

computer while in the performance of duty. He indicated that he first became aware of his condition and first realized it was caused or aggravated by factors of his federal employment on June 1, 2017. Appellant did not stop work.

In a December 7, 2017 development letter, OWCP advised appellant of the deficiencies of his claim and afforded him 30 days to submit factual information and medical evidence in support of his claim for FECA benefits.

Dr. Vikram P. Mehta, a Board-certified hand surgeon, in a September 20, 2017 report, noted an assessment of bilateral wrist pain, bilateral primary osteoarthritis of the first carpometacarpal (CMC) joint, and paresthesia of the skin. He further noted that appellant was a right-handed nephrologist who presented “with at least a 6[-]month history of bilateral wrist pain and left[-]hand numbness with burning paresthesias and nocturnal discomfort in the left hand.” Dr. Mehta observed that appellant had no medical problems and had no history of diabetes. He also noted that appellant had undergone a nerve conduction which apparently showed left carpal tunnel syndrome. Dr. Mehta referred appellant for additional upper extremity diagnostic studies to ascertain the cause of appellant’s hand numbness (paresthesia).

Dr. Harinder K. Sidhu, a Board-certified neurologist, indicated that the results of appellant’s October 19, 2017 left upper extremity electromyography and nerve conduction velocity (EMG/NCV) study revealed severe left carpal tunnel syndrome (CTS).

By decision dated January 26, 2018, OWCP denied appellant’s occupational disease claim because the medical evidence of record failed to establish a causal relationship between his diagnosed upper extremity conditions and the accepted factors of his federal employment. It concluded, therefore, that the requirements had not been met to establish an injury and/or condition causally related to the accepted employment factors.

LEGAL PRECEDENT

An employee seeking benefits under FECA² has the burden of proof to establish the essential elements of his or her claim, including 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 of FECA,³ that an injury 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.⁴ These are the essential elements of each and every compensation claim, regardless of whether the claim is predicated upon a traumatic injury or an occupational disease.⁵

² *Id.*

³ *S.B.*, Docket No. 17-1779 (issued February 7, 2018); *J.P.*, 59 ECAB 178 (2007); *Joe D. Cameron*, 41 ECAB 153 (1989).

⁴ *J.M.*, Docket No. 17-0284 (issued February 7, 2018); *R.C.*, 59 ECAB 427 (2008); *James E. Chadden, Sr.*, 40 ECAB 312 (1988).

⁵ *K.M.*, Docket No. 15-1660 (issued September 16, 2016); *L.M.*, Docket No. 13-1402 (issued February 7, 2014); *Delores C. Ellyett*, 41 ECAB 992 (1990).

To establish that an injury was sustained in the performance of duty in an occupational disease claim, a claimant must submit: (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 claimant.⁶

Causal relationship is a medical issue, and the medical evidence 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 specific employment factors identified by the employee.⁸

ANALYSIS

The Board finds that appellant has not met his burden of proof to establish bilateral upper extremity conditions causally related to the accepted factors of his federal employment.

In his September 20, 2017 report, Dr. Mehta diagnosed primary osteoarthritis of first CMC joint, bilaterally. He also reported findings of bilateral wrist pain and paresthesia of skin. Dr. Mehta referred appellant for electrodiagnostic studies to address the cause of his hand numbness.⁹ He noted that appellant was a physician, but did not otherwise address his specific duties. Dr. Mehta also did not provide an opinion regarding the cause of appellant's bilateral first CMC joint osteoarthritis. The Board has held that medical evidence that does not offer an opinion regarding the cause of an employee's condition is of no probative value on the issue of causal relationship.¹⁰ Therefore, Dr. Mehta's September 20, 2017 report is insufficient to establish appellant's claim.¹¹

As the medical evidence of record does not contain a rationalized opinion establishing causal relationship between appellant's bilateral upper extremity conditions and the accepted factors of his federal employment, the Board finds that appellant has not met his burden of proof.

⁶ *S.C.*, Docket No. 18-1242 (issued March 13, 2019); *R.H.*, 59 ECAB 382 (2008).

⁷ *A.M.*, Docket No. 18-1748 (issued April 24, 2019); *T.H.*, 59 ECAB 388, 393 (2008); *Robert G. Morris*, 48 ECAB 238 (1996).

⁸ *M.V.*, Docket No. 18-0884 (issued December 28, 2018); *I.J.*, 59 ECAB 408 (2008); *Victor J. Woodhams*, 41 ECAB 345, 352 (1989).

⁹ Dr. Mehta noted having discussed with appellant a differential diagnosis of hand numbness and a clinical diagnosis of CTS.

¹⁰ *See L.B.*, Docket No. 18-0533 (issued August 27, 2018); *D.K.*, Docket No. 17-1549 (issued July 6, 2018).

¹¹ *Id.*

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 his burden of proof to establish bilateral upper extremity conditions causally related to the accepted factors of his federal employment.

ORDER

IT IS HEREBY ORDERED THAT the January 26, 2018 decision of the Office of Workers' Compensation Programs is affirmed.

Issued: February 18, 2020
Washington, DC

Janice B. Askin, Judge
Employees' Compensation Appeals Board

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

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