

pulled her arms which resulted in pain in both shoulders, more on the left. Appellant notified her supervisor on October 9, 2015.

By letter dated October 14, 2015, the employing establishment controverted the claim contending that appellant failed to establish fact of injury.

On October 20, 2015 OWCP informed appellant that the evidence of record was insufficient to support her claim. Appellant was advised as to the medical and factual evidence required to support her claim and was afforded 30 days to provide the requested evidence. No further evidence was received pursuant to this request.

By decision dated November 27, 2015, OWCP denied appellant's claim finding that the evidence of record failed to establish that she sustained an injury because she did not submit any medical evidence containing a medical diagnosis in connection with the accepted March 25, 2014 employment incident.

On December 28, 2015 appellant requested review of the written record before an OWCP hearing representative.

In a December 29, 2015 witness statement, K.H., a customer service representative, reported that on March 25, 2014 appellant called the office to report an accident after she injured her left shoulder while trying to keep her LLV door from shutting/slamming. K.H. noted that the accident was reported immediately and appellant was experiencing shoulder pain, but declined to file a claim on that date. She further noted that all information and details were consistent with the injury claim.

In an undated narrative statement, appellant explained that she notified her postmaster minutes after the alleged employment injury occurred, but did not seek medical treatment from her physician because she was hoping the pain would eventually subside. When the pain continued to worsen, she sought medical treatment on October 12, 2015. Appellant noted that her physician provided findings pertaining to both a left shoulder and left hand condition, but that the left hand condition was unrelated to her current injury.

In an October 12, 2015 medical report, Dr. Scott Smith, a Board-certified orthopedic surgeon, reported that appellant sought treatment for complaints of left shoulder pain. Appellant reported a work injury having occurred at the employing establishment approximately two years prior when she was trying to pull open the door of a mail truck and injured her left shoulder. She did not seek treatment at the time of the injury and experienced intermittent pain since then. Dr. Smith provided findings on physical examination and reviewed x-rays of the left shoulder which revealed os acromiale with resulting type 3 morphology. He diagnosed impingement of the left shoulder with os acromiale.

By decision dated June 16, 2016, OWCP's hearing representative affirmed the November 27, 2015 decision finding that the evidence of record failed to establish a firm medical diagnosis which could be reasonably attributed to the accepted March 25, 2014 employment incident.

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 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

In order to determine whether an employee actually sustained an injury in the performance of duty, OWCP begins with an analysis of whether fact of injury has been established. Generally, fact of injury consists of two components which must be considered in conjunction with one another. The first component to be established is that the employee actually experienced the employment incident which is alleged to have occurred.⁴ The second component is whether the employment incident caused a personal injury and generally can be established only by medical evidence.

To establish a causal relationship between the condition, as well as any attendant disability claimed and the employment event or incident, the employee must submit rationalized medical opinion evidence based on a complete factual and medical background, supporting such a causal relationship.⁵ The opinion of the physician must be based on 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 claimant. This medical opinion must include an accurate history of the employee’s employment injury and must explain how the condition is related to the injury. The weight of 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.⁶

ANALYSIS

OWCP has accepted that the March 25, 2014 incident occurred as alleged. The Board finds that appellant failed to establish a traumatic injury causally related to the accepted March 25, 2014 employment incident.⁷

In an October 12, 2015 report, Dr. Smith provided findings on physical examination, reviewed diagnostic testing, and diagnosed left shoulder impingement with os acromiale. In its June 16, 2016 decision, OWCP found insufficient evidence to establish fact of injury. The issue

² Gary J. Watling, 52 ECAB 278 (2001); Elaine Pendleton, 40 ECAB 1143, 1154 (1989).

³ Michael E. Smith, 50 ECAB 313 (1999).

⁴ Elaine Pendleton, 40 ECAB 1143 (1989).

⁵ See 20 C.F.R. § 10.110(a); John M. Tornello, 35 ECAB 234 (1983).

⁶ James Mack, 43 ECAB 321 (1991).

⁷ See Robert Broome, 55 ECAB 339 (2004).

on appeal is whether appellant has established a traumatic injury causally related to the March 25, 2014 incident. Thus, appellant must submit rationalized medical evidence to establish her claim.

While Dr. Smith's report established a sufficient diagnosis of left shoulder impingement with os acromiale, he failed to provide any opinion regarding the cause of appellant's condition. He only generally repeated appellant's allegations pertaining to the employment incident. Such generalized statements do not establish causal relationship because they merely repeat appellant's allegations and are unsupported by adequate medical rationale explaining how this physical activity actually caused the diagnosed conditions.⁸ Moreover, Dr. Smith failed to provide a detailed medical history or discuss whether there was any prior treatment for the left shoulder.⁹ The Board notes that appellant did not seek treatment for her injury until more than 18 months after the March 25, 2014 employment incident. A well-rationalized opinion is particularly warranted given the delay in treatment as it remains unclear if appellant's injury was caused by the March 25, 2014 work incident, was a preexisting condition, or was a nonoccupational injury.¹⁰ The Board has held that medical evidence that fails to offer a rationalized opinion regarding the cause of an employee's condition is of limited probative value on the issue of causal relationship.¹¹ Thus, Dr. Smith's report is of limited probative value and insufficient to meet appellant's burden of proof.¹²

The Board has held that the mere fact that a condition manifests itself during a period of employment does not raise an inference of causal relation.¹³ An award of compensation may not be based on surmise, conjecture, speculation, or on the employee's own belief of causal relation.¹⁴ In the instant case, appellant has not submitted sufficient medical evidence to establish a causal relationship between the March 25, 2014 employment incident and an injury. Any medical opinion evidence appellant may submit to support her claim should reflect a correct history and offer a medically sound explanation by the physician of how the specific employment incident caused a traumatic injury.¹⁵ As Dr. Smith's report does not meet that standard, appellant has failed to meet her burden of proof.¹⁶

⁸ *K.W.*, Docket No. 10-98 (issued September 10, 2010).

⁹ *Supra* note 6.

¹⁰ *See J.C.*, Docket No. 11-1980 (issued July 18, 2012).

¹¹ *C.B.*, Docket No. 09-2027 (issued May 12, 2010); *S.E.*, Docket No. 08-2214 (issued May 6, 2009).

¹² *See L.M.*, Docket No. 14-973 (issued August 25, 2014); *R.G.*, Docket No. 14-113 (issued April 25, 2014); *K.M.*, Docket No. 13-1459 (issued December 5, 2013); *A.J.*, Docket No. 12-548 (issued November 16, 2012).

¹³ *Daniel O. Vasquez*, 57 ECAB 559 (2006).

¹⁴ *D.D.*, 57 ECAB 734 (2006).

¹⁵ *T.G.*, Docket No. 14-751 (issued October 20, 2014).

¹⁶ *J.M.*, Docket No. 15-1174 (issued August 18, 2015).

Appellant may submit additional evidence, together with a written request for reconsideration, to OWCP within one year of the Board's merit decision, pursuant to 5 U.S.C. § 8128(a) and 20 C.F.R. §§ 10.605 and 10.607.

CONCLUSION

The Board finds that appellant did not meet her burden of proof to establish a traumatic injury causally related to the March 25, 2014 employment incident.

ORDER

IT IS HEREBY ORDERED THAT the June 16, 2016 decision of the Office of Workers' Compensation Programs is affirmed.

Issued: August 28, 2017
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