



The employing establishment controverted appellant's claim on May 5, 2016 asserting that she was initially unable to pinpoint a location or time of her injury. It further noted that appellant filed her claim after there was a discussion with her supervisor regarding her job performance. A coworker submitted a witness statement dated May 5, 2016 and reported that appellant approached the postmaster and asked him to look at her, extending her arms. The postmaster asked, "Look at what?" Appellant repeated the directive to look, and the postmaster asked if she needed medical attention, but appellant declined.

On May 5, 2016 the employing establishment provided appellant with an authorization for examination and/or treatment (Form CA-16) and described her condition as a contusion or bruise of the lower arm and forearm. Dr. John Yu, an orthopedic surgeon, examined appellant on May 5, 2016 and described her condition as bilateral wrist and forearm pain after lifting a parcel at work on May 3, 2016. He checked a box marked "yes" to indicate that he believed that appellant's condition was caused or aggravated by her employment activity. Dr. Yu provided work restrictions.

In a letter dated May 12, 2016, OWCP requested additional factual and medical evidence in support of appellant's traumatic injury claim. It noted that appellant had not provided medical evidence that contained a diagnosis.

In a note dated May 5, 2016, Dr. Yu indicated that appellant reported bilateral wrist pain since lifting a parcel weighing between 10 and 20 pounds at work on May 3, 2016. He diagnosed contusion of the right forearm and bilateral strains of the forearms. Dr. Yu found that appellant was partially disabled. On May 18, 2016 he repeated his history, findings, and conclusions and recommended electrodiagnostic testing.

Appellant completed a narrative statement on May 24, 2016 and alleged that she reported her injury to the postmaster on May 3, 2016. She asserted that she asked if she should file an injury report, and the postmaster instructed her that an injury report was only necessary if she intended to seek medical attention. Appellant alleged that her right wrist and arm were swollen and bruised on May 3, 2016. On May 5, 2016 she informed her supervisor that she was experiencing pain in her wrists and forearms as well as tingling in the fingers on both hands. Appellant sought medical attention on that date.

The employing establishment provided a document signed by appellant on May 4, 2016 indicating that she refused medical attention due to her May 3, 2016 employment injury. Appellant listed her injury as right wrist and forearm swelling and bruising.

In a note dated June 2, 2016, Dr. Rahman Pourmand, a Board-certified neurologist, described appellant's history of lifting a parcel at work on May 3, 2016 and developing pain of both wrists with tingling. He recommended electrodiagnostic testing.

Appellant underwent electromyography (EMG) and nerve conduction velocity (NCV) studies on June 3, 2016. These tests demonstrated evidence of bilateral median neuropathy at the wrists, moderate on the right and mild on the left, consistent with carpal tunnel syndrome.

On June 7, 2016 Dr. Yu examined appellant's bilateral wrists/forearms and noted that she sustained a work-related injury on May 3, 2016. He diagnosed bilateral carpal tunnel syndrome.

In a decision dated June 16, 2016, OWCP denied appellant's traumatic injury claim finding that she had not established causal relationship between her diagnosed conditions and her accepted employment incident. On July 12, 2016 appellant requested that OWCP's Branch of Hearings and Review perform a review of the written record.

In a letter dated July 12, 2016, appellant requested that OWCP's Branch of Hearings and Review consider addendum notes from Dr. Yu and Dr. Pourmand. She also resubmitted the medical evidence of record. Dr. Yu submitted two addendums to his May 6 and 18, and June 7, 2016 reports. On June 27, 2016 he noted, "The bilateral forearm/hand work injury may have contributed to diagnosis. Patient's job duties involve repetitive lifting of heavy parcels." In an addendum note dated July 6, 2016, Dr. Yu opined, "Heavy parcel lifting caused a strain in patient's wrist and forearm and may have aggravated the carpal tunnel syndrome."

On July 6, 2016 Dr. Pourmand also provided an addendum to his June 2, 2016 report. He advised, "After reviewing [NCV] studies and EMG which showed bilateral carpal tunnel syndrome, I believe her carpal tunnel syndrome is exacerbated by repetitive movements of the hand at work and lifting heavy object recently as indicated in history."

By decision dated January 23, 2017, an OWCP hearing representative reviewed the written record, including the addendum reports submitted by appellant. She found that the medical evidence of record did not establish causal relationship between appellant's diagnosed bilateral wrist condition and her May 3, 2016 employment incident.

### **LEGAL PRECEDENT**

An employee seeking benefits under FECA<sup>2</sup> 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 the fact that the individual is an "employee of the United States" within the meaning of FECA and that he or she filed the claim within the applicable time limitation.<sup>3</sup> The employee must also establish that he or she sustained an injury in the performance of duty as alleged, and that his or her disability from work, if any was causally related to the employment injury.<sup>4</sup>

OWCP defines a traumatic injury as, "[A] condition of the body caused by a specific event or incident, or series of events or incidents, within a single workday or shift. Such condition must be caused by external force, including stress or strain which is identifiable as to time and place of occurrence and member or function of the body affected."<sup>5</sup> To determine whether a federal employee has sustained a traumatic injury in the performance of duty, it must first be determined whether fact of injury has been established. First the employee must submit sufficient evidence to establish that she actually experienced the employment incident at the

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<sup>2</sup> *Supra* note 1.

<sup>3</sup> *R.C.*, 59 ECAB 427 (2008).

<sup>4</sup> *Id.*, *Elaine Pendleton*, 40 ECAB 1142, 1145 (1989).

<sup>5</sup> 20 C.F.R. § 10.5(ee).

time, place, and in the manner alleged.<sup>6</sup> 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.<sup>7</sup>

Causal relationship is a medical issue and the medical evidence required to establish causal relationship is rationalized medical evidence.<sup>8</sup> The opinion of the physician must be based on a complete factual and medical background of the claimant, 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>9</sup> 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.<sup>10</sup>

### ANALYSIS

The Board finds that appellant has failed to meet her burden of proof to establish a traumatic injury causally related to a May 3, 2016 employment incident.

Appellant alleged that she sustained right wrist contusions, bilateral wrist strains, and aggravation of carpal tunnel syndrome due to her accepted May 3, 2016 employment incident in which she lifted a heavy parcel while working. In support of her claim, she submitted a series of reports from Dr. Yu dated May 5 and 18, and June 7, 2016. In the May 5, 2016 form report, Dr. Yu diagnosed pain. The Board has held that the mere diagnosis of “pain” does not constitute the basis for payment of compensation.<sup>11</sup> In a narrative report of the same date, Dr. Yu noted appellant’s history of lifting a parcel weighing between 10 and 20 pounds at work on May 3, 2016. He diagnosed contusion of the right forearm and bilateral strains of the forearms. Dr. Yu failed to provide an opinion on the cause of appellant’s diagnosed forearm conditions and the May 5, 2016 note is insufficient to establish causal relationship. His report of May 18, 2016 was submitted, however, it repeated the findings of his previous May 5, 2016 note. The Board has found the reports without an opinion or causation are of limited probative value.<sup>12</sup> On June 7, 2016 Dr. Yu diagnosed bilateral carpal tunnel syndrome and noted that she sustained a work-related injury on May 3, 2016. He did not provide any medical reasoning explaining how appellant’s May 3, 2016 employment incident resulted in her diagnosed bilateral carpal tunnel syndrome. A medical opinion that states a conclusion, but does not offer any rationalized

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<sup>6</sup> *John J. Carlone*, 41 ECAB 354 (1989).

<sup>7</sup> *J.Z.*, 58 ECAB 529 (2007).

<sup>8</sup> *Jacqueline M. Nixon-Steward*, 52 ECAB 140 (2000).

<sup>9</sup> *Leslie C. Moore*, 52 ECAB 132 (2000); *Gary L. Fowler*, 45 ECAB 365 (1994).

<sup>10</sup> *Dennis M. Mascarenas*, 49 ECAB 215 (1997).

<sup>11</sup> *Robert Broome*, 55 ECAB 339 (2004).

<sup>12</sup> *D.R.*, Docket No. 16-0528 (issued August 24, 2016).

medical explanation regarding the cause of an employee's condition is of limited probative value on the issue of causal relationship.<sup>13</sup>

Dr. Yu provided addenda to his reports dated June 27 and July 6, 2016. He noted, "The bilateral forearm/hand work injury may have contributed to diagnosis." On July 6, 2016 Dr. Yu opined, "Heavy parcel lifting caused a strain in patient's wrist and forearm and may have aggravated the carpal tunnel syndrome." He failed to provide an explanation of how appellant's May 3, 2016 employment incident would have caused or contributed to her diagnosed bilateral carpal tunnel syndrome. Furthermore, Dr. Yu's opinions are not expressed to reasonable degree of medical certainty, but rather are speculative in nature and, therefore, cannot establish causal relationship.<sup>14</sup>

Appellant also submitted a report from Dr. Pourmand dated June 2, 2016 noting appellant's history of lifting a parcel on May 3, 2016 at work and developing pain of both wrists with tingling. As noted above, the mere diagnosis of "pain" does not constitute the basis for payment of compensation.<sup>15</sup> In his July 6, 2016 addendum, Dr. Pourmand opined that appellant's carpal tunnel syndrome was exacerbated by repetitive movements of the hand at work and lifting a heavy object. The fact that work activities produced pain or discomfort revelatory of an underlying condition does not raise an inference of an employment relationship.<sup>16</sup> Dr. Pourmand did not provide any medical reasoning in support of his opinion and, as he merely provided a conclusion, this addendum is insufficient to establish causal relationship.<sup>17</sup> Therefore, the Board finds that appellant failed to meet her burden of proof.<sup>18</sup>

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 meet her burden of proof to establish a traumatic injury causally related to a May 3, 2016 employment incident.

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<sup>13</sup> *C.B.*, Docket No. 09-2027 (issued May 12, 2010); *A.D.*, 58 ECAB 149 (2006).

<sup>14</sup> *Supra* note 12.

<sup>15</sup> *Supra* note 11.

<sup>16</sup> *N.T.*, Docket No. 14-0390 (issued December 18, 2014).

<sup>17</sup> *Supra* note 12.

<sup>18</sup> When the employing establishment properly executes a Form CA-16 which authorizes medical treatment as a result of an employee's claim for an employment-related injury, the Form CA-16 creates a contractual obligation, which does not involve the employee directly, to pay for the cost of the examination or treatment regardless of the action taken on the claim. The period for which treatment is authorized by a Form CA-16 is limited to 60 days from the date of issuance, unless terminated earlier by OWCP. See C.F.R. § 10.300(c); *Tracy P. Spillane*, 54 ECAB 608, 610 (2003).

**ORDER**

**IT IS HEREBY ORDERED THAT** the January 23, 2017 decision of the Office of Workers' Compensation Programs is affirmed.

Issued: August 10, 2017  
Washington, DC

Patricia H. Fitzgerald, Deputy Chief Judge  
Employees' Compensation Appeals Board

Colleen Duffy Kiko, Judge  
Employees' Compensation Appeals Board

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