

to factors of his federal employment, including staffing a helispot during a wildfire. In an accompanying statement, he indicated that he was exposed to unsanitary conditions, smoky environments, and cold and wet weather while working the line on the Forsyth Fire. Appellant noted that he first became aware of his condition on July 15, 2025, and realized its relationship to factors of his federal employment on July 16, 2025. He stopped work on July 17, 2025, and returned to work on July 18, 2025.

On July 17, 2025, the employing establishment executed an authorization for examination and/or treatment (Form CA-16) authorizing appellant to seek medical care related to a sore throat. In an attending physician's report, Part B of the Form CA-16, of even date, Dr. Miguel Pineda, an emergency medicine specialist, noted that appellant had a history of throat pain for two days. He diagnosed tonsillitis and checked a box marked "No" to indicate that appellant's condition was not caused or aggravated by an employment activity.

In a development letter dated August 5, 2025, OWCP informed appellant of the deficiencies of his claim. It advised him of the type of additional factual and medical evidence needed and provided a questionnaire for his completion. OWCP afforded appellant 60 days to respond.

OWCP thereafter received an emergency room report dated July 17, 2025, by Dr. Pineda, who noted that appellant related complaints of throat pain and tonsillar pain, right worse than left. Appellant related that he had experienced the same symptoms two weeks prior and had completed a 10-day course of amoxicillin. Dr. Pineda performed a physical examination and observed right-sided tonsillar erythema and edema with uvula deviation. He reviewed a computerized tomography scan of the soft tissues of the neck, which demonstrated bilateral tonsillar enlargement without evidence of peritonsillar abscess. Dr. Pineda diagnosed enlargement of the tonsils without evidence of peritonsillar abscess.

In an August 12, 2025 response to OWCP's development questionnaire, appellant explained that he was continuously exposed to smoke, dust, backhaul trash, and other crewmembers while working the line in the Forsyth Fire. He noted that there was no access to handwashing or showers, which he asserted caused a viral or bacterial infection in his tonsils.

OWCP thereafter received a September 4, 2025 addendum to the July 17, 2025 emergency room report by Dr. Pineda, who noted that "[appellant] is a wildland firefighter with recent smoke inhalation exposure incurring during his local employment." He opined that his "tonsillitis was likely significantly exacerbated by the smoke exposure to his oropharynx, requiring him to be treated in the emergency department."

In a narrative medical report dated September 28, 2025, Dr. Pineda noted that appellant related complaints of a worsening sore throat after exposure to forest fire smoke for over one week. He reviewed his treatment in the emergency room on July 17, 2025 and diagnosed acute tonsillitis. Dr. Pineda opined that appellant's exposure to forest fire smoke "likely both caused and exacerbated his medical condition." He explained that acute tonsillitis is caused by inflammation and infection of the posterior throat and can be caused and exacerbated by smoke inhalation/exposure.

By decision dated October 7, 2025, OWCP denied appellant's claim, finding that the evidence of record was insufficient to establish causal relationship between his medical condition and the accepted employment factors.

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

To establish that an injury was sustained in the performance of duty in an occupational disease claim, a claimant must submit: (1) a factual statement identifying employment factors alleged to have caused or contributed to the presence or occurrence of the disease or condition; (2) medical evidence establishing the presence or existence of the disease or condition for which compensation is claimed; and (3) medical evidence establishing that the diagnosed condition is causally related to the identified employment factors.⁶

The medical evidence required to establish causal relationship between a diagnosed condition and the accepted employment factors is rationalized medical opinion evidence.⁷ 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 factors identified by the employee.⁸

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

² *Id.*

³ *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).

⁴ *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).

⁵ *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).

⁶ *S.R.*, Docket No. 24-0839 (issued October 30, 2024); *T.W.*, Docket No. 20-0767 (issued January 13, 2021); *L.D.*, Docket No. 19-1301 (issued January 29, 2020); *S.C.*, Docket No. 18-1242 (issued March 13, 2019).

⁷ *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).

⁸ *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).

the physician must provide a rationalized medical opinion that differentiates between the effects of the work-related injury or disease and the preexisting condition.⁹

ANALYSIS

The Board finds that appellant has not met his burden of proof to establish a medical condition causally related to the accepted factors of his federal employment.

In support of his claim, appellant submitted Dr. Pineda's September 4, 2025 addendum to his July 17, 2025 emergency department report, in which he opined that appellant's tonsillitis was "likely significantly exacerbated by the smoke exposure to his oropharynx, requiring him to be treated in the emergency department." In his September 28, 2025 narrative medical, he diagnosed acute tonsillitis and opined that his exposure to forest fire smoke "likely both caused and exacerbated his medical condition." However, the Board has held that medical opinions couched with the term "likely" are speculative or equivocal in character and have little probative value.¹⁰ Thus, this evidence is insufficient to establish the claim.

In the July 17, 2025 emergency room report, Dr. Pineda diagnosed enlargement of the tonsils without evidence of peritonsillar abscess. He did not, however, provide an opinion on causal relationship. The Board has held that medical evidence that does not offer an opinion regarding the cause of an employee's condition is of no probative value on the issue of causal relationship.¹¹ Therefore, this evidence is insufficient to establish appellant's claim.

In the July 17, 2025 Part B of the Form CA-16, Dr. Pineda diagnosed tonsillitis and checked a box marked "No" to indicate that appellant's condition was not caused or aggravated by an employment activity. The Board has held that medical evidence that negates causal relationship is of no probative value.¹² As such, this evidence is insufficient to establish appellant's claim.

As the medical evidence of record is insufficient to establish a medical condition causally related to the accepted employment factors, the Board finds that appellant has not met his burden of proof.

⁹ Federal (FECA) Procedure Manual, Part 2 -- Claims, *Causal Relationship*, Chapter 2.805.3e (May 2023); *M.B.*, Docket No. 20-1275 (issued January 29, 2021); *see R.D.*, Docket No. 18-1551 (issued March 1, 2019).

¹⁰ *See S.C.*, Docket No. 25-0989 (issued January 21, 2026); *B.D.*, Docket No. 25-0852 (issued December 1, 2025); *F.S.*, Docket No. 22-0070 (issued June 14, 2023); *M.L.*, Docket No. 18-0153 (issued January 22, 2020); *N.B.*, Docket No. 19-0221 (issued July 15, 2019); *Z.B.*, Docket No. 17-1336 (issued January 10, 2019); *T.M.*, Docket No. 08-0975 (issued February 6, 2009).

¹¹ *See K.A.*, Docket No. 26-0031 (issued February 26, 2026); *B.B.*, Docket No. 25-0661 (issued September 9, 2025); *L.B.*, Docket No. 18-0533 (issued August 27, 2018); *D.K.*, Docket No. 17-1549 (issued July 6, 2018).

¹² *See M.H.*, Docket No. 25-0864 (issued January 5, 2026); *F.B.*, Docket No. 22-0679 (issued January 23, 2024); *see also M.J.*, Docket No. 05-577 (issued June 6, 2005).

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 his burden of proof to establish a medical condition causally related to the accepted factors of his federal employment.¹³

ORDER

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

Issued: April 1, 2026
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

¹³ The Board notes that the employing establishment executed a Form CA-16. A completed Form CA-16 authorization may constitute a contract for payment of medical expenses to a medical facility or physician, when properly executed. The form creates a contractual obligation, which does not involve the employee directly, to pay for the cost of the examination or treatment regardless of the action taken on the claim. *See* 20 C.F.R. § 10.300(c); *J.G.*, Docket No. 17-1062 (issued February 13, 2018); *Tracy P. Spillane*, 54 ECAB 608 (2003).