



## ISSUE

The issue is whether appellant has met his burden of proof to establish a diagnosed medical condition causally related to the accepted January 30, 2019 employment incident.

## FACTUAL HISTORY

On January 30, 2019 appellant, then a 58-year-old customs and border patrol officer, filed a traumatic injury claim (Form CA-1) alleging that he sustained swelling and bruising to the right eye, lacerations to the nose and right elbow, and right rib pain on that date when he fainted after feeling hot and dizzy while in the performance of duty. A supervisor indicated that appellant was not injured in the performance of duty, noting that he became dizzy and fainted, striking his head on a podium desk. Appellant stopped work on that date and returned on February 1, 2019 with no restrictions.

In an emergency room note dated January 30, 2019, Dr. Claudia Kim, an emergency medicine specialist, examined appellant for syncope. She noted that he was sitting at work and experienced ringing of the ears and feeling dizzy, after which he had a syncopal episode, striking his face on a bar. On physical examination, Dr. Kim observed right periorbital ecchymosis and swelling and an abrasion to the bridge of the nose. Included with her report were the results of computerized tomography (CT) scans of the facial bones and brain and an x-ray of the right elbow, taken on January 30, 2019. Dr. Kim diagnosed syncope, periorbital ecchymosis of the right eye, and right elbow pain.

In a letter dated February 12, 2019, the employing establishment's injury compensation specialist, noted that appellant had a similar syncopal incident involving light-headedness on February 9, 2019 and had filed another claim for traumatic injury. She further noted that, based on the medical evidence, it could be an underlying issue and not related to a work injury.

An x-ray of appellant's right elbow dated January 30, 2019 demonstrated no fracture or dislocation, along with olecranon enthesophyte formation and mild subchondral cystic change within the humeral capitellum, which was also noted on prior study.

A CT scan of appellant's facial bones dated January 30, 2019 demonstrated right-sided periorbital hematoma, no facial bone fractures, multilevel upper cervical spine arthritic change, and cerumen within both external canals. A CT scan of his brain also dated January 30, 2019 demonstrated left periorbital tissue swelling and no acute intracranial process.

In a March 11, 2019 development letter, OWCP informed appellant that the factual and medical evidence of record was insufficient to establish his claim. It advised him to submit a narrative report from a physician, including diagnoses and a rationalized medical opinion on causal relationship. OWCP noted that the diagnoses of fainting (syncope) and facial and scalp contusions were not substantiated by medical evidence to be caused or aggravated by the incident of January 30, 2019. It also requested additional information regarding the alleged January 30, 2019 employment incident, as well as similar disability or symptoms before the injury. OWCP afforded appellant 30 days to submit the necessary evidence.

In a discharge summary dated January 30, 2019, Dr. Kim listed diagnoses of fainting (syncope) and facial and scalp contusions.

On March 28, 2019 appellant responded to OWCP's factual development questionnaire. He explained that he had hit his head on a desk corner after fainting and falling at work. Appellant noted that he did not have a preexisting condition that may have contributed to the injury and that the incident had been witnessed and recorded on a security system.

In a letter dated March 29, 2019, a supervisor at the employing establishment noted that he witnessed appellant fall on January 30, 2019. Appellant had been using a pedestrian primary booth landline for approximately one minute, then collapsed to the ground, hitting his head and upper torso on the pedestrian primary metal inspection counter/station. He laid face down on a ceramic floor until coworkers began to administer first aid.

In a supplemental statement dated March 26, 2019, appellant described the January 30, 2019 incident. He stated that at approximately 3:15 p.m. on that date, he was inspecting vehicles coming across the border for 30 minutes, in an environment where he was exposed to exhaust from vehicles. Appellant's next assignment was to process pedestrians inside the facility, which was much warmer than the outside. With the temperature change, he felt hot and dizzy, and fainted, hitting his face on the edge of a booth/desk and hitting his head on the floor.

By decision dated April 15, 2019, OWCP accepted that the January 30, 2019 employment incident occurred as alleged. However, it denied appellant's traumatic injury claim, finding that the evidence of record did not contain a medical diagnosis in connection with the accepted event. OWCP concluded, therefore, that the requirements had not been met to establish an injury as defined by FECA.

### **LEGAL PRECEDENT**

An employee seeking benefits under FECA<sup>3</sup> 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 of FECA,<sup>4</sup> 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.<sup>5</sup> 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.<sup>6</sup>

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<sup>3</sup> *Id.*

<sup>4</sup> *S.B.*, Docket No. 17-1779 (issued February 7, 2018); *J.P.*, 59 ECAB 178 (2007); *Joe D. Cameron*, 41 ECAB 153 (1989).

<sup>5</sup> *J.M.*, Docket No. 17-0284 (issued February 7, 2018); *R.C.*, 59 ECAB 427 (2008); *James E. Chadden, Sr.*, 40 ECAB 312 (1988).

<sup>6</sup> *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).

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.<sup>7</sup> The second component is whether the employment incident caused a personal injury and generally can be established only by medical evidence.<sup>8</sup>

Causal relationship is a medical question that requires rationalized medical opinion evidence to resolve the issue.<sup>9</sup> A physician's opinion on whether there is causal relationship between the diagnosed condition and the implicated employment factor(s) must be based on a complete factual and medical background.<sup>10</sup> Additionally, the physician's opinion must be expressed in terms of a reasonable degree of medical certainty, and must be supported by medical rationale that explains the nature of the relationship between the diagnosed condition and appellant's specific employment factor(s).<sup>11</sup>

Pursuant to OWCP's procedures, no development of a claim is necessary when there is a visible injury, even when time has been lost from work due to disability, following a serious injury (motor vehicle accidents, stabbings, shootings, *etc.*).<sup>12</sup> The procedures provide that no development is necessary when the employing establishment does not dispute the facts of the case and there are no questionable circumstances surrounding the case. No medical report is required to establish a minor condition such as a laceration.<sup>13</sup> Sound judgment should be employed in these cases to provide appropriate and immediate medical care for the injured worker since expeditious treatment for these injuries is critical.<sup>14</sup>

### ANALYSIS

The Board finds that appellant has established that he sustained facial and scalp lacerations and a periorbital hematoma causally related to the accepted January 30, 2019 employment incident.

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<sup>7</sup> *B.P.*, Docket No. 16-1549 (issued January 18, 2017); *Elaine Pendleton*, 40 ECAB 1143 (1989).

<sup>8</sup> *K.L.*, Docket No. 18-1029 (issued January 9, 2019). See *Shirley A. Temple*, 48 ECAB 404, 407 (1997); *John J. Carlone* 41 ECAB 354, 356-57 (1989).

<sup>9</sup> *T.H.*, 59 ECAB 388, 393 (2008); *Robert G. Morris*, 48 ECAB 238 (1996).

<sup>10</sup> *M.V.*, Docket No. 18-0884 (issued December 28, 2018).

<sup>11</sup> *Id.*; *Victor J. Woodhams*, 41 ECAB 345 (1989).

<sup>12</sup> See Federal (FECA) Procedure Manual, Part 2 -- Claims, *Initial Development of Claims*, Chapter 2.800.6(a) (June 2011).

<sup>13</sup> *Id.*

<sup>14</sup> See *E.H.*, Docket No. 19-1282 (issued December 23, 2019); *M.C.*, Docket No. 18-1278 (issued March 7, 2019); *R.T.*, Docket No. 08-0408 (issued December 16, 2008); *Gregory J. Reser*, 57 ECAB 277 (2005).

In a discharge summary dated January 30, 2019, Dr. Kim diagnosed facial and scalp contusions. In addition, a CT scan of appellant's facial bones dated January 30, 2019, the results of which were included in Dr. Kim's January 30, 2019 hospital note, demonstrated a right-sided periorbital hematoma. As all of these diagnosed conditions were visible and the incident had been accepted, no medical reports were required to establish the medical conditions as employment related.<sup>15</sup> The Board therefore finds that appellant has met his burden of proof to establish facial and scalp lacerations and a periorbital hematoma causally related to the accepted employment incident. Therefore, upon return of the case file OWCP shall pay all appropriate wage-loss compensation and medical benefits.

### **CONCLUSION**

The Board finds that appellant has established that he sustained facial and scalp lacerations and a periorbital hematoma causally related to the accepted January 30, 2019 employment incident.

### **ORDER**

**IT IS HEREBY ORDERED THAT** the April 15, 2019 decision of the Office of Workers' Compensation Programs is reversed and the case is remanded for payment of appropriate wage-loss compensation and medical benefits consistent with this decision of the Board. .

Issued: July 6, 2020  
Washington, DC

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

Patricia H. Fitzgerald, Alternate Judge  
Employees' Compensation Appeals Board

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

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<sup>15</sup> *Supra* note 12.