



condition to excessive work-related walking over an extended number of years. The employing establishment indicated that appellant stopped work on November 19, 2015, and first reported her condition on December 10, 2015.

In a November 20, 2015 report, Dr. Jeffrey Kirschman, Board-certified in family medicine and occupational medicine, indicated that appellant was being treated for bilateral knee osteoarthritis, which was chronic, severe, and permanent in nature. He requested a reasonable accommodation and recommended decreased time weight bearing on both knees, especially with walking distances. Dr. Kirschman also recommended the use of a scooter, as necessary.

In a January 5, 2016 report, Dr. Kirschman diagnosed severe bilateral knee osteoarthritis. He indicated that appellant could return to work on November 21, 2015 with restrictions, which included intermittent sitting (8 hours), standing (3 hours), walking (3 hours), squatting (1 hour), twisting (1 hour), and kneeling (½ hour). Dr. Kirschman precluded climbing on ladders and requested that appellant be permitted to use a scooter for transport within the employing establishment.

In an undated statement received on April 21, 2016, appellant indicated that sometime in 2006 she began experiencing pain in her knees, which progressed over about two years. She explained that she started on a detail in a position of in-plant support in which she monitored inbound/outbound dispatches on the east dock, which later turned to a permanent assignment. Her position required walking and monitoring dispatches on the north and south ends of the dock and being exposed to cold temperatures. Appellant advised that, as the years progressed, she was assigned more monitoring duties which required more walking. She also noted that, in October 2015, management assigned her to monitor the west dock for airmail, which was a longer walk. Appellant explained that she left work on November 19, 2015 because she could no longer endure the pain.

In an April 25, 2016 letter, the employing establishment advised OWCP that it had denied appellant's request for a scooter. The employing establishment further noted that, while appellant had been diagnosed with bilateral knee osteoarthritis, the medical evidence did not establish that the diagnosed condition was causally related to her employment.

By letter dated April 27, 2016, OWCP informed appellant of the type of evidence needed to support her claim and requested that she submit such evidence within 30 days. It particularly requested that appellant have her physician provide an opinion, supported by a medical explanation, as to how work activities caused or aggravated her claimed bilateral knee condition.

Both appellant and the employing establishment submitted additional information regarding appellant's job duties and employment history. However, OWCP did not receive any additional medical evidence regarding appellant's diagnosed bilateral knee condition.

On May 12, 2016 appellant noted that she engaged in excessive walking and standing on the east and west docks as part of her duties. She advised that she observed the mail and counted mail. Appellant explained that her tour began at 11:00 p.m., and she would go directly to the dock and remain there until the last dispatch around 2:30 -- 3:00 a.m., approximately four hours. Sunday nights were different in that appellant was on the dock from 11:00 p.m. until

approximately 1:30 a.m. Appellant further explained that she walked the workroom floor in each area to monitor any discrepancies and counted color-coded, standard delayed mail. She also indicated that there were no outside activities because she was unable to walk without the assistance of a walker. Appellant also advised that she was in constant pain and her medications caused drowsiness, which limited her driving.

In a letter dated May 11, 2016, J.K., a manager of the employing establishment, provided a description of appellant's job duties and physical requirements. She also noted that appellant was originally a carrier who was injured and then transferred to the clerk craft and placed on tour 1. J.K. also noted that a hearing was held to determine if appellant was capable of fulfilling the requirements of her position. She further noted that appellant always used the utility cart to move her supplies around.

Appellant retired effective June 30, 2016.

By decision dated July 18, 2016, OWCP denied appellant's claim because the evidence of record was insufficient to establish that her diagnosed medical condition was causally related to factors of her accepted federal employment.

### **LEGAL PRECEDENT**

A claimant seeking benefits under FECA has the burden of proof to establish 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.<sup>2</sup>

To establish that an injury was sustained in the performance of duty in an occupational disease claim, 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 identified employment factors.<sup>3</sup>

### **ANALYSIS**

Appellant alleged that she developed a bilateral knee condition due to walking and standing as part of her work as a data collection technician. OWCP accepted that appellant

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<sup>2</sup> 20 C.F.R. § 10.115(e), (f); *see Jacquelyn L. Oliver*, 48 ECAB 232, 235-36 (1996). Causal relationship is a medical question, which generally requires rationalized medical opinion evidence to resolve the issue. *See Robert G. Morris*, 48 ECAB 238 (1996). A physician's opinion on whether there is a causal relationship between the diagnosed condition and the implicated employment factors must be based on a complete factual and medical background. *Victor J. Woodhams*, 41 ECAB 345, 352 (1989). Additionally, the physician's 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. *Id.*

<sup>3</sup> *Victor J. Woodhams, id.*

engaged in walking and standing at work as part of her duties. However, the Board finds that appellant failed to submit sufficient medical evidence to establish that her knee condition was caused or aggravated by these activities or any other specific factors of her federal employment.

In his November 20, 2015 and January 5, 2016 reports, Dr. Kirschman diagnosed bilateral knee osteoarthritis and imposed work restrictions, which included the use of a scooter. However, he did not indicate that appellant's work activities as a data collection technician either caused or aggravated her bilateral knee condition. 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.<sup>4</sup> Consequently, Dr. Kirschman's reports are of limited probative value.

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.<sup>5</sup> Neither the fact that the condition became apparent during a period of employment, nor the belief that the condition was caused or aggravated by employment factors or incidents is sufficient to establish causal relationship.<sup>6</sup>

As there is no reasoned medical evidence explaining how appellant's employment duties either caused or aggravated her bilateral knee osteoarthritis, appellant has failed to establish that she sustained an injury in the performance of duty.

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 failed to establish an injury causally related to factors of her federal employment.

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<sup>4</sup> *S.E.*, Docket No. 08-2214 (issued May 6, 2009).

<sup>5</sup> *See Joe T. Williams*, 44 ECAB 518, 521 (1993).

<sup>6</sup> *Id.*

**ORDER**

**IT IS HEREBY ORDERED THAT** the July 18, 2016 decision of the Office of Workers' Compensation Programs is affirmed.

Issued: December 9, 2016  
Washington, DC

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

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

Valerie D. Evans-Harrell, Alternate Judge  
Employees' Compensation Appeals Board