



while in the performance of duty. He stated that he sustained a heat-related injury resulting in vomiting and cramping. The employing establishment did not indicate that appellant stopped work.

Appellant submitted a January 30, 2016 ambulance bill from Ajo Ambulance, Inc. in the amount of \$1,733.89.

The employing establishment submitted an undated statement indicating that appellant was seen and assessed by an ambulance, but was not transported, and was currently on full-duty status.

In an April 7, 2016 letter, OWCP indicated that when appellant's claim was received it appeared to be a minor injury that resulted in minimal or no lost time from work and, based on these criteria and because the employing establishment did not controvert continuation of pay or challenge the case, payment of a limited amount of medical expenses was administratively approved. It stated that it had reopened the claim for consideration because the medical bills had exceeded \$1,500.00. OWCP requested additional evidence from appellant within 30 days to respond to its inquiries.

In response, appellant submitted an April 16, 2016 narrative statement indicating that on January 30, 2016 he experienced symptoms of dehydration after hours of hiking through rugged terrain while tracking a group of drug smugglers. A coworker notified a helicopter pilot that appellant was in need of medical attention and that he was unable to hike out of the canyon to the nearest means of transportation. The pilot was able to land nearby and transport appellant to the Ajo Border Station. Once the helicopter landed at the station two paramedics, employed by Ajo Ambulance, Inc., were waiting to assist appellant. They assessed his condition and determined that, although he needed intravenous therapy to replace the fluids and electrolytes he had lost throughout the day, a trip to the emergency room was not required. Appellant opted out of riding in the ambulance to the emergency room and chose to stay at the station and received intravenous therapy from another coworker who was also a certified emergency medical technician. He did not receive any other medical treatment. Appellant stated that he obtained the paramedics report and was unable to provide further medical evidence from a physician because he did not visit or consult a doctor. He indicated that the only medical bill for which he was seeking compensation was the bill from Ajo Ambulance, Inc., for services rendered on January 30, 2016 in the amount of \$1,733.89.

By decision dated May 10, 2016, OWCP denied appellant's claim because the medical evidence of record failed to establish a diagnosed condition causally related to the January 30, 2016 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 timely filed within the applicable

time limitation period of FECA, that an injury<sup>2</sup> was sustained in the performance of duty, as alleged, and that any disability or medical condition for which compensation is claimed is causally related to the employment injury.<sup>3</sup>

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 he 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.<sup>4</sup>

Causal relationship is a medical issue and the medical evidence generally required to establish causal relationship is rationalized medical opinion evidence. 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.<sup>5</sup>

### ANALYSIS

OWCP has accepted that the employment incident of January 30, 2016 occurred at the time, place, and in the manner alleged. The issue is whether appellant sustained an injury as a result.

The Board finds that appellant did not submit any medical evidence from a physician which provided a firm diagnosis and a reasoned explanation as to how the accepted incident caused an injury. Appellant therefore failed to meet his burden of proof to establish that he has a medical condition resulting from the January 30, 2016 employment incident.

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.

Finally, it is undisputed that an ambulance was called and assessed appellant's condition at Ajo Border Station shortly after the January 30, 2016 employment incident. Ordinarily, the employing establishment will authorize treatment of a job-related injury by providing the

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<sup>2</sup> OWCP regulations define 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. 20 C.F.R. § 10.5(ee).

<sup>3</sup> See *T.H.*, 59 ECAB 388 (2008).

<sup>4</sup> *Id.*

<sup>5</sup> *Id.*

employee a properly executed Form CA-16 within four hours.<sup>6</sup> However, under 5 U.S.C. § 8103, OWCP has broad discretionary authority to approve unauthorized medical care which it finds necessary and reasonable in cases of emergency or other unusual circumstances.<sup>7</sup> Upon return of the case record, OWCP shall determine whether appellant's ambulance transportation should be authorized pursuant to 20 C.F.R. § 10.304, which provides that in cases involving emergencies or unusual circumstances, OWCP may authorize treatment in a manner other than as stated in this subpart.<sup>8</sup>

### **CONCLUSION**

The Board finds that appellant has not met his burden of proof to establish an injury causally related to a January 30, 2016 employment incident. On return of the record, OWCP should consider the ambulance bill issued in this case.

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<sup>6</sup> See 20 C.F.R. § 10.300; *Val D. Wynn*, 40 ECAB 666 (1989); a Form CA-16, authorization of medical care was not issued in this case.

<sup>7</sup> See *M.A.*, Docket No. 14-1071 (issued October 3, 2014) (where the Board found that the employee failed to establish that he had a medical condition resulting from a December 14, 2013 work incident, but returned the case to OWCP to determine whether his ambulance transportation and initial medical care in the hospital emergency room should be authorized).

<sup>8</sup> See *J.D.*, Docket No. 14-936 (issued August 8, 2014); *L.B.*, Docket No. 10-469 (issued June 2, 2010).

**ORDER**

**IT IS HEREBY ORDERED THAT** the May 10, 2016 decision of the Office of Workers' Compensation Programs is affirmed.

Issued: March 28, 2017  
Washington, DC

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

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

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