

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

L.H., Appellant	)	
	)	
and	)	<b>Docket No. 26-0201</b>
	)	<b>Issued: April 6, 2026</b>
U.S. POSTAL SERVICE, SOUTH SUBURBAN	)	
PROCESSING & DISTRIBUTION CENTER,	)	
Bedford Park, IL, Employer	)	
	)	

*Appearances:*  
*Appellant, pro se*  
*Office of Solicitor, for the Director*

*Case Submitted on the Record*

**DECISION AND ORDER**

Before:  
PATRICIA H. FITZGERALD, Deputy Chief Judge  
JANICE B. ASKIN, Judge  
VALERIE D. EVANS-HARRELL, Alternate Judge

**JURISDICTION**

On December 15, 2025 appellant filed a timely appeal from a November 19, 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.<sup>2</sup>

**ISSUE**

The issue is whether appellant has met her burden of proof to establish a medical condition causally related to the accepted June 13, 2025 employment incident.

---

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

<sup>2</sup> The Board notes that appellant submitted additional evidence on appeal. 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. *Id.*

## **FACTUAL HISTORY**

On June 16, 2025 appellant, then a 34-year-old mail processing clerk, filed a traumatic injury claim (Form CA-1) alleging that on June 13, 2025 she injured the left side of her neck, shoulder, hand, and wrist while in the performance of duty. She explained that she felt severe pain after she lifted and loaded letter trays, performed overhead work, and pushed and pulled heavy racks and all-purpose containers on an automation machine for approximately seven hours. Appellant stopped work on June 14, 2025, and returned to full-time modified-duty work on July 31, 2025.

In a note dated June 13, 2025, Dr. Joseph L. Newberg, Board-certified in family medicine, released appellant to return to work, effective June 16, 2025, with restrictions of no overhead work, no lifting greater than 10 pounds, and no pushing or pulling greater than 20 pounds.

In a medical report dated June 16, 2025, Dr. Aaron Jeremy Chaise, Board-certified in family medicine, noted that appellant related complaints of neck pain and tingling into her left little finger, which began “after work” on June 13, 2025. He performed a physical examination and observed reduced strength in the left upper extremity and tenderness to palpation of the left side of the neck. Dr. Chaise diagnosed left-sided cervical radiculopathy at C8-T1. He recommended a magnetic resonance imaging (MRI) scan of the cervical spine. In a duty status report (Form CA-17) also dated June 16, 2025, Dr. Chaise diagnosed cervical radiculopathy and indicated that appellant was totally disabled from work.

In an undated message, Dr. Chaise advised appellant that her MRI scan demonstrated “a small bulging of your [C5-6] disc and on the left small amount of narrowing where your nerves exit which may be causing your symptoms.” He recommended a neurosurgery consultation.

OWCP also received a June 26, 2025 physical therapy report.

In a July 2, 2025 development letter, OWCP informed appellant of the deficiencies of her claim. It advised her of the type of factual and medical evidence needed to establish her claim and provided a questionnaire for her completion. OWCP afforded appellant 60 days to submit the necessary evidence.

In a note and Form CA-17 dated July 23, 2025, Dr. Leila N. Patterson, Board-certified in family medicine, released appellant to return to work with restrictions of no climbing, kneeling, bending, stooping, twisting, pushing, pulling, reaching above shoulder height, operating machinery, handling chemicals or solvents, or lifting greater than 10 pounds. She diagnosed a bulging disc at C5-6.

OWCP also received additional physical therapy reports.

In a follow-up letter dated August 14, 2025, OWCP advised appellant that it had conducted an interim review, and the evidence submitted remained insufficient to establish her claim. It noted that she had 60 days from the July 2, 2025 letter to submit the necessary evidence. OWCP further advised that if sufficient evidence was not received during this time, it would issue a decision based on the evidence contained in the record. No additional evidence was received.

By decision dated September 9, 2025, OWCP denied appellant's claim, finding that the medical evidence of record was insufficient to establish a medical diagnosis in connection with the accepted June 13, 2025 employment incident. It concluded, therefore, that the requirements had not been met to establish an injury as defined by FECA.

OWCP subsequently received an August 28, 2025 report wherein Dr. Patterson noted that appellant's neck pain had improved with physical therapy and medication, and that she had returned to modified-duty work without any further episodes of pain. Dr. Patterson diagnosed "work-related" bulging disc at C5-6 and neuroforaminal stenosis.

In a statement dated September 23, 2025, appellant described her job duties, including the work that she performed on June 13, 2025.

Dr. Patterson, in a narrative note dated October 4, 2025, diagnosed bulging disc at C5-6 and neuroforaminal stenosis.

On November 3, 2025 appellant requested reconsideration.

By decision dated November 19, 2025, OWCP modified the September 9, 2025 decision to find that the medical evidence of record was sufficient to establish a diagnosed medical condition in connection with the accepted June 13, 2025 employment incident. However, the claim remained denied as the medical evidence of record was insufficient to establish causal relationship between appellant's diagnosed condition(s) and the accepted June 13, 2025 employment incident.

### **LEGAL PRECEDENT**

An employee seeking benefits under FECA<sup>3</sup> has the burden of proof to establish the essential elements of his or her claim including the fact that the individual is an employee of the United States within the meaning of FECA, that the claim was timely filed, 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 every compensation claim regardless of whether the claim is predicated on 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 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

---

<sup>3</sup> 5 U.S.C. § 8101 *et seq.*

<sup>4</sup> *C.G.*, Docket No. 20-0058 (issued September 30, 2021); *S.B.*, Docket No. 17-1779 (issued February 7, 2018); *J.P.*, 59 ECAB 178 (2007); *Joe D. Cameron*, 41 ECAB 153 (1989).

<sup>5</sup> *J.M.*, Docket No. 17-0284 (issued February 7, 2018); *R.C.*, 59 ECAB 427 (2008); *James E. Chadden, Sr.*, 40 ECAB 312 (1988).

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

### ANALYSIS

The Board finds that appellant has not met her burden of proof to establish a medical condition causally related to the accepted June 13, 2025 employment incident.

Dr. Chaise, in a medical report dated June 16, 2025, diagnosed C8-T1 radiculopathy. In an undated message to appellant, he noted that her MRI scan demonstrated “a small bulging of your [C5-6] disc and on the left small amount of narrowing where your nerves exit which may be causing your symptoms.” However, Dr. Chaise did not offer an opinion regarding the cause of the diagnosed conditions. The Board has held that an opinion which does not address the cause of an employee’s condition is of no probative value on the issue of causal relationship.<sup>9</sup> Thus, this evidence is insufficient to establish appellant’s claim.

Dr. Patterson, in her reports dated July 23 and August 28, 2025 and her note dated October 4, 2025, diagnosed bulging disc at C5-6 and neuroforaminal stenosis. Dr. Newberg, in a note dated June 13, 2025, released appellant to return to work with restrictions. However, neither Dr. Patterson nor Dr. Newberg offered an opinion regarding the cause of the diagnosed conditions. As explained above, an opinion which does not address the cause of an employee’s condition is of no probative value on the issue of causal relationship.<sup>10</sup> Thus, this evidence is insufficient to establish appellant’s claim.

However, his note does not contain an opinion on causal relationship. The Board has held that a medical report lacking a firm diagnosis is of no probative value.<sup>11</sup> Therefore, this evidence is insufficient to establish the claim.

---

<sup>6</sup> *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).

<sup>7</sup> *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).

<sup>8</sup> *A.S.*, Docket No. 19-1955 (issued April 9, 2020); *Leslie C. Moore*, 52 ECAB 132 (2000).

<sup>9</sup> *T.D.*, Docket No. 19-1779 (issued March 9, 2021); *L.B.*, Docket No. 18-0533 (issued August 27, 2018); *D.K.*, Docket No. 17-1549 (issued July 6, 2018).

<sup>10</sup> *Id.*

<sup>11</sup> *J.E.*, Docket No. 21-0810 (issued April 13, 2023); *P.C.*, Docket No. 18-0167 (issued May 7, 2019).

Appellant also submitted physical therapy reports. However, certain healthcare providers such as physical therapists are not considered physicians as defined under FECA, and their reports do not constitute competent medical evidence.<sup>12</sup> Consequently, their medical findings and/or opinions will not suffice for purposes of establishing entitlement to compensation benefits.<sup>13</sup>

As the medical evidence of record is insufficient to establish a medical condition causally related to the accepted June 13, 2025 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.

### **CONCLUSION**

The Board finds that appellant has not met her burden of proof to establish a medical condition causally related to the accepted June 13, 2025 employment incident.

---

<sup>12</sup> Section 8102(2) of FECA provides as follows: 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. § 8102(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 V.R.*, Docket No. 19-0758 (issued March 16, 2021) (physical therapists are not considered physicians under FECA); *C.K.*, Docket No. 19-1549 (issued June 30, 2020) (physical therapists are not considered physicians as defined under FECA).

<sup>13</sup> *Id.*

**ORDER**

**IT IS HEREBY ORDERED THAT** the November 19, 2025 decision of the Office of Workers' Compensation Programs is affirmed.

Issued: April 6, 2026  
Washington, DC

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

Janice B. Askin, Judge  
Employees' Compensation Appeals Board

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