

FACTUAL HISTORY

On February 17, 2017 appellant, then a 55-year-old clerk, filed an occupational disease claim (Form CA-2) alleging that she developed severe carpal tunnel syndrome and chronic denervation in her right hand as a result of her employment duties. She indicated that she first became aware of her condition on January 6, 2017 and realized it resulted from her federal employment on January 25, 2017. The claim form did not indicate whether appellant stopped work.

Appellant was treated in a hospital emergency room on February 19, 2017 by Bradley J. Barnes, a certified physician assistant. Mr. Barnes related that appellant had undergone left shoulder rotator cuff surgery two years prior and currently worked a job which required her to move and lift heavy boxes. Appellant advised emergency personnel that she had lifted two heavy boxes at work that night and experienced pain in her left shoulder and surrounding area, as well as bilateral wrist pain. Upon physical examination, Mr. Barnes reported generalized tenderness on palpation and pain with range of motion of appellant's left shoulder. He noted no sensory deficits, effusion, crepitus, or deformity. Mr. Barnes diagnosed left shoulder sprain.

In a February 19, 2017 work status note, Elizabeth M. Busse, a registered nurse, indicated that appellant had been treated in the emergency room that day. She advised that appellant should be placed on light duty for at least a week with restrictions of no heavy lifting greater than 5 to 10 pounds and no pushing or pulling.

By letter dated March 7, 2017, OWCP advised appellant that the evidence submitted was insufficient to establish her claim. It requested that she provide a detailed description of the employment-related activities she believed contributed to her condition and a medical report from her physician to establish a medical diagnosis causally related to her employment. Appellant was afforded 30 days to submit the additional evidence.

By decision dated April 12, 2017, OWCP denied appellant's occupational disease claim. It accepted appellant's employment factors as a clerk, but denied appellant's claim because the medical evidence of record failed to establish a medical diagnosis causally related to factors of her federal employment.

LEGAL PRECEDENT

An employee seeking benefits under FECA³ has the burden of proof to establish the essential elements of his or her claim by the weight of the reliable, probative, and substantial evidence⁴ including that he or she sustained an injury in the performance of duty and that any specific condition or disability from work for which he or she claims compensation is causally related to that employment injury.⁵ In an occupational disease claim, appellant's burden requires

³ *Supra* note 1.

⁴ *J.P.*, 59 ECAB 178 (2007); *Joseph M. Whelan*, 20 ECAB 55, 58 (1968).

⁵ *M.M.*, Docket No. 08-1510 (issued November 25, 2010); *G.T.*, 59 ECAB 447 (2008); *Elaine Pendleton*, 40 ECAB 1143, 1145 (1989).

submission of the following: (1) a factual statement identifying employment factors alleged to have caused or contributed to the presence or occurrence of the disease or condition; (2) medical evidence establishing the presence or existence of the disease or condition for which compensation is claimed; and (3) medical evidence establishing that the diagnosed condition is causally related to the employment factors identified by the employee.⁶

Causal relationship is a medical issue and the medical evidence generally required to establish causal relationship is rationalized medical opinion evidence.⁷ 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.⁸

ANALYSIS

Appellant alleged that she developed right hand carpal tunnel syndrome and chronic denervation causally related to her employment factors as a mail clerk. OWCP accepted appellant's employment factors, but it denied her claim due to insufficient medical evidence to establish a diagnosed medical condition causally related to factors of her federal employment.

The Board finds that appellant has not met her burden of proof to establish an occupational disease causally related to factors of her federal employment.

Appellant submitted hospital records dated February 19, 2017 from Mr. Barnes, a certified physician assistant, and Ms. Busse, a registered nurse. Evidence, however, from a physician assistant or nurse has no probative value as neither are considered physicians as defined under section 8102(2) of FECA.⁹ These hospital records, therefore, are insufficient to establish appellant's claim.

On appeal appellant describes in detail her job duties as a clerk and alleges that the medical evidence establishes that she has a severe case of carpal tunnel syndrome. The Board, however, finds that the evidence submitted by appellant fails to provide a medical diagnosis, by a physician, and fails to establish causal relationship between her employment duties and a diagnosed medical condition. As previously noted, appellant's burden of proof requires the submission of rationalized medical opinion evidence that is based on a complete factual and medical background, is of reasonable medical certainty, and which provides medical rationale explaining the nature of the relationship between a diagnosed condition and the specific

⁶ *R.H.*, 59 ECAB 382 (2008); *Ernest St. Pierre*, 51 ECAB 623 (2000).

⁷ *I.R.*, Docket No. 09-1229 (issued February 24, 2010); *D.I.*, 59 ECAB 158 (2007).

⁸ *I.J.*, 59 ECAB 408 (2008); *Victor J. Woodhams*, 41 ECAB 465 (2005).

⁹ 5 U.S.C. § 8101(2) provides that a physician includes surgeons, podiatrists, dentists, clinical psychologists, optometrists, chiropractors, and osteopathic practitioners within the scope of their practice as defined by state law. *V.C.*, Docket No. 16-0642 (issued April 19, 2016); *L.C.*, Docket No. 16-1717 (issued March 2, 2017) (nurses are not considered physicians under FECA); *Allen C. Hundley*, 53 ECAB 551, 554 (2002) (physician assistants are not considered physicians under FECA).

employment factors identified by the employee.¹⁰ As appellant has not submitted such rationalized medical opinion evidence in this case, she did not meet her burden of proof.

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 not met her burden of proof to establish an occupational disease causally related to factors of her federal employment.

ORDER

IT IS HEREBY ORDERED THAT the April 12, 2017 merit decision of the Office of Workers' Compensation Programs is affirmed.

Issued: October 18, 2017
Washington, DC

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

Colleen Duffy Kiko, Judge
Employees' Compensation Appeals Board

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

¹⁰ *Supra* note 8.