

further noted that his claim was delayed by the prior postmaster as he had informed his supervisor of the injury on the same day he was injured. Appellant noted that he became aware of his condition and first realized it was caused or aggravated by his federal employment on March 27, 2019. He stopped work on March 30, 2021.

In a medical report dated April 6, 2021, Dr. Jay J. Patel, a surgeon, related that appellant presented with severe progressive right knee pain over the past year, which was making it difficult for him to enter and exit his truck and ascend and descend stairs. He further related that he had difficulty walking and could only do so indoors. Dr. Patel diagnosed severe right knee varus degenerative joint disease (DJD) by way of x-ray examination. He recommended a total knee arthroplasty.

A form status report dated June 1, 2021 from Dr. Patel indicated that appellant was in temporary total disability status, effective June 1 through October 1, 2021.

In a development letter dated June 17 2021, OWCP informed appellant of the deficiencies of his claim. It advised him of the type of factual and medical evidence needed to establish his claim and provided a questionnaire for his completion. OWCP afforded appellant 30 days to respond.

Thereafter, OWCP received an unsigned medical report dated April 3, 2019 relating that appellant had been experiencing knee pain since the summer before, following an incident where a mailbox door fell on his knee.

Appellant submitted various return-to-work notes dated November 20, 2020 through March 11, 2021 from Dr. Neal M. Damian, a chiropractor, providing work restrictions of no heavy lifting or going up and down stairs due to knee pain.

In a medical report dated June 1, 2021, Dr. Damian noted that appellant had been receiving chiropractic treatment for his medical condition since November 4, 2020 for low back and right knee pain. He related that appellant's work duties required him to lift boxes, walk, and climb up and down stairs. Dr. Damian noted that a magnetic resonance imaging (MRI) scan revealed a meniscal tear of the right knee and discopathy of the lumbar spine. He opined that appellant's injuries were caused or aggravated by his employment factors, including prolonged walking for eight hours or more, bending, climbing stairs, and lifting boxes.

A medical note dated June 28, 2021 from Dr. Patel noted that appellant was scheduled to undergo right total knee arthroplasty that day and would be off work for up to three months or until an estimated return date of October 1, 2021.

In a medical report dated July 1, 2021, Dr. Damian detailed the results of a right knee and lumbar MRI scan and his opinion that appellant's medical conditions were caused or aggravated by his work duties.

By decision dated August 2, 2021, OWCP denied appellant's claim, finding that he was not injured in the performance of duty as the implicated factors of employment were not established. It, therefore, concluded that he had not established an injury and/or a medical

condition that arose during the course of employment and within the scope of compensable work factors as defined under FECA.

On October 20, 2021 appellant requested reconsideration of OWCP's August 2, 2021 decision.

OWCP received additional evidence. In a medical report dated June 28, 2021, Dr. Patel noted that appellant underwent surgery for right knee DJD. He indicated that a postoperative impression revealed severe osteoarthritis of the knee.

A medical note dated September 10, 2021 from Dr. Damian related that appellant continued to experience severe pain and tenderness of the right knee and joints. Dr. Damian opined that the initial incident of a mailbox hitting his right knee and the continuous use of his right knee as a federal employee caused his knee condition. He further noted that continued work duties would aggravate his symptoms and cause inflammation.

On September 21, 2021 appellant was seen by Dr. Patel for a postoperative examination. Dr. Patel related that, following the surgery, appellant experienced minimal knee pain with occasional stiffness and swelling. He noted that appellant would be off work through April 1, 2022 as he was unable to stand or walk for prolonged periods of time.

By decision dated November 15, 2021, OWCP modified its previous decision, finding that appellant had established performance of duty. However, appellant's claim remained denied as the medical evidence of record was insufficient to establish a knee condition causally related to the accepted factors of his federal employment.

On January 24, 2022 appellant requested reconsideration of OWCP's November 15, 2021 decision and submitted additional medical evidence.

In a medical report dated December 14, 2021, Dr. Patel examined appellant five months post-knee arthroplasty. He noted that the right knee had moderate swelling and that x-rays revealed stable alignment and fixation without fracture, dislocation, loosening, or wear. Dr. Patel indicated that appellant could return to work in April, with continued physical therapy and pain medication.

In a note dated January 5, 2022, Dr. Patel related that appellant was seen on April 6, 2021 for severe right knee pain following a work-related incident where a mailbox fell onto his knee. He noted a diagnosis of a meniscus tear and that appellant underwent surgery for a partial knee replacement on June 28, 2021. Dr. Patel indicated that he was continuing physical therapy as part of his recovery process.

By decision dated April 22, 2022, OWCP denied modification of its prior decision.

LEGAL PRECEDENT

An employee seeking benefits under FECA² 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 was sustained in the performance of duty as alleged, and that any disability or specific condition for which compensation is claimed is causally related to the employment injury.³ These are the essential elements of every compensation claim regardless of whether the claim is predicated on a traumatic injury or an occupational disease.⁴

To establish that an injury was sustained in the performance of duty in an occupational disease claim, an employee must submit 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.⁵

Causal relationship is a medical question that requires rationalized medical opinion evidence to resolve the issue.⁶ 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.⁷ Additionally, the physician's opinion must be expressed in terms of a reasonable degree of medical certainty, and must be supported by medical rationale explaining the nature of the relationship between the diagnosed condition and appellant's specific employment factor(s).⁸

ANALYSIS

The Board finds that appellant has not met his burden of proof to establish a knee condition causally related to the accepted factors of his federal employment.

In support of his claim, appellant submitted a January 5, 2022 note from Dr. Patel, wherein he noted that appellant was first seen on April 6, 2021 with severe right knee pain as a result of a mailbox falling on his knee at work causing a right knee meniscus tear. While Dr. Patel attributed

² *Id.*

³ *K.V.*, Docket No. 18-0947 (issued March 4, 2019); *M.E.*, Docket No. 18-1135 (issued January 4, 2019); *Kathryn Haggerty*, 45 ECAB 383, 388 (1994).

⁴ *K.V. and M.E., id.*; *Elaine Pendleton*, 40 ECAB 1143 (1989).

⁵ *R.G.*, Docket No. 19-0233 (issued July 16, 2019). *See also Roy L. Humphrey*, 57 ECAB 238, 241 (2005); *Ruby I. Fish*, 46 ECAB 276, 279 (1994); *Victor J. Woodhams*, 41 ECAB 345 (1989).

⁶ *T.H.*, 59 ECAB 388, 393 (2008); *Robert G. Morris* 48 ECAB 238 (1996).

⁷ *M.V.*, Docket No. 18-0884 (issued December 28, 2018).

⁸ *Id.*; *Victor J. Woodhams, supra* note 5.

the diagnosed medical condition to a work-related incident, he did not provide a rationalized medical opinion containing a pathophysiological explanation of how the accepted factors of appellant's federal employment were competent to cause his diagnosed knee condition. The Board has held that a report is of limited probative value regarding causal relationship if it does not contain medical rationale explaining how a given medical condition was related to accepted employment factors.⁹ Consequently, Dr. Patel's report is insufficient to meet appellant's burden of proof.

In his medical reports dated April 6, June 1 and 28, September 21, and December 14, 2021, Dr. Patel provided diagnoses, detailed appellant's medical treatment and progress, and noted work restrictions. However, he did not provide an opinion on causal relationship. 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 As such, these reports are also insufficient to meet appellant's burden of proof.

The remaining medical evidence of record consists of reports dated June 1, July 1, and September 10, 2021, as well as various return-to-work notes dated November 20, 2020 through March 11, 2021 from Dr. Damian, a chiropractor, who opined that appellant's diagnosed knee condition was causally related to his accepted employment factors. A chiropractor, however, is only considered a physician for purposes of FECA if he or she diagnoses subluxation based upon x-ray evidence.¹¹ As Dr. Damian has not diagnosed subluxation based upon x-ray evidence, he is not considered a physician as defined under FECA and his medical report does not constitute competent medical evidence.¹²

As the medical evidence of record is insufficient to establish causal relationship between appellant's diagnosed knee condition and the accepted employment factors, 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.

⁹ *J.W.*, Docket No. 18-0678 (issued March 3, 2020); *G.R.*, Docket No. 19-0940 (issued December 20, 2019); *D.L.*, Docket No. 19-0900 (issued October 28, 2019); *see also V.T.*, Docket No. 18-0881 (issued November 19, 2018); *Y.D.*, Docket No. 16-1896 (issued February 10, 2017); *T.M.*, Docket No. 08-975 (issued February 6, 2009); *S.E.*, Docket No. 08-2214 (issued May 6, 2009).

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

¹¹ Section 8101(2) of FECA provides that the term physician includes chiropractors only if the treatment consists of manual manipulation of the spine to correct a subluxation as demonstrated by x-ray to exist. 5 U.S.C. § 8101(2). *See also S.L.*, Docket No. 21-0760 (issued January 6, 2022); *T.T.*, Docket No. 18-0838 (issued September 19, 2019); *Thomas W. Stevens*, 50 ECAB 288 (1999); *George E. Williams*, 44 ECAB 530 (1993).

¹² *S.L.*, *id.*; *J.D.*, Docket No. 19-1953 (issued January 11, 2021); *C.S.*, Docket No. 19-1279 (issued December 30, 2019); *Robert H. St. Onge*, 43 ECAB 1169 (1992).

CONCLUSION

The Board finds that appellant has not met his burden of proof to establish a knee condition causally related to the accepted factors of his federal employment.

ORDER

IT IS HEREBY ORDERED THAT the April 22, 2022 decision of the Office of Workers' Compensation Programs is affirmed.

Issued: September 2, 2022
Washington, DC

Janice B. Askin, Judge
Employees' Compensation Appeals Board

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

James D. McGinley, Alternate Judge
Employees' Compensation Appeals Board