DECISION AND ORDER

Before:
JANICE B. ASKIN, Judge
PATRICIA H. FITZGERALD, Alternate Judge
VALERIE D. EVANS-HARRELL, Alternate Judge

JURISDICTION

On May 20, 2021 appellant filed a timely appeal from an April 28, 2021 merit decision of the Office of Workers’ Compensation Programs (OWCP). Pursuant to the Federal Employees’ Compensation Act\(^1\) (FECA) and 20 C.F.R. §§ 501.2(c) and 501.3, the Board has jurisdiction over the merits of this case.\(^2\)

ISSUE

The issue is whether appellant has met his burden of proof to establish a diagnosed medical condition causally related to the accepted March 13, 2021 employment incident.

\(^1\) 5 U.S.C. § 8101 et seq.

\(^2\) The Board notes that, following the April 28, 2021 decision, OWCP received additional evidence and appellant submitted additional evidence on appeal. However, the Board’s Rules of Procedure provides: “The Board’s review of a case is limited to the evidence in the case record that was before OWCP at the time of its final decision. Evidence not before OWCP will not be considered by the Board for the first time on appeal.” 20 C.F.R. § 501.2(c)(1). Thus, the Board is precluded from reviewing this additional evidence for the first time on appeal. \textit{Id.}
FACTUAL HISTORY

On March 15, 2021 appellant, then a 28-year-old rural carrier assistant, filed a traumatic injury claim (Form CA-1) alleging that on March 13, 2021 he injured his lower back when he stood up as he was loading packages on his truck while in the performance of duty. He stopped work on the date of the alleged injury.

In an accompanying statement, appellant indicated that he was loading his truck when he experienced a striking pain in his lower back. He noted that he then notified his coworker and supervisors of his pain. Appellant related that his condition gradually worsened throughout the day and that he had to leave work at 6:30 p.m. due to his back pain.

In a March 15, 2021 witness statement, D.S., appellant’s supervisor, noted that on March 13, 2021, when he called appellant into his office to discuss a pay issue, he reported that his back was sore and that he believed the injury occurred the day before. He also alleged that he was leaning over to sort small parcels in the back of his truck when he experienced soreness. D.S. advised appellant not to lean for extended periods. In a witness statement of even date, A.E., a coworker, noted that on March 13, 2021 appellant notified her that his back was hurting without indicating why. She offered appellant over-the-counter pain medicine, which he accepted.

In a March 23, 2021 development letter, OWCP informed appellant that the evidence of record was insufficient to establish his claim. It advised him of the type of medical evidence needed and afforded him 30 days to submit the necessary evidence.

On March 15, 2021 the employing establishment executed an authorization for examination and/or treatment (Form CA-16).

In a March 15, 2021 injury report, containing an illegible signature, an unidentifiable healthcare provider noted that appellant sustained an injury on March 13, 2021 and could return to work on March 17, 2021 with restrictions.

In a March 15, 2021 progress report, Amber Kelley, a medical assistant, noted that appellant experienced a sharp pain while loading his truck on March 12, 2021, but continued to work. She indicated that his pain worsened over the next days.

In a March 16, 2021 employing establishment accident report, C.D., appellant’s immediate supervisor, related that on March 13, 2021 appellant experienced lower back pain when loading his vehicle with large parcels.

In a March 19, 2021 injury report, containing an illegible signature, an unidentifiable healthcare provider noted that appellant could return to work the next day with restrictions.

In a March 19, 2021 progress report, Deanna A. Dardar, a nurse practitioner, noted that appellant presented with lower back pain after sustaining a work-related injury on March 13, 2021. She conducted a physical examination and diagnosed lumbar strain.

On March 22, 2021 appellant accepted an offer for a modified assignment as a limited-duty rural carrier assistant.
In an undated attending physician’s report, Part B of the Form CA-16, Julie Galloway, a nurse practitioner, noted that appellant experienced a sharp pain in his lower back while loading his truck with packages. She diagnosed lumbar strain.

In March 26, 2021 injury report and progress report, Ms. Galloway again diagnosed lumbar strain. In a duty status report (Form CA-17) of even date, she reiterated her diagnosis and provided work restrictions.

By decision dated April 28, 2021, OWCP denied appellant’s traumatic injury claim, finding that he had not submitted medical evidence containing a medical diagnosis in connection with the accepted March 13, 2021 employment incident. It 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\(^3\) 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,\(^4\) 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.\(^5\) 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.\(^6\)

To determine whether a federal employee has sustained a traumatic injury in the performance of duty, it first must be determined whether fact of injury has been established. There are two components involved in establishing fact of injury. First, the employee must submit sufficient evidence to establish that he or she actually experienced the employment incident at the time and place, and in the manner alleged. The second component is whether the employment incident caused a personal injury.\(^7\)

The medical evidence required to establish causal relationship between a claimed specific condition and an employment incident is rationalized medical opinion evidence.\(^8\) The opinion of the physician must be based on a complete factual and medical background of the employee, must

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\(^3\) *Supra* note 1.

\(^4\) *F.H.*, Docket No. 18-0869 (issued January 29, 2020); *J.P.*, Docket No. 19-0129 (issued April 26, 2019); *Joe D. Cameron*, 41 ECAB 153 (1989).


\(^8\) *S.S.*, Docket No. 19-0688 (issued January 24, 2020); *A.M.*, Docket No. 18-1748 (issued April 24, 2019); *Robert G. Morris*, 48 ECAB 238 (1996).
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 incident identified by the employee.⁹

**ANALYSIS**

The Board finds that appellant has not met his burden of proof to establish a diagnosed medical condition causally related to the accepted March 13, 2021 employment incident.

In support of his claim, appellant submitted reports dated March 15, 19, and 26, 2021 from nurse practitioners and a medical assistant. OWCP also received an undated Part B of the Form CA-16 from a nurse practitioner. However, the Board has held that certain healthcare providers such as nurse practitioners and medical assistants are not considered physicians as defined under FECA.¹⁰ Consequently, their medical findings and/or opinions will not suffice for purposes of establishing causal relationship.¹¹ As such, this evidence is of no probative value and insufficient to meet appellant’s burden of proof.

Appellant also submitted May 15 and 19, 2021 injury reports, containing an illegible signature. The Board has held that reports that are unsigned or bear an illegible signature lack proper identification and cannot be considered probative medical evidence, as the author cannot be identified as a physician.¹² Therefore, these documents have no probative value and are insufficient to establish the claim.

Accordingly, as there is no rationalized medical evidence of record establishing a diagnosed medical condition causally related to the accepted March 13, 2021 employment incident, the Board finds that he has not met his 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.

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¹⁰ Section 8101(2) provides that under FECA the term physician includes surgeons, podiatrists, dentists, clinical psychologists, optometrists, chiropractors, and osteopathic practitioners within the scope of their practice as defined by the applicable state law. 5 U.S.C. § 8101(2); 20 C.F.R. § 10.5(t). See Federal (FECA) Procedure Manual, Part 2 -- Claims, Causal Relationship, Chapter 2.805.3a(1) (January 2013); *David P. Sawchuk*, 57 ECAB 316, 320 n.11 (2006); see also *J.T.*, Docket No. 20-1486 (issued March 16, 2021) (medical assistants); *R.L.*, Docket No. 19-0440 (issued July 8, 2019) (nurse practitioners).

¹¹ *Id.*

CONCLUSION

The Board finds that appellant has not met his burden of proof to establish a diagnosed medical condition causally related to the accepted March 13, 2021 employment incident.\(^{13}\)

ORDER

IT IS HEREBY ORDERED THAT the April 28, 2021 decision of the Office of Workers’ Compensation Programs is affirmed.

Issued: December 21, 2021
Washington, DC

Janice B. Askin, Judge
Employees’ Compensation Appeals Board

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

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

\(^{13}\) The Board notes that the employing establishment executed a Form CA-16. A completed Form CA-16 authorization may constitute a contract for payment of medical expenses to a medical facility or physician, when properly executed. The form 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. See 20 C.F.R. § 10.300(c); J.G., Docket No. 17-1062 (issued February 13, 2018); Tracy P. Spillane, 54 ECAB 608 (2003).