

which indicated that he had sustained a right-sided hernia on March 15, 2012 and that he was scheduled to undergo hernia surgery on April 10, 2012.

In a September 10, 2012 report, Dr. James Roche, Board-certified in general surgery, diagnosed a hernia which was improving but was aggravated by lifting weights. He stated that appellant had an obvious inguinal hernia in addition to an increased symptomatic umbilical hernia. On September 24, 2012 Dr. Roche performed surgery to repair bilateral inguinal, and umbilical hernias. He asserted in an October 1, 2012 report that appellant's condition had improved following his September 24, 2012 hernia surgery.

On October 9, 2012 appellant filed a Form CA-7, claiming compensation for wage loss from September 24 to October 5, 2012.

By decision dated November 21, 2012, OWCP denied appellant's claim, finding that he failed to submit sufficient medical evidence in support of his claim that he sustained a right-sided inguinal hernia in the performance of duty on March 15, 2012. By decision dated February 27, 2013, it denied his request for a review of the written record as untimely.

In a June 21, 2013 decision,² the Board affirmed OWCP's November 21, 2012 and February 27, 2013 decisions. The complete facts of this case are set forth in the Board's June 21, 2013 decision and are herein incorporated by reference.

In a report dated November 18, 2013, Dr. Roche stated that appellant sustained an injury at work on March 15, 2012, after which he developed symptoms consistent with an inguinal hernia. He asserted that it was well known and accepted that an inguinal hernia frequently develops as a work-related injury, secondary to an increased strain of the inguinal canal. Dr. Roche opined that the fact that appellant began having symptoms at the time of his injury which persisted until he underwent surgical repair indicated that this was a work-related injury. In light of these facts, he opined with a high-degree of medical certainty that appellant's inguinal hernia developed as a direct result of his March 15, 2012 work injury.

By letter dated November 20, 2013, received by OWCP on November 21, 2013, appellant's attorney requested reconsideration of the November 21, 2012 decision. He contended that Dr. Roche's November 18, 2013 report constituted medical evidence sufficient to establish that appellant's inguinal hernia was causally related to his March 15, 2012 work incident and was, therefore, sustained in the performance of duty.

By letter dated May 1, 2014, received by OWCP on May 6, 2014, appellant's attorney resubmitted appellant's November 20, 2013 request for reconsideration.

By decision dated August 4, 2014, OWCP denied modification of the November 21, 2013 decision finding the medical evidence insufficient to establish that the diagnosed hernia was caused or aggravated by the March 15, 2012 work injury as claimed.

² Docket No. 13-926 (issued June 21, 2013).

LEGAL PRECEDENT

An employee seeking benefits under FECA³ has the burden of establishing that 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.⁴ 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.⁵

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. First, the employee must submit sufficient evidence to establish that he or she actually experienced the employment incident at the time, place, and in the manner alleged.⁶ 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.⁷

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.⁸

An award of compensation may not be based on surmise, conjecture or speculation. Neither, the fact that appellant’s condition became apparent during a period of employment nor the belief that his condition was caused, precipitated, or aggravated by his employment is sufficient to establish causal relationship.⁹ Causal relationship must be established by rationalized medical opinion evidence and appellant failed to submit such evidence.

ANALYSIS

It is uncontested that appellant experienced right groin pain while pulling a two-ton overhead crane on March 15, 2012. The question of whether an employment incident caused a personal injury can only be established by probative medical evidence.¹⁰ The Board finds that appellant has not submitted rationalized, probative medical evidence sufficient to establish that the March 15, 2012 employment incident caused the claimed injury.

³ 5 U.S.C. §§ 8101-8193.

⁴ *Joe D. Cameron*, 41 ECAB 153 (1989); *Elaine Pendleton*, 40 ECAB 1143 (1989).

⁵ *Victor J. Woodhams*, 41 ECAB 345 (1989).

⁶ *John J. Carlone*, 41 ECAB 354 (1989).

⁷ *Id.* For a definition of the term “injury,” see 20 C.F.R. § 10.5(e).

⁸ *See Joe T. Williams*, 44 ECAB 518, 521 (1993).

⁹ *Id.*

¹⁰ *Supra* note 5.

Dr. Roche stated in his November 18, 2013 report that, after appellant's March 15, 2012 work incident, he began to develop symptoms which were consistent with an inguinal hernia. He advised that an inguinal hernia typically develops as a work-related injury, secondary to an increased strain of the inguinal canal. Dr. Roche believed with a high degree of certainty that appellant's injury developed as a direct result of his March 15, 2012 work injury because he began having symptoms at the time of his injury which persisted until he underwent surgery. He did not, however, provide a probative, rationalized opinion regarding whether the March 15, 2012 work incident caused the inguinal hernia. The weight of medical opinion is determined by the opportunity for thoroughness of examination, the accuracy, and completeness of physician's knowledge of the facts of the case, the medical history provided, the care of analysis manifested, and the medical rationale expressed in support of stated conclusions.¹¹ The Board notes initially that Dr. Roche did not provide a description of the accepted employment incident. Furthermore, while Dr. Roche presented a diagnosis of inguinal hernia, he did not sufficiently address how this condition was causally related to the March 15, 2012 work incident. His report did not explain how medically appellant would have sustained an inguinal hernia while pulling a two-ton crane on March 15, 2012. Thus, Dr. Roche's opinion regarding causal relationship is of limited probative value in that he did not provide adequate medical rationale in support of his conclusions.¹²

OWCP advised appellant of the evidence required to establish his claim; however, he failed to submit such evidence. Appellant did not provide a medical opinion which describes or explains the medical process through which the March 15, 2012 work event would have caused the claimed hernia condition. Accordingly, he did not establish that he sustained an inguinal hernia in the performance of duty. OWCP properly denied appellant's claim for compensation.

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 failed to establish that he sustained an inguinal hernia in the performance of duty on March 15, 2012.

¹¹ See *Anna C. Leanza*, 48 ECAB 115 (1996).

¹² *William C. Thomas*, 45 ECAB 591 (1994).

ORDER

IT IS HEREBY ORDERED THAT the August 4, 2014 decision of the Office of Workers' Compensation Programs is affirmed.

Issued: January 22, 2015
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