United States Department of Labor
Employees' Compensation Appeals Board

L.P., Appellant	)	
and	)	**Docket No. 25-0529**
	)	**Issued: June 23, 2025**
SOCIAL SECURITY ADMINISTRATION, Lake City, FL, Employer	)	

Appearances:
Wayne Johnson, Esq., for the appellant[1]
Office of Solicitor, for the Director

Case Submitted on the Record

DECISION AND ORDER

Before:
ALEC J. KOROMILAS, Chief Judge
PATRICIA H. FITZGERALD, Deputy Chief Judge
VALERIE D. EVANS-HARRELL, Alternate Judge

JURISDICTION

On May 8, 2025, appellant, through counsel, filed a timely appeal from a February 7, 2025 merit decision of the Office of Workers' Compensation Programs (OWCP). Pursuant to the Federal Employees' Compensation Act[2] (FECA) and 20 C.F.R. §§ 501.2(c) and 501.3, the Board has jurisdiction over the merits of this case.

ISSUE

The issue is whether appellant has met her burden of proof to establish a medical condition causally related to the accepted June 30, 2021 employment incident.

[1] In all cases in which a representative has been authorized in a matter before the Board, no claim for a fee for legal or other service performed on appeal before the Board is valid unless approved by the Board. 20 C.F.R. § 501.9(e). No contract for a stipulated fee or on a contingent fee basis will be approved by the Board. *Id.* An attorney or representative's collection of a fee without the Board's approval may constitute a misdemeanor, subject to fine or imprisonment for up to one year or both. *Id.*; *see also* 18 U.S.C. § 292. Demands for payment of fees to a representative, prior to approval by the Board, may be reported to appropriate authorities for investigation.

[2] 5 U.S.C. § 8101 *et seq*.

FACTUAL HISTORY

On August 11, 2021, appellant, then a 56-year-old insurance administrator, filed a traumatic injury claim (Form CA-1) alleging that on June 30, 2021 she injured her buttocks, back, and hands, and experienced a sharp pain in her head when she tripped and fell backward over a parking block in the parking lot while in the performance of duty. She stopped work on June 30, 2021.

OWCP received a September 16, 2021 report from a certified physician assistant and physical therapy reports dated September 21 through October 18, 2021.

An October 6, 2021 lumbar magnetic resonance imaging (MRI) scan report demonstrated minimal age-related changes of the lumbar spine with mild right greater than left foraminal stenosis at L5-S1 with minimal progression since August 2019. No high-grade spinal canal or foraminal stenosis, acute fractures or subluxation was reported.

In a development letter dated November 4, 2021, OWCP informed appellant of the deficiencies of her claim. It advised her of the type of additional factual and medical evidence needed and provided a questionnaire for completion. In a separate development letter of even date, OWCP requested the employing establishment provide additional information regarding the circumstances of the June 30, 2021 injury. It afforded both parties 30 days to submit the requested information.

OWCP received a November 19, 2021 response to its development questionnaire from appellant and letters dated November 9, and 22, 2021 from the employing establishment, which confirmed that appellant was on its premises at the time of the June 30, 2021 employment incident.

OWCP also received reports dated July 6 and September 30, 2021 from an advanced practice registered nurse (APRN), and physical therapy reports dated October 27 and 29, 2021.

By decision dated December 9, 2021, OWCP denied the traumatic injury claim, finding that appellant had not established a diagnosed medical condition in connection with the June 30, 2021 accepted employment incident. Thus, it found that the requirements had not been met to establish that she sustained an injury as defined by FECA.

On December 9, 2022, appellant, through counsel, requested reconsideration.

A June 14, 2022 cervical MRI scan demonstrated mild degenerative disc diseases at C4-C5 and C5-C6, without spinal canal or foraminal stenosis, and mild reversal of normal cervical lordosis.

In a February 23, 2022 report, Dr. Ernest P. Deleon, a Board-certified family practitioner, provided assessments of chest pain, unspecified type, body mass index, shortness of breath, asthma, vitamin D deficiency, Vitamin B12 deficiency, dyslipidemia, and bulge of lumbar disc without myelopathy. He indicated that appellant was seen for increased shortness of breath for a month and that her shortness of breath with chest pain radiated to both of appellant's arms and upper back.

An August 22, 2022 report from an APRN was also received.

By decision dated December 30, 2022, OWCP modified its prior decisions to find that appellant had established a diagnosed medical condition in connection with the accepted employment incident. The claim remained denied, however, as the medical evidence of record was insufficient to establish causal relationship between appellant's diagnosed medical conditions and the accepted employment incident.

On December 29, 2023, OWCP received reports from an APRN dated May 5, May 25, July 26, August 18, September 22, and October 20, 2022.

In a July 7, 2022 report, Dr. Ernesto Alonso, a Board-certified neurologist, provided assessments of migraine with aura, intractable, without status migraineosus; cervical radiculopathy; depression; anxiety disorder; and constipation.

On December 30, 2023, appellant, through counsel, requested reconsideration.

By decision dated January 16, 2024, OWCP denied modification of its December 30, 2022 decision. It noted that the medical reports received were signed by an APRN.

On January 16, 2025, OWCP received Dr. Deleon's July 7, 2021 report, which assessed malignant neoplasm of breast, anxiety with depression, dyslipidemia, body max index adult, asthma and muscle spasm.

By decision dated February 7, 2025, OWCP denied modification of its January 16, 2024 decision.

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]

[3] *Id.*

[4] *E.K.,* Docket No. 22-1130 (issued December 30, 2022); *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).

[5] *L.C.,* Docket No. 19-1301 (issued January 29, 2020); *J.H.,* Docket No. 18-1637 (issued January 29, 2020); *R.C.,* 59 ECAB 427 (2008); *James E. Chadden, Sr.,* 40 ECAB 312 (1988).

[6] *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).

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. The first component is whether the employee actually experienced the employment incident at the time and place, and in the manner alleged. The second component is whether the employment incident caused an 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 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.[9] Neither the mere fact that a disease or condition manifests itself during a period of employment, nor the belief that the disease or condition was caused or aggravated by employment factors or incidents is sufficient to establish causal relationship.[10]

ANALYSIS

The Board finds that appellant has not met her burden of proof to establish a medical condition causally related to the accepted June 30, 2021 employment incident.

In support of her claim, appellant submitted July 7, 2021 and February 23, 2022 reports from Dr. Deleon and a July 7, 2022 report from Dr. Alonso which noted diagnoses of multiple medical conditions. However, neither Drs. Deleon nor Alonso offered an opinion regarding the cause of appellant's diagnosed conditions. The Board has held that medical evidence that does not offer an opinion regarding the cause of an employee's condition or disability is of no probative value on the issue of causal relationship.[11] Thus, these reports are insufficient to establish appellant's claim.

OWCP also received evidence signed solely by an ARPN, physician assistant and/or a physical therapist. However, certain healthcare providers such as nurse practitioners, physician

[7] *T.H.,* Docket No. 19-0599 (issued January 28, 2020); *K.L.,* Docket No. 18-1029 (issued January 9, 2019); *John J. Carlone,* 41 ECAB 354 (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).

[9] *F.S.,* Docket No. 23-0112 (issued April 26, 2023); *T.L.,* Docket No. 18-0778 (issued January 22, 2020); *Y.S.,* Docket No. 18-0366 (issued January 22, 2020); *Victor J. Woodhams,* 41 ECAB 345, 352 (1989).

[10] *L.W.,* Docket No. 24-0947 (issued January 31, 2025); *T.H.,* Docket No. 18-1736 (issued March 13, 2019); *Dennis M. Mascarenas,* 49 ECAB 215 (1997).

[11] *See F.J.,* Docket No. 25-0094 (issued February 19, 2025); *A.D.,* Docket No. 24-0411 (issued June 20, 2024); *T.H.,* Docket No. 21-1429 (issued November 2, 2023); *L.B.,* Docket No. 18-0533 (issued August 27, 2018); *D.K.,* Docket No. 17-1549 (issued July 6, 2018).

assistants, and physical therapists are not considered physicians as defined under FECA.[12] Thus, this evidence is of no probative value and is insufficient to establish appellant's claim.

The remainder of the evidence of record consisted of MRI scan reports. The Board has held, however, that diagnostic studies, standing alone, lack probative value on the issue of causal relationship as they do not address whether the accepted employment injury resulted in appellant's diagnosed medical conditions.[13]

As appellant has not submitted rationalized medical evidence establishing a medical condition causally related to the accepted June 30, 2021 employment incident, the Board finds that she has not met her burden of proof to establish her claim.[14]

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 a medical condition causally related to the accepted June 30, 2021 employment incident.

[12] Section 8101(2) of FECA provides that medical opinions can only be given by a qualified physician. This section defines a physician as 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) (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 D.P.,* Docket No. 25-0497 (issued May 15, 2025) (APRNs are not considered physicians as defined by FECA); *L.C.,* Docket No. 25-0444 (issued April 23, 2025) (physician assistants are not considered physicians as defined by FECA); *K.H.,* Docket No. 25-0439 (issued April 23, 2025) (physical therapists are not considered physicians as defined under FECA).

[13] *L.A.,* Docket No. 22-0463 (issued September 29, 2022); *D.K.,* Docket No. 21-0082 (issued October 26, 2021); *O.C.,* Docket No. 20-0514 (issued October 8, 2020); *R.J.,* Docket No. 19-0179 (issued May 26, 2020).

[14] *See T.M.,* Docket No. 25-0467 (issued May 21, 2025); *R.H.*, Docket No. 25-0188 (issued January 31, 2025).

ORDER

IT IS HEREBY ORDERED THAT the February 7, 2025 decision of the Office of Workers' Compensation Programs is affirmed.

Issued: June 23, 2025
Washington, DC

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

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

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