

)	
C.M., Appellant)	
)	
and)	Docket No. 24-0905
)	Issued: July 2, 2025
U.S. POSTAL SERVICE, HEMET POST)	
OFFICE, Hemet, CA, Employer)	
)	

Case Submitted on the Record

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

On August 26, 2024 appellant filed a timely appeal from a July 26, 2024 merit decision of the Office of Workers' Compensation Programs (OWCP). Pursuant to the Federal Employees' Compensation Act¹ (FECA) and 20 C.F.R. §§ 501.2(c) and 501.3, the Board has jurisdiction over the merits of this case.

The issue is whether appellant has met her burden of proof to establish total disability from work during the period December 22, 2022 through March 31, 2024, as causally related to her accepted employment injury.

On December 1, 2021 appellant, then a 54-year-old sales, services, and distribution associate, filed an occupational disease claim (Form CA-2) alleging that she sustained bilateral

¹ 5 U.S.C. § 8101 *et seq.*

tingling of the feet, stabbing pain, swelling, instability, pulling, and tenderness symptoms due to factors of her federal employment including the repetitive handling of mail. She noted that she first became aware of her condition and realized its relation to her federal employment on May 22, 2021. Appellant stopped work on May 22, 2021. On February 2, 2022 OWCP accepted the claim for bilateral plantar fascial fibromatosis. It paid appellant wage-loss compensation on the supplemental rolls from August 23 to December 16, 2021. On December 22, 2022 the Office of Personnel Management (OPM) approved appellant's application for disability retirement, effective May 17, 2023.

In a report dated December 17, 2021, and duty status report (Form CA-17) of even date, Dr. Aimee French, a Board-certified internist, diagnosed chronic bilateral plantar fasciitis. She noted that appellant had been provided orthotics and that no work restrictions were currently indicated for this condition.

In a note dated September 27, 2022, Melanie Freeman, a physician assistant, indicated that appellant had been diagnosed with acute promyelotic leukemia and was admitted to a hospital on September 21, 2022. She noted that appellant would require hospitalization for one to two months for chemotherapy treatment and supportive care. Ms. Freeman stated that after discharge, appellant would continue to require clinic visits multiple days per week for continued chemotherapy treatment. She advised that appellant would be highly immunocompromised and unable to work during that time, requesting that she be excused from work-related commitments indefinitely.

In a Form CA-17 dated January 18, 2023, Dr. French noted that appellant had reduced range of motion. She related that appellant was able to perform the regular duties of her employment and was advised to resume work as of that date, noting that appellant should be afforded a stool.

In a letter dated March 30, 2023, Lydia Chou, a certified family nurse practitioner, noted a current diagnosis of acute promyelotic leukemia and stated that appellant's comorbidities may continue to cause work limitations after her recovery period from that condition.

In reports dated January 3 and February 14, 2024, Dr. Brad Katzman, a podiatrist, examined appellant for complaints of pain in the heels and ankles, swelling, and stiffness. He noted that she had right ankle and subtalar joint limited motion, and he diagnosed work-related plantar fasciitis, fibromyalgia, and bilateral calcaneal spurs. Dr. Katzman noted that appellant's last treatment for foot pain was in November 2022 and that she was currently retired.

In a note dated March 4, 2024, Linda M. Price, Ph.D, a psychotherapist, diagnosed major depressive disorder, severe with anxious distress. She stated that traumatic experiences at work beginning in December 2022 had made it impossible for appellant to return to any job assignment with the employing establishment. Dr. Price advised that emotional stress would increase her anxiety disorder and cause appellant to reexperience the trauma. She stated that returning to work at the employing establishment would worsen appellant's anxiety and depression.

On April 2, 2024 appellant elected to receive FECA benefits effective "December 22, 2022 through March 31, 2024" in lieu of benefits from OPM.

In a development letter dated May 1, 2024, OWCP requested that appellant submit additional medical evidence to support disability from December 22, 2022 through March 31, 2024. It afforded her 30 days to submit the requested evidence.

On May 6, 2024 OWCP accepted the additional conditions of bilateral foot calcaneal spurs.

Appellant resubmitted evidence previously of record. She also submitted a statement arguing that she was entitled to compensation for disability from work for the period December 22, 2022 through March 31, 2024. Appellant alleged that nonwork-related conditions causing work restrictions should be considered in determining disability status.

By decision dated July 26, 2024, OWCP denied appellant's claim for compensation, finding that she had not established disability from work during the period December 22, 2022 through March 31, 2024 as causally related to the accepted employment injury.

LEGAL PRECEDENT

An employee seeking benefits under FECA² has the burden of proof to establish the essential elements of his or her claim,³ including that any disability or specific condition for which compensation is claimed is causally related to the employment injury.⁴ For each period of disability claimed, the employee has the burden of proof to establish that he or she was disabled from work as a result of the accepted employment injury.⁵ Whether a particular injury causes an employee to become disabled from work, and the duration of that disability, are medical issues that must be proven by a preponderance of probative and reliable medical opinion evidence.⁶

The medical evidence required to establish causal relationship between a claimed period of disability and an employment injury is rationalized medical opinion evidence. The opinion of the physician must be based on a complete factual and medical background of appellant, must be one of reasonable medical certainty, and must be supported by medical rationale explaining the nature of the relationship between the claimed disability and the accepted employment injury.⁷

The Board will not require OWCP to pay compensation for disability in the absence of medical evidence directly addressing the specific dates of disability for which compensation is

² 5 U.S.C. § 8101 *et seq.*

³ See *L.S.*, Docket No. 18-0264 (issued January 28, 2020); *B.O.*, Docket No. 19-0392 (issued July 12, 2019).

⁴ See *S.F.*, Docket No. 20-0347 (issued March 31, 2023); *D.S.*, Docket No. 20-0638 (issued November 17, 2020); *F.H.*, Docket No. 18-0160 (issued August 23, 2019); *C.R.*, Docket No. 18-1805 (issued May 10, 2019); *Kathryn Haggerty*, 45 ECAB 383 (1994); *Elaine Pendleton*, 40 ECAB 1143 (1989).

⁵ *T.W.*, Docket No. 19-1286 (issued January 13, 2020).

⁶ *S.G.*, Docket No. 18-1076 (issued April 11, 2019); *Fereidoon Kharabi*, 52 ECAB 291-92 (2001).

⁷ See *B.P.*, Docket No. 23-0909 (issued December 27, 2023); *D.W.*, Docket No. 20-1363 (issued September 14, 2021); *Y.S.*, Docket No. 19-1572 (issued March 12, 2020).

claimed. To do so would essentially allow an employee to self-certify his or her disability and entitlement to compensation.⁸

ANALYSIS

The Board finds that appellant has not met her burden of proof to establish disability from work during the period December 22, 2022 through March 31, 2024, as causally related to the accepted employment injury.

The evidence of record establishes that appellant was diagnosed with nonemployment-related acute promyelotic leukemia and was admitted to a hospital on September 21, 2022. Following her hospitalization, appellant retired on December 22, 2022. On April 2, 2024 she elected to receive FECA benefits effective “December 22, 2022 through March 31, 2024” in lieu of benefits from OPM.

In support of her claim for compensation, appellant submitted a Form CA-17 dated January 18, 2023 from Dr. French. Dr. French related that appellant had reduced range of motion. However, she also related that appellant was able to perform the regular duties of her employment and was advised to resume work as of that date. Dr. French did not offer an opinion that appellant was disabled during the claimed period causally related to an accepted condition. Therefore, this evidence is insufficient to establish appellant’s disability claim.⁹

In reports dated January 3 and February 14, 2024, Dr. Katzman noted that appellant had right ankle and subtalar joint limited motion. He diagnosed work-related plantar fasciitis, fibromyalgia, and bilateral calcaneal spurs. Dr. Katzman noted that appellant’s last treatment for footpain was in November 2022 and that she was currently retired. However, he also did not offer an opinion that appellant was disabled during the claimed period causally related to the accepted employment injury. Therefore, these reports are insufficient to establish appellant’s disability claim.¹⁰

In a note dated March 4, 2024, Dr. Price diagnosed major depressive disorder, severe with anxious distress. She stated that traumatic experiences at work beginning in December 2022 had made it impossible for appellant to return to any job assignment with the employing establishment. The Board notes that appellant’s claim has not been accepted for an emotional condition. OWCP also received a letter dated March 30, 2023 wherein Ms. Chou, a certified family nurse practitioner, noted appellant’s nonemployment-related diagnosis of acute promyelotic leukemia and indicated that appellant’s comorbidities may continue to cause work limitations. However, certain

⁸ See *M.J.*, Docket No. 19-1287 (issued January 13, 2020); *William A. Archer*, 55 ECAB 674 (2004); *Fereidoon Kharabi*, *supra* note 6.

⁹ *S.S.*, Docket No. 21-0763 (issued November 12, 2021); *L.B.*, Docket No. 18-0533 (issued August 27, 2018); *D.K.*, Docket No. 17-1549 (issued July 6, 2018).

¹⁰ See *T.S.*, Docket No. 20-1229 (issued August 6, 2021); *S.K.*, Docket No. 19-0272 (issued July 21, 2020); *T.T.*, Docket No. 18-1054 (issued April 8, 2020); *L.B.*, *id.*; *D.K.*, *id.*; *Y.D.*, Docket No. 16-1896 (issued February 10, 2017).

healthcare providers such as psychotherapists and nurse practitioners are not considered physicians as defined under FECA.¹¹ Consequently, this evidence is insufficient to establish appellant's claim.

While appellant has also submitted statements alleging that she has established disability for work, her own belief that she is not able to go back to work due to the accepted employment injury does not establish disability for work.¹²

As the medical evidence of record is insufficient to establish that appellant was totally disabled during the claimed period of disability, causally related to the accepted employment injury, 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(a) and 20 C.F.R. §§ 10.605 through 10.607.

CONCLUSION

The Board finds that appellant has not met her burden of proof to establish total disability from work during the period December 22, 2022 through March 31, 2024, as causally related to her accepted employment injury.

¹¹ 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 (May 2023); *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 R.P.*, Docket No. 25-0054 (issued December 9, 2024) (nurse practitioners are not physicians under FECA); *D.H.*, Docket No. 17-0073 (issued July 11, 2017) (evidence from a psychotherapist does not constitute competent medical evidence under FECA as a psychotherapist is not considered a physician as defined under section 8102(2) of FECA).

¹² *M.H.*, Docket No. 15-1611 (issued November 3, 2015); *Margaret A. Donnelly*, 15 ECAB 40 (1963).

ORDER

IT IS HEREBY ORDERED THAT the July 26, 2024 decision of the Office of Workers' Compensation Programs is affirmed.

Issued: July 2, 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