

**United States Department of Labor  
Employees' Compensation Appeals Board**

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<p><b>I.W., Appellant</b></p> <p>and</p> <p><b>DEPARTMENT OF DEFENSE, DEFENSE COMMISSARY AGENCY, CHERRY POINT COMMISSARY, Cherry Point, NC, Employer</b></p>	<p>) ) ) ) ) ) )</p>	<p><b>Docket No. 25-0679</b> <b>Issued: August 7, 2025</b></p>
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*Appearances:*  
*Appellant, pro se*  
*Office of Solicitor, for the Director*

*Case Submitted on the Record*

**DECISION AND ORDER**

Before:  
ALEC J. KOROMILAS, Chief Judge  
JANICE B. ASKIN, Judge  
VALERIE D. EVANS-HARRELL, Alternate Judge

**JURISDICTION**

On July 8, 2025 appellant filed a timely appeal from an April 4, 2025 merit decision and July 1, 2025 nonmerit decision of the Office of Workers' Compensation Programs (OWCP). Pursuant to the Federal Employees' Compensation Act<sup>1</sup> (FECA) and 20 C.F.R. §§ 501.2(c) and 501.3, the Board has jurisdiction over the merits of this case.<sup>2</sup>

**ISSUES**

The issues are: (1) whether appellant has met her burden of proof to establish a low back condition causally related to the accepted November 18, 2021 employment incident; and

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<sup>1</sup> 5 U.S.C. § 8101 *et seq.*

<sup>2</sup> The Board notes that, following the July 1, 2025 decision, appellant submitted additional evidence on appeal to the Board. 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.

(2) whether OWCP properly denied appellant's request for reconsideration of the merits of her claim, pursuant to 5 U.S.C. § 8128(a).

### **FACTUAL HISTORY**

This case has previously been before the Board.<sup>3</sup> The facts and circumstances of the case as set forth in the Board's prior decisions are incorporated herein by reference. The relevant facts are as follows.

On November 30, 2021 appellant, then a 63-year-old store worker, filed a traumatic injury claim (Form CA-1), alleging that on November 18, 2021 she injured her back when she pulled a cart into the chill freezer and ran into a pallet hand jack that had been stored improperly at the entrance to the freezer while in the performance of duty.<sup>4</sup> She stated that she was "jerked hard" and experienced the onset of back pain. Appellant did not stop work.

In support of her claim, appellant provided November 29, 2021 and February 17, 2022 reports wherein Dr. Douglas DeSantis, a Board-certified anesthesiologist, recounted that appellant had been on work restrictions as of the November 18, 2021 employment incident due to chronic sciatica from a prior occupational injury. On examination, Dr. DeSantis observed left-sided sacroiliac tenderness to palpation. He provided an assessment of "[s]acro ilial pain" consistent with the mechanism of injury.

By decision dated March 23, 2022, OWCP accepted that appellant struck a pallet jack at the entrance to a chill freezer in the performance of duty on November 18, 2021, as alleged. However, it denied her claim, finding that the medical evidence of record was insufficient to establish a medical diagnosis in connection with the accepted November 18, 2021 employment incident. OWCP concluded, therefore, that the requirements had not been met to establish an injury as defined by FECA.

On April 12, 2022 appellant requested reconsideration.

Thereafter, OWCP received an April 4, 2022 report by Dr. DeSantis wherein he explained that, during his November 29, 2021 examination, he observed left sacroiliac joint inflammation and evidence of piriformis spasm related to the November 18, 2021 employment incident. He opined that the mechanism of injury appellant described correlated with the findings on physical examination.

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<sup>3</sup> Docket No. 24-0275 (issued October 31, 2024); Docket No. 23-0567 (issued October 25, 2023); Docket No. 22-1065 (issued January 3, 2023).

<sup>4</sup> OWCP assigned the present claim OWCP File No. xxxxxx217. Previously, under OWCP File No. xxxxxx084, OWCP accepted that on August 6, 2008 appellant sustained a lumbar strain and right-hand contusion. Under OWCP File No. xxxxxx149, OWCP accepted that on April 23, 2019 appellant sustained a lower back contusion in a workplace assault while in the performance of duty. On January 24, 2025 OWCP administratively combined the present claim under OWCP No. xxxxxx217, with OWCP File Nos. xxxxxx149 and xxxxxx084, with the latter designated as the mater file.

By decision dated July 5, 2022, OWCP denied appellant's request for reconsideration of the merits of the claim, pursuant to 5 U.S.C. § 8128(a).

On July 11, 2022 appellant appealed to the Board. By decision dated January 3, 2023, the Board affirmed the March 23, 2022 decision, finding that she had not met her burden of proof to establish a diagnosed medical condition in connection with the accepted November 18, 2021 employment incident.<sup>5</sup> Additionally, the Board set aside the July 5, 2022 decision, finding that appellant had submitted relevant and pertinent new evidence on reconsideration requiring a review of the merits of the claim. The case was remanded for a merit review of the evidence submitted on reconsideration and issuance of an appropriate merit decision on her claim.

On January 31, 2023 appellant requested reconsideration.

In a January 20, 2023 report, Dr. DeSantis recounted that appellant's low back pain began with an assault at work and was reinjured by a subsequent workplace incident. Physical therapy had improved her symptoms. On examination, Dr. DeSantis observed lumbosacral tenderness to palpation, and limited flexion of the back secondary to discomfort. He diagnosed "[d]egenerative disc disease of the lumbosacral spine with aggravation of the injuries due to episodes at her workplace."<sup>6</sup> Dr. DeSantis recommended additional physical therapy and prescribed medication.

By decision dated February 7, 2023, OWCP found that appellant had established a medical diagnosis in connection with the accepted November 18, 2021 employment incident. The claim remained denied, however, because the medical evidence of record was insufficient to establish causal relationship between the diagnosed condition and the accepted November 18, 2021 employment incident.

On March 13, 2023 appellant appealed to the Board.<sup>7</sup>

During the pendency of the prior appeal, OWCP received June 14, 2021 and March 31, 2023 questionnaires by Dr. DeSantis regarding appellant's request for reasonable accommodations, wherein he diagnosed chronic lumbar radiculopathy and provided work restrictions.

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<sup>5</sup> Docket No. 22-1065 (issued January 3, 2023).

<sup>6</sup> July 12, 2022 x-rays of the lumbar spine demonstrated mild scoliosis, minimal degenerative anterolisthesis at L4-5, and disc space narrowing and degeneration at L4-5 and L5-S1.

<sup>7</sup> Prior to filing an appeal with the Board, on February 18, 2023, appellant requested reconsideration of the Board's February 7, 2023 decision before OWCP. By decision dated July 12, 2023, while the appeal on the same underlying issue was still pending, OWCP denied appellant's request for reconsideration of the merits of the claim. However, the July 12, 2023 decision is null and void as it was issued while the Board had jurisdiction over the same issue in the case. The Board's *Rules of Procedure* provides: The Board and OWCP may not exercise simultaneous jurisdiction over the same issue in a case on appeal. Following the docketing of an appeal before the Board, OWCP does not retain jurisdiction to render a further decision regarding the issue on appeal until after the Board relinquishes jurisdiction. 20 C.F.R. § 501.2(c)(3). See also *Order Dismissing Appeal*, Docket No. 22-1014 (issued November 29, 2023); *Order Dismissing Appeal*, T.T., Docket No. 20-0864 (issued December 17, 2020); *M.S.*, Docket Nos. 19-1090 & 20-0408 (issued April 20, 2020); *J.W.*, Docket No. 19-1688 (issued March 18, 2020); *George Simpson*, Docket No. 93-0452 (issued February 18, 1994); *Douglas E. Billings*, 41 ECAB 880 (1990).

By decision dated October 25, 2023,<sup>8</sup> the Board affirmed OWCP's February 7, 2023 decision, finding that appellant had not met her burden of proof to establish a lumbar spine condition causally related to the accepted November 18, 2021 employment incident.

On October 30, 2023 appellant requested reconsideration. She submitted a July 12, 2022 report by Dr. DeSantis wherein he recounted appellant's sacra ileal discomfort "secondary to presumptive trauma." Dr. DeSantis noted that x-rays revealed "mild scoliosis and degenerative disc changes at L4[-]5 and L5[-]S1."

In a November 21, 2023 report, Dr. DeSantis recounted that appellant had sustained lumbar radiculopathy and low back discomfort in an April 23, 2019 workplace assault, and predominantly right-sided sacra ileal discomfort caused by the accepted November 18, 2021 employment incident. Dr. DeSantis opined that both conditions would be "lifelong."

In a November 27, 2023 statement, appellant asserted that her lumbar condition was caused by the combined effects of the April 23, 2019 workplace assault accepted under OWCP File No. xxxxxx149, and the accepted November 18, 2021 employment incident under the current claim.<sup>9</sup>

By decision dated January 10, 2024, OWCP denied modification of its October 25, 2023 decision.

Appellant appealed to the Board.

By decision dated October 31, 2024, the Board affirmed OWCP's January 10, 2024 decision, finding that appellant had not met her burden of proof to establish a lumbar spine condition causally related to the accepted November 18, 2021 employment incident.<sup>10</sup>

On December 2, 2024 appellant requested reconsideration. She contended that she continued to require medical treatment for an accepted back injury sustained in an April 2019 workplace assault under OWCP File No. xxxxxx149, as well as the claimed back injury under the present claim, OWCP File No. xxxxxx217.<sup>11</sup> Appellant asserted that new medical evidence was sufficient to establish her claim.

In a November 7, 2024 report, Dr. DeSantis related appellant's increased low back issues and debilitation. On examination, he observed sacroiliac joint tenderness. Dr. DeSantis recommended chiropractic care.

OWCP received a November 14, 2024 report by Dr. Mackenzie Keller, a chiropractor, wherein she found spinal "Restriction(s)/Subluxation(s)" at C1, C4, T4, T5, sacrum, and right pelvis based on clinical findings on examination. Dr. Keller diagnosed segmental and somatic

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<sup>8</sup> Docket No. 23-0567 (issued October 25, 2023).

<sup>9</sup> *Supra* note 4.

<sup>10</sup> Docket No. 24-0275 (issued October 31, 2024).

<sup>11</sup> *Supra* note 4.

dysfunction of the cervical, thoracic, and lumbar region, cervicalgia, thoracic spine pain, low back pain, unspecified, and left shoulder pain.

In reports dated November 18 and 20, 2024, Dr. Keller opined that “an x-ray taken in 2022” revealed “mild scoliosis, minimal degenerative anterolisthesis at L4[-]5, and disc narrowing and degeneration at L4[-]5 and L5[-]S1.” She provided chiropractic adjustments.

By decision dated December 16, 2024, OWCP denied modification.

On March 14, 2025 appellant requested reconsideration.

January 20, 2025 x-rays of the lumbosacral spine revealed disc degeneration at L4-5 and L5-S1, and facet arthropathy. A January 20, 2025 report of x-rays of the pelvis is within normal limits.

A February 7, 2025 magnetic resonance imaging (MRI) scan of the lumbar spine demonstrated a “Grade 1 anterolisthesis of L4 on L5 with broad-based disc bulge and ligamentum flavum/facet hypertrophy resulting in mild-to-moderate central canal stenosis,” moderate bilateral neural foraminal narrowing at L5-S1, and hepatomegaly.

Appellant reiterated that she continued to have residuals of the April 23, 2019 lower back contusion accepted under OWCP File No. xxxxxx149, as well as the back injury alleged under the present claim, OWCP File No. xxxxxx217.

In a January 28, 2025 report, Dr. DeSantis opined that the November 18, 2021 employment incident caused “sacral iliac pain secondary to trauma which correlated with her description of the injury that occurred at work[,]” necessitating subsequent work restrictions. He asserted that “[t]he relationship between this injury and its clinical manifestations” were well-documented in his prior reports. Dr. DeSantis noted that appellant “was recently seen by a pain clinic which did confirm a sacral ileal injury.”

OWCP received a February 24, 2025 report wherein Patrick Carroll, a certified physician assistant (PA-C), recounted a history of injury and diagnosed lumbar degenerative disc disease.

In a March 4, 2025 report, Dr. DeSantis opined that the hepatomegaly revealed by the February 7, 2025 lumbar MRI scan was not clinically correlated.

By decision dated April 4, 2025, OWCP denied modification.

On June 11, 2025 appellant requested reconsideration. In a supporting statement dated June 2, 2025, she reiterated that she had active residuals of the April 23, 2019 lower back contusion accepted under OWCP File No. xxxxxx149, and continuing symptoms of the back injury alleged under the present claim, OWCP File No. xxxxxx217.<sup>12</sup> She asserted that she had submitted sufficient medical evidence to establish her claim and entitlement to medical treatment.

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<sup>12</sup> *Supra* note 4.

By decision dated July 1, 2025, OWCP denied appellant's request for reconsideration of the merits of her claim, pursuant to 5 U.S.C. § 8128(a).

### **LEGAL PRECEDENT -- ISSUE 1**

An employee seeking benefits under FECA<sup>13</sup> 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,<sup>14</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>15</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>16</sup>

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. Second, the employee must submit sufficient evidence to establish that the employment incident caused an injury.<sup>17</sup>

Causal relationship is a medical question that requires rationalized medical opinion evidence to resolve the issue.<sup>18</sup> The opinion of the physician must be based upon a complete factual and medical background, 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 incident.<sup>19</sup>

In a case in which a preexisting condition involving the same part of the body is present and the issue of causal relationship, therefore, involves aggravation, acceleration, or precipitation,

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<sup>13</sup> *Supra* note 1.

<sup>14</sup> See *S.F.*, Docket No. 23-0264 (issued July 5, 2023); *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).

<sup>15</sup> *L.C.*, Docket No. 19-1301 (issued January 29, 2020); *J.H.*, Docket No. 18-1637 (issued January 29, 2020); *James E. Chadden, Sr.*, 40 ECAB 312 (1988).

<sup>16</sup> *P.A.*, Docket No. 18-0559 (issued January 29, 2020); *K.M.*, Docket No. 15-1660 (issued September 16, 2016); *Delores C. Ellyett*, 41 ECAB 992 (1990).

<sup>17</sup> *T.H.*, Docket No. 19-0599 (issued January 28, 2020); *K.L.*, Docket No. 18-1029 (issued January 9, 2019); *John J. Caralone*, 41 ECAB 354 (1989).

<sup>18</sup> *I.J.*, Docket No. 19-1343 (issued February 26, 2020); *T.H.*, 59 ECAB 388 (2008); *Robert G. Morris*, 48 ECAB 238 (1996).

<sup>19</sup> *J.H.*, Docket No. 25-0565 (issued June 24, 2025); *J.P.*, Docket No. 25-0507 (issued June 10, 2023); *M.T.*, Docket No. 24-0103 (issued March 28, 2024); *D.C.*, Docket No. 19-1093 (issued June 25, 2020); see *L.B.*, Docket No. 18-0533 (issued August 27, 2018); see also *Victor J. Woodhams*, 41 ECAB 345 (1989).

the physician must provide a rationalized medical opinion that differentiates between the effects of the work-related injury or disease and the preexisting condition.<sup>20</sup>

### ANALYSIS -- ISSUE 1

The Board finds that appellant has not met her burden of proof to establish a low back condition causally related to the accepted November 18, 2021 employment incident.

Preliminarily, the Board notes that it is unnecessary to consider the evidence appellant submitted prior to the issuance of OWCP's January 10, 2024 decision, because the Board considered that evidence in its October 31, 2024 decision. Findings made in prior Board decisions are *res judicata* absent further review by OWCP under section 8128 of FECA.<sup>21</sup>

Dr. DeSantis opined on January 28, 2025 that the accepted November 18, 2021 employment incident caused trauma resulting in sacroiliac pain. He indicated that appellant was evaluated at a pain clinic where she was diagnosed with a "sacral ileal injury." Dr. DeSantis asserted that the causal relationship between the "injury and its clinical manifestations" was set forth in his prior reports. The Board, however, has held that a report is of limited probative value regarding causal relationship if it does not contain sufficient medical rationale explaining how a given medical condition was causally related to the accepted employment incident.<sup>22</sup> The Board has explained that such rationale is especially important in a case involving a preexisting condition.<sup>23</sup> As such, this evidence is insufficient to establish appellant's claim.

OWCP also received reports dated November 14 through 20, 2024 by Dr. Keller, a chiropractor, wherein she diagnosed spinal subluxations based on clinical examination. Dr. Keller opined that an x-ray taken in 2022 revealed "mild scoliosis, minimal degenerative anterolisthesis at L4-5, and disc narrowing and degeneration at L4-5 and L5-S1." However, chiropractors are physicians under FECA only to the extent that their reimbursable expenses are limited to treatment consisting of the manual manipulation of the spine to correct a subluxation as demonstrated to exist by x-rays.<sup>24</sup> As Dr. Keller did not diagnose a subluxation as demonstrated to exist by x-rays,

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<sup>20</sup> Federal (FECA) Procedure Manual, Part 2 -- Claims, *Causal Relationship*, Chapter 2.805.3e (May 2023); *N.N.*, Docket No. 24-0510 (issued July 16, 2024); *J.L.*, Docket No. 20-0717 (issued October 15, 2020).

<sup>21</sup> *D.A.*, Docket No. 19-1965 (issued February 10, 2021); *G.B.*, Docket No. 19-1448 (issued August 21, 2020); *Clinton E. Anthony, Jr.*, 49 ECAB 476, 479 (1998).

<sup>22</sup> *C.H.*, Docket No. 25-0498 (issued May 16, 2025); *D.S.*, Docket No. 25-0158 (issued February 25, 2025); *J.B.*, Docket No. 21-0011 (issued April 20, 2021); *A.M.*, Docket No. 19-1394 (issued February 23, 2021).

<sup>23</sup> *Id.*

<sup>24</sup> 5 U.S.C. § 8101(2). See also 20 C.F.R. § 10.311; *D.S.*, Docket No. 25-0564 (issued June 25, 2025); *M.N.*, Docket No. 25-0271 (issued March 11, 2025); *E.L.*, Docket No. 24-0924 (issued November 14, 2024); *S.R.*, Docket No. 22-0421 (issued July 15, 2022); *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).

she is not considered a physician as defined under FECA and her reports do not constitute competent medical evidence.<sup>25</sup>

OWCP also received a February 24, 2025 report by Mr. Carroll, a PA-C. Certain healthcare providers such as physician assistants are not considered “physician[s]” as defined under FECA.<sup>26</sup> Consequently, their medical findings and/or opinions will not suffice for purposes of establishing entitlement to FECA benefits.<sup>27</sup>

OWCP also received imaging studies, including January 20, 2025 lumbosacral and pelvic x-rays, and a February 7, 2025 lumbar MRI scan. The Board has held that diagnostic tests, standing alone, lack probative value on the issue of causal relationship as they do not provide an opinion on causal relationship.<sup>28</sup> Thus, this evidence is insufficient to establish appellant’s burden of proof.

As the medical evidence of record is insufficient to establish a medical condition causally related to the accepted November 18, 2021 employment incident, the Board finds that appellant has not met her 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 and 20 C.F.R. §§ 10.605 through 10.607.

#### **LEGAL PRECEDENT -- ISSUE 2**

Section 8128(a) of FECA vests OWCP with discretionary authority to determine whether to review an award for or against compensation. The Secretary of Labor may review an award for or against compensation at any time on his or her own motion or on application.<sup>29</sup>

To require OWCP to reopen a case for merit review pursuant to FECA, the claimant must provide evidence or an argument which: (1) shows that OWCP erroneously applied or interpreted a specific point of law; (2) advances a relevant legal argument not previously considered by

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<sup>25</sup> *M.N., id.; E.L., id.; J.D.*, Docket No. 22-0240 (issued June 8, 2022); *R.P.*, Docket No. 19-0271 (issued July 24, 2019); *George E. Williams, id.*

<sup>26</sup> 5 U.S.C. § 8101(2); 20 C.F.R. § 10.5(t).

<sup>27</sup> Section 8101(2) of FECA provides that physician “includes surgeons, podiatrists, dentists, clinical psychologists, optometrists, chiropractors, and osteopathic practitioners within the scope of their practice as defined by 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) (lay individuals such as physician assistants, nurses, and physical therapists are not competent to render a medical opinion under FECA). See also *C.M.*, Docket No. 25-0408 (issued April 16, 2025) (physician assistants are not considered physicians as defined by FECA).

<sup>28</sup> *P.G.*, Docket No. 24-0511 (issued June 26, 2024); *C.F.*, Docket No. 18-1156 (issued January 22, 2019); *T.M.*, Docket No. 08-0975 (issued February 6, 2009).

<sup>29</sup> 5 U.S.C. § 8128(a); see *L.C.*, Docket No. 25-0444 (issued April 23, 2025); *L.D.*, Docket No. 18-1468 (issued February 11, 2019); *V.P.*, Docket No. 17-1287 (issued October 10, 2017); *D.L.*, Docket No. 09-1549 (issued February 23, 2010); *W.C.*, 59 ECAB 372 (2008).

OWCP; or (3) constitutes relevant and pertinent new evidence not previously considered by OWCP.<sup>30</sup>

A request for reconsideration must be received by OWCP within one year of the date of OWCP's decision for which review is sought.<sup>31</sup> If it chooses to grant reconsideration, it reopens and reviews the case on its merits.<sup>32</sup> If the request is timely, but fails to meet at least one of the requirements for reconsideration, OWCP will deny the request for reconsideration without reopening the case for review on the merits.<sup>33</sup>

## **ANALYSIS -- ISSUE 2**

The Board finds that OWCP properly denied appellant's request for reconsideration of the merits of her claim, pursuant to 5 U.S.C. § 8128(a).

Appellant, in her June 2, 2025 statement in support of her April 11, 2025 request for reconsideration, asserted that she had active residuals of the low back injury accepted under OWCP File No. xxxxxx149, and continuing symptoms from the alleged November 18, 2021 employment injury under the present claim. However, appellant neither alleged nor demonstrated that OWCP erroneously applied or interpreted a specific point of law. Additionally, she did not advance a relevant legal argument not previously considered by OWCP. As this argument submitted on reconsideration was cumulative, duplicative, or repetitive in nature, it was insufficient to warrant reopening the claim for merit review.<sup>34</sup> Consequently, appellant is not entitled to further review of the merits of her claim based on either the first or second above-noted requirements under 20 C.F.R. § 10.606(b)(3).

Additionally, appellant has not submitted any relevant and pertinent new evidence not previously considered by OWCP. Therefore, she is not entitled to a review of the merits based on the third above-noted requirement under 20 C.F.R. § 10.606(b)(3).<sup>35</sup>

The Board, accordingly, finds that as appellant has not met any of the requirements under 20 C.F.R. § 10.606(b)(3), pursuant to 20 C.F.R. § 10.608 OWCP properly denied merit review.

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<sup>30</sup> 20 C.F.R. § 10.606(b)(3); *see M.S.*, Docket No. 18-1041 (issued October 25, 2018); *L.G.*, Docket No. 09-1517 (issued March 3, 2010); *C.N.*, Docket No. 08-1569 (issued December 9, 2008).

<sup>31</sup> 20 C.F.R. § 10.607(a). The one-year period begins on the next day after the date of the original contested decision. *Supra* note 20 at Chapter 2.1602.4 (September 2020). Timeliness is determined by the document receipt date of the request for reconsideration as indicated by the received date in the Integrated Federal Employees' Compensation System (iFECS). *Id.* at Chapter 2.1602.4b.

<sup>32</sup> *Id.* at § 10.608(a); *see D.C.*, Docket No. 19-0873 (issued January 27, 2020); *M.S.*, 59 ECAB 231 (2007).

<sup>33</sup> *Id.* at § 10.608(b); *see P.V.*, Docket No. 25-0547 (issued June 23, 2025); *T.V.*, Docket No. 19-1504 (issued January 23, 2020); *E.R.*, Docket No. 09-1655 (issued March 18, 2010).

<sup>34</sup> *D.V.*, Docket No. 24-0671 (issued August 24, 2024); *J.R.*, Docket No. 23-0980 (issued January 23, 2024); *J.V.*, Docket No. 19-1554 (issued October 9, 2020); *see T.B.*, Docket No. 16-1130 (issued September 11, 2017); *Eugene F. Butler*, 36 ECAB 393, 398 (1984).

<sup>35</sup> *See L.C.*, *supra* note 29.

**CONCLUSION**

The Board finds that appellant has not met her burden of proof to establish a low back condition causally related to the accepted November 18, 2021 employment incident. The Board further finds that OWCP properly denied her request for reconsideration of the merits of her claim, pursuant to 5 U.S.C. § 8128(a).

**ORDER**

**IT IS HEREBY ORDERED THAT** the April 4 and July 1, 2025 decisions of the Office of Workers' Compensation Programs are affirmed.

Issued: August 7, 2025  
Washington, DC

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

Janice B. Askin, Judge  
Employees' Compensation Appeals Board

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