equipment, and tossing heavy packages. However it denied

² C.S., Docket No. 08-1585 (issued March 3, 2009); *Bonnie A. Contreras*, 57 ECAB 364 (2006).

³ *S.P.*, 59 ECAB 184 (2007); *Joe D. Cameron*, 41 ECAB 153 (1989).

⁴ See *Shirley A. Temple*, 48 ECAB 404, 407 (1997); *John J. Carlone* 41 ECAB 354, 356-57 (1989).

⁵ See *J.Z.*, 58 ECAB 529, 531 (2007); *Paul E. Thams*, 56 ECAB 503, 511 (2005).

⁶ *I.J.*, 59 ECAB 408, 415 (2008); *Victor J. Woodhams*, 41 ECAB 345, 352 (1989).

⁷ *James Mack*, 43 ECAB 321, 329 (1991).

⁸ *Dennis M. Mascarenas*, 49 ECAB 215 (1997).

her claim on the grounds that the medical evidence failed to establish a causal relationship between her reported activities and the diagnosed right carpal tunnel syndrome.

Dr. Majumdar evaluated appellant on January 31, 2014. She noted that appellant presented with a history of right hand pain of two-month duration and that she worked at the employing establishment for six months doing heavy lifting, transferring heavy materials, and boxes. No prior right hand symptoms were noted. An assessment of right carpal tunnel syndrome, possible secondary to overuse activity at work, was provided. The Board has held, however, that an opinion that a condition is causally related because the employee was asymptomatic before the injury is insufficient, without sufficient rationale, to establish causal relationship.⁹ In this case, Dr. Majumdar has provided no medical rationale or explanation sufficient to establish that the work conditions caused or contributed to appellant's diagnosed right-sided carpal tunnel condition. Furthermore, her opinion that it was possible that appellant's right carpal tunnel syndrome was possibly secondary to overuse activity at work is speculative or equivocal in character and is of diminished probative value.¹⁰

The Board also notes that appellant claimed that she was injured on January 21, 2014, but Dr. Majumdar noted a history of right hand pain of two months duration without explaining how her present symptoms are causally related to work activity that had been ongoing for two months. In her February 3 and March 20, 2014 notes, Dr. Majumdar fails to provide any medical rationale as to how right hand carpal tunnel syndrome can develop secondary to over-use, including lifting, and transferring heavy materials repeatedly as performed by appellant in a specific incident. The Board has found that a physician must provide a narrative description of the identified employment incident and a reasoned opinion on whether the employment incident described caused or contributed to appellant's diagnosed medical condition.¹¹ For these reasons, the Board finds that Dr. Majumdar's reports are insufficient to establish appellant's claim.

While Dr. Majumdar's reports suggest a history more consistent with an injury occurring over time, rather than in one shift,¹² the employing establishment's customer service manager has indicated that appellant refused to complete a claim for occupational disease.¹³

In a report of a January 31, 2014 visit to Riverside Mercury West, an assessment of right carpal tunnel syndrome, possibly secondary to overuse activity at work, was provided. The report is devoid of information as to who provided the assessment. The Board finds that this report is insufficient to establish appellant's claim as medical reports lacking proper identification do not constitute probative medical evidence.¹⁴

⁹ *T.M.*, Docket No. 08-975 (issued February 6, 2009); *Michael S. Mina*, 57 ECAB 379 (2006).

¹⁰ *D.D.*, 57 ECAB 734, 738 (2006); *Kathy A. Kelley*, 55 ECAB 206 (2004).

¹¹ *John W. Montoya*, 54 ECAB 306 (2003).

¹² See the definition of occupational disease provided in 20 C.F.R. § 10.5(q): "Occupational disease or Illness means a condition produced by the work environment over a period of time longer than a single workday or shift."

¹³ Appellant may submit a Form CA-2 and supporting medical evidence.

¹⁴ See *D.D.*, *supra* note 10.

The Board finds that the medical evidence of record does not establish that appellant sustained a medical condition causally related to her federal employment on January 21, 2014. An award of compensation may not be based on surmise, conjecture nor speculation. Neither the fact that appellant's condition became apparent during a period of employment or the belief that her condition was caused, precipitated, or aggravated by her employment, is sufficient to establish causal relationship.¹⁵ Causal relationship must be established by rationalized medical opinion evidence. As noted, the medical evidence is insufficient to establish appellant's claim. Consequently, OWCP properly found that she did not meet her burden of proof in establishing her claim.

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.

¹⁵ *Supra* note 9.

CONCLUSION

The Board finds that appellant did not meet her burden of proof to establish that she sustained carpal tunnel syndrome of the right hand on January 21, 2014.

ORDER

IT IS HEREBY ORDERED THAT the April 8, 2014 decision of the Office of Workers' Compensation Programs is affirmed.

Issued: February 2, 2015
Washington, DC

Christopher J. Godfrey, Chief Judge
Employees' Compensation Appeals Board

Patricia Howard Fitzgerald, Judge
Employees' Compensation Appeals Board

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