

the lungs and throat when he inhaled chemicals from vehicle coolant after a vehicle overheated while in the performance of duty. He stopped work on January 6, 2023 and returned to full duty on January 7, 2023.

Appellant submitted a health summary report dated January 6, 2023 by an unknown provider, who indicated that appellant was treated for complaints of inhaled antifreeze and diagnosed acute chemical pneumonitis.

In a January 18, 2023 development letter, OWCP informed appellant of the deficiencies of his claim. It advised him of the type of factual and medical evidence necessary to establish his claim and provided a questionnaire for completion. OWCP afforded appellant 30 days to respond.

Appellant submitted a January 6, 2023 emergency department note by Dr. Bhupinder S. Sangha, Board-certified in internal and critical care medicine and nephrology, who recounted appellant's complaints that he inhaled antifreeze. Dr. Sangha described that appellant was opening the hood on his vehicle that had broken down and "felt a blast of warm air with a sweet taste of antifreeze." Appellant reported that he had been coughing ever since the incident, but denied any shortness of breath or difficulty breathing. Dr. Sangha noted a discharge clinical impression of acute chemical pneumonitis.

A January 6, 2023 chest x-ray scan revealed no acute cardiopulmonary disease.

By decision dated March 1, 2023, OWCP accepted that the January 6, 2023 employment incident occurred as alleged. However, it denied appellant's claim, finding that the medical evidence of record was insufficient to establish a medical diagnosis in connection with the accepted January 6, 2023 employment incident. OWCP concluded, therefore, that he had not met the requirements to establish an injury as defined by FECA.

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 *F.H.*, Docket No. 18-0869 (issued January 29, 2020); *S.B.*, Docket No. 17-1779 (issued February 7, 2018); *Joe D. Cameron*, 41 ECAB 153 (1989).

⁴ *L.C.*, Docket No. 19-1301 (issued January 29, 2020); *J.M.*, Docket No. 17-0284 (issued February 7, 2018); *James E. Chadden, Sr.*, 40 ECAB 312 (1988).

⁵ *P.A.*, Docket No. 18-0559 (issued January 29, 2020); *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 determine whether a federal employee has sustained a traumatic injury in the performance of duty, OWCP must first determine whether fact of injury has been established.⁶ 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. Second, the employee must submit sufficient evidence to establish that the employment incident caused a personal injury.⁷

To establish causal relationship between the condition and the employment event or incident, the employee must submit rationalized medical opinion evidence.⁸ 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 factor(s) identified by the employee.⁹

ANALYSIS

The Board finds that this case is not in posture for decision.

In support of his claim, appellant submitted a January 6, 2023 emergency department note by Dr. Sangha who described the January 6, 2023 employment incident and reported that appellant had been coughing ever since the incident. Dr. Sangha noted a discharge clinical impression of acute chemical pneumonitis. The Board finds, therefore, that the report by Dr. Sangha is sufficient to establish a diagnosis of acute chemical pneumonitis.¹⁰

As the medical evidence of record establishes a diagnosed medical condition, the case must be remanded for consideration of the medical evidence with regard to the issue of causal relationship.¹¹ Following this and other such further development as deemed necessary, OWCP shall issue a *de novo* decision.

CONCLUSION

The Board finds that appellant has met his burden of proof to establish a medical condition in connection with the accepted January 6, 2023 employment incident. The Board further finds,

⁶ *D.B.*, Docket No. 18-1348 (issued January 4, 2019); *S.P.*, 59 ECAB 184 (2007).

⁷ *T.H.*, Docket No. 19-0599 (issued January 28, 2020); *B.M.*, Docket No. 17-0796 (issued July 5, 2018); *David Apgar*, 57 ECAB 137 (2005); *John J. Carlone*, 41 ECAB 354 (1989).

⁸ *S.S.*, Docket No. 19-0688 (issued January 24, 2020); *S.A.*, Docket No. 18-0399 (issued October 16, 2018); *see also Robert G. Morris*, 48 ECAB 238 (1996).

⁹ *C.F.*, Docket No. 18-0791 (issued February 26, 2019); *M.V.*, Docket No. 18-0884 (issued December 28, 2018); *I.J.*, 59 ECAB 408 (2008); *Victor J. Woodhams*, 41 ECAB 345 (1989).

¹⁰ *See E.L.*, Docket No. 21-0587 (issued July 6, 2022); *see also T.C.*, Docket No. 17-0624 (issued December 19, 2017).

¹¹ *See S.R.*, Docket No. 22-0421 (issued July 15, 2022); *S.A.*, Docket No. 20-1498 (issued March 11, 2021).

however, that the case is not in posture for decision as to whether his diagnosed condition is causally related to the accepted January 6, 2023 employment incident.

ORDER

IT IS HEREBY ORDERED THAT the March 1, 2023 decision of the Office of Workers' Compensation Programs is set aside and the case is remanded for further proceedings consistent with this decision of the Board.

Issued: November 8, 2023
Washington, DC

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

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

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