

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

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<b>L.O., Appellant</b>	)	)
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<b>and</b>	)	<b>Docket No. 25-0764</b>
		<b>Issued: September 24, 2025</b>
<b>DEPARTMENT OF HOMELAND SECURITY, MGMT FEDERAL PROTECTIVE SERVICE REGION, El Paso, TX, Employer</b>	)	)
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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  
PATRICIA H. FITZGERALD, Deputy Chief Judge  
VALERIE D. EVANS-HARRELL, Alternate Judge

**JURISDICTION**

On August 6, 2025 appellant filed a timely appeal from a July 2, 2025 merit 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.

**ISSUE**

The issue is whether appellant has met his burden of proof to establish a diagnosed medical condition in connection with the accepted March 25, 2025 employment incident.

**FACTUAL HISTORY**

On March 25, 2025 appellant, then a 29-year-old inspector, investigator, and compliance officer, filed a traumatic injury claim (Form CA-1) alleging that on that date he sustained an injury

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

to his left shin and ankle, right foot, and knees when he misstepped and fell down steps while exiting a building in the performance of duty. He stopped work on the claimed date of injury and returned to work on March 26, 2025.

In a March 25, 2025 visit discharge summary, Troy Reynolds, a physician assistant, reported that appellant was evaluated at urgent care on that date and underwent diagnostic testing through x-ray scans. He diagnosed contusions of left lower leg, right foot and knee, and left knee. Mr. Reynolds released appellant to work with restrictions.

Appellant also submitted a duty status report (Form CA-17) dated March 25, 2025 from an unidentifiable health care provider, which included light-duty work restrictions and noted clinical findings of tenderness to the knees, the right foot, and left lower leg.

In an April 2, 2025 development letter, OWCP informed appellant of the deficiencies of his claim. It advised him of the type of factual and medical evidence required and provided a questionnaire for his completion. OWCP afforded appellant 60 days to submit the necessary evidence.

Following the development letter, OWCP received a report of work status (Form CA-3), which noted that appellant stopped work on March 25, 2025, and returned to full-time regular-duty work on March 28, 2025.

In a follow-up letter dated April 30, 2025, OWCP advised appellant that it had conducted an interim review, and the evidence remained insufficient to establish his claim. It noted that he had 60 days from the April 2, 2025 letter to submit the necessary evidence. OWCP further advised that if the evidence was not received during this time, it would issue a decision based on the evidence contained in the record.

In response to OWCP's development letter, appellant provided March 25, 2025 x-rays of the left tibia and fibula, which revealed no acute fracture, and the right foot, which revealed no evidence of fracture or other acute abnormality.

In a March 25, 2025 report, Mr. Reynolds reported evaluating appellant on that date after he fell down a flight of stairs at work resulting in pain in his left lower leg, right foot, and both knees. He noted abnormal examination findings including abnormal gait and posture, antalgic gait, and limp favoring the left lower extremity; left muscular abnormality of the distal lower extremity and tenderness over the left lateral lower leg distally; right muscular tenderness of the distal lower extremity; and right muscular ankle/foot tenderness over foot, tenderness distally, and tenderness medially. Mr. Reynolds diagnosed contusion of left lower leg, initial encounter; contusion of right foot, initial encounter; contusion of right knee, initial encounter; and contusion of left knee, initial encounter.

In a March 28, 2025 report, Mr. Reynolds reported that appellant presented for a follow-up evaluation for pain in the left knee, left lower leg, right lower extremity, and right knee after falling down the stairs at work on March 25, 2025. He reiterated the diagnoses of contusion of left lower leg, contusion of right foot, contusion of right knee, and contusion of left knee and determined that the conditions had resolved. Mr. Reynolds concluded that appellant had reached

maximum medical improvement (MMI), could return to work without restrictions as of March 28, 2025, and was released from medical care.

By decision dated July 2, 2025, OWCP accepted that the March 25, 2025 employment incident occurred, as alleged. However, it denied the claim, finding that the evidence of record was insufficient to establish a diagnosed medical condition in connection with the accepted March 25, 2025 employment incident. OWCP concluded, therefore, that the requirements had not been met to establish an injury as defined by FECA.

### **LEGAL PRECEDENT**

An employee seeking benefits under FECA<sup>2</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>3</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>4</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>5</sup>

To determine whether a federal employee has sustained a traumatic injury in the performance of duty, it must be determined whether fact of injury has been established. 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 medical evidence to establish that the employment incident caused an injury.<sup>6</sup>

The medical evidence required to establish causal relationship between a claimed specific condition and an employment incident is rationalized medical opinion evidence.<sup>7</sup> 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

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<sup>2</sup> *Id.*

<sup>3</sup> *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).

<sup>4</sup> *S.H.*, Docket No. 22-0391 (issued June 29, 2022); *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>5</sup> *E.H.*, Docket No. 22-0401 (issued June 29, 2022); *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>6</sup> *H.M.*, Docket No. 22-0343 (issued June 28, 2022); *T.J.*, Docket No. 19-0461 (issued August 11, 2020); *K.L.*, Docket No. 18-1029 (issued January 9, 2019); *John J. Caralone*, 41 ECAB 354 (1989).

<sup>7</sup> *S.M.*, Docket No. 22-0075 (issued May 6, 2022); *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).

nature of the relationship between the diagnosed condition and specific employment incident identified by the employee.<sup>8</sup>

Pursuant to OWCP's procedures, no development of a claim is necessary where the condition reported is a minor one, which can be identified on visual inspection by a lay person (e.g., burn, laceration, insect sting, or animal bite).<sup>9</sup> No medical report is required to establish a minor condition such as a contusion.<sup>10</sup>

## ANALYSIS

The Board finds that appellant has met his burden of proof to establish a diagnosed medical condition in connection with the accepted March 25, 2025 employment incident.

On March 25, 2025 appellant alleged bilateral lower extremity injuries after he fell down stairs at work. The evidence of record indicates that appellant was seen on that date by Mr. Reynolds, a physician assistant, who noted his March 25, 2025 objective findings, described his clinical findings, and diagnoses of left lower leg contusion, left knee contusion, right knee contusion, and right foot contusion following the accepted March 25, 2025 employment incident. The Board finds that these diagnoses are consistent with appellant's physical examination and the mechanism of injury, as noted by Mr. Reynolds on March 25, 2025, the date of the employment incident.<sup>11</sup>

OWCP's procedures provide that, if a condition reported is a minor one, such as a burn, laceration, insect sting, or animal bite, which can be identified on visual inspection by a lay person, a case may be accepted without a medical report.<sup>12</sup> As the medical evidence of record establishes a diagnosed medical condition in connection with the accepted March 25, 2025 employment incident, the Board finds that appellant has met his burden of proof.<sup>13</sup>

As appellant's left lower leg contusion, left knee contusion, right knee contusion, and right foot contusion are visible injuries, the case must be remanded for OWCP to apply its procedures

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<sup>8</sup> *J.D.*, Docket No. 22-0935 (issued December 16, 2022); *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).

<sup>9</sup> Federal (FECA) Procedure Manual, Part 2 -- Claims, *Initial Development of Claims*, Chapter 2.800.6a (May 2023). *See also id.* at Part 2 -- Claims, *Causal Relationship*, Chapter 2.805.3c (May 2023); *D.J.*, Docket No. 25-0581 (issued September 17, 2025); *A.J.*, Docket No. 19-1289 (issued December 31, 2019).

<sup>10</sup> *Id.*; *see also B.C.*, Docket No. 20-0498 (issued August 27, 2020); *S.H.*, Docket No. 20-0113 (issued June 24, 2020); *M.A.*, Docket No. 13-1630 (issued June 18, 2014).

<sup>11</sup> *J.W.*, Docket No. 25-0331 (issued April 15, 2025); *C.C.*, Docket No. 22-1126 (issued May 8, 2023).

<sup>12</sup> *Supra* note 10; *see also S.G.*, Docket No. 22-0016 (issued October 31, 2022); *J.B.*, Docket No. 21-1322 (issued April 4, 2022).

<sup>13</sup> *See M.E.*, Docket No. 25-0724 (issued August 26, 2025); *D.M.*, Docket No. 25-0506 (issued June 23, 2025).

regarding the acceptance of visible injuries.<sup>14</sup> Following this and other such further development as deemed necessary, it shall issue a *de novo* decision.

**CONCLUSION**

The Board finds that appellant has met his burden of proof to establish a diagnosed medical condition in connection with the accepted March 25, 2025 employment incident.

**ORDER**

**IT IS HEREBY ORDERED THAT** the July 2, 2025 decision of the Office of Workers' Compensation Programs is reversed, and the case is remanded for further proceedings consistent with this decision of the Board.

Issued: September 24, 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

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<sup>14</sup> *Supra* notes 10-11.