

¹ 5 U.S.C. § 8101 *et seq.*

day over the course of his 12-year career. He noted that he first became aware of his condition on August 16, 2023, and realized its relation to factors of his federal employment on July 14, 2025. Appellant stopped work on August 1, 2025.

In an August 11, 2025 development letter, OWCP informed appellant of the deficiencies of his claim. It advised him of the type of factual and medical evidence needed to establish his claim and provided a questionnaire for his completion. OWCP afforded appellant 60 days to submit the necessary evidence. In a separate development letter of even date, it requested that the employing establishment provide additional information regarding appellant's occupational disease claim, including comments from a knowledgeable supervisor. OWCP afforded the employing establishment 30 days to respond.

In a September 2, 2025 report, Dr. Lisa Daye, a Board-certified orthopedic surgeon, noted that appellant was a letter carrier who presented for ongoing evaluation of worsening right foot pain, progressing laterally and to the arch of the foot, since his claimed August 16, 2023 injury. She indicated that he had been diagnosed with right foot plantar fasciitis, gradual onset. Dr. Daye reviewed an August 26, 2025 x-ray of the right foot which revealed no acute bony abnormalities or significant degenerative changes. She discussed appellant's employment duties as a letter carrier which entailed delivering mail while walking six to eight miles a day for 40 hours per week over the past 12 to 15 years. Dr. Daye diagnosed posterior tibial tendinitis of the right leg and opined that the condition was work related due to overuse from years of daily long-distance walking. She identified August 16, 2023 as the date of injury/onset of illness and provided recommendations for new arch support and a home exercise program.

By decision dated November 4, 2025, OWCP denied appellant's claim, finding that the medical evidence of record was insufficient to establish a medical condition causally related to the accepted factors of his federal employment.

Appellant subsequently submitted additional medical evidence including an August 26, 2025 x-ray of the right foot.

In a November 4, 2025 attending physician's report (Form CA-20), Dr. Daye reiterated that appellant had ongoing right foot pain since August 16, 2023, which he was now experiencing in the arch and lateral side of the foot. She diagnosed posterior tibial tendinitis of the right leg and noted the date of initial treatment as September 2, 2025. When asked if the condition was caused or aggravated by the employment activity described, Dr. Daye responded "Yes," explaining that appellant had been delivering mail for 12 to 15 years, 40 hours a week, and walking six to eight miles each day. She concluded that he was not disabled and could return to work as tolerated.

In a narrative report also dated November 4, 2025, Dr. Daye indicated that appellant presented for evaluation of his right foot due to intermittent pain and stiffness after standing. She noted his initial August 16, 2023 employment incident, provided examination findings, reviewed the August 26, 2025 x-ray of the right foot, and diagnosed posterior tibial tendinitis of the right leg and pain in the right ankle and joints of right foot. Dr. Daye checked a box marked "Yes," indicating that the incident described was the competent medical cause of the condition.

On November 13, 2025 appellant requested a review of the written record by a representative of OWCP's Branch of Hearings and Review.

By decision dated February 17, 2026, OWCP's hearing representative affirmed the November 4, 2025 decision.

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, an employee must submit the following: (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 employment factors identified by the employee.⁶

Causal relationship is a medical question that requires rationalized medical opinion evidence to resolve the issue.⁷ A physician's opinion on whether there is causal relationship between the diagnosed condition and the implicated employment factor(s) must be based on a complete factual and medical background.⁸ Additionally, the physician's opinion must be expressed in terms of a reasonable degree of medical certainty, and must be supported by medical

² *Id.*

³ *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).

⁴ *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).

⁵ *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).

⁶ *R.G.*, Docket No. 19-0233 (issued July 16, 2019); *see also Roy L. Humphrey*, 57 ECAB 238, 241 (2005); *Ruby I. Fish*, 46 ECAB 276, 279 (1994); *Victor J. Woodhams*, 41 ECAB 345 (1989).

⁷ *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).

⁸ *M.V.*, Docket No. 18-0884 (issued December 28, 2018).

rationale explaining the nature of the relationship between the diagnosed condition and appellant's specific employment factor(s).⁹

ANALYSIS

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

In a September 2, 2025 report, Dr. Daye related appellant's initial complaints of pain in the arch of his right foot which had since progressed laterally, reporting that the onset of illness began on August 16, 2023. She diagnosed posterior tibial tendinitis of the right leg and opined that the condition was work related due to overuse from years of long-distance walking daily. While Dr. Daye offered an affirmative opinion in support of causal relationship, she did not provide sufficient rationale to support her opinion.¹⁰ The Board has held that a report is of limited probative value regarding causal relationship if it does not contain sufficient medical rationale explaining how a given medical condition/disability was related to the employment factors.¹¹

In a November 4, 2025 narrative report, Dr. Daye again noted an August 16, 2023 employment incident, provided examination findings, reviewed the August 26, 2025 right foot x-ray, and diagnosed posterior tibial tendinitis of the right leg and pain in the right ankle and joints of right foot. She checked a box marked "Yes," indicating that the incident described was the competent medical cause of the condition. The Board has held that reports which contain a box marked "Yes" in support of causal relationship, without further explanation or rationale, are insufficient to establish the claim.¹² This evidence is, therefore, insufficient to establish the claim.

In a Form CA-20 of even date, Dr. Daye reiterated that appellant had ongoing right foot pain since August 16, 2023 and diagnosed posterior tibial tendinitis of the right leg. She responded "Yes," explaining that the diagnosed conditions were caused or aggravated by employment activity and explained that appellant had been delivering mail for 12 to 15 years, 40 hours a week, and walking six to eight miles each day. However, the Board has held that medical opinion evidence must offer a medically-sound explanation of how the specific employment incident physiologically

⁹ *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*, *supra* note 6.

¹⁰ *See J.S.*, Docket No. 25-0231 (issued March 7, 2025); *A.C.*, Docket No. 24-0661 (issued September 11, 2024); *R.B.*, Docket No. 23-1027 (issued April 3, 2024); *S.B.*, Docket No. 24-0064 (issued February 28, 2024); *S.C.*, Docket No. 21-0929 (issued April 28, 2023); *J.D.*, Docket No. 19-1953 (issued January 11, 2021); *M.W.*, Docket No. 14-1664 (issued December 5, 2014).

¹¹ *See J.S.*, Docket No. 23-0930 (issued January 2, 2024); *D.Y.*, Docket No. 20-0112 (issued June 25, 2020); *L.B.*, Docket No. 18-0533 (issued August 27, 2018); *D.K.*, Docket No. 17-1549 (issued July 6, 2018).

¹² *J.O.*, Docket No. 26-0086 (issued April 3, 2026); *S.M.*, Docket No. 17-1727 (issued July 9, 2018); *see R.S.*, Docket No. 15-1834 (issued December 23, 2015); *Lillian M. Jones*, 34 ECAB 379, 381 (1982).

caused injury.¹³ As this report lacks a medically-sound explanation, the Board finds that it is of limited probative value and, thus, insufficient to establish appellant's claim.

The remaining medical evidence consists of diagnostic test results. The Board has held that diagnostic studies, standing alone, lack probative value as they do not address whether the employment factors caused any of the diagnosed conditions.¹⁴ Such reports are therefore insufficient to establish appellant's claim.

As the medical evidence of record is insufficient to establish a right foot condition causally related to the accepted factors of his federal employment, the Board finds that appellant has not met his burden of proof.¹⁵

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 right foot condition causally related to the accepted factors of his federal employment.

¹³ *C.L.*, Docket No. 25-0593 (issued July 15, 2025); *K.J.*, Docket No. 21-0020 (issued October 22, 2021); *L.R.*, Docket No. 16-0736 (issued September 2, 2016); *J.R.*, Docket No. 12-1099 (issued November 7, 2012); *Douglas M. McQuaid*, 52 ECAB 382 (2001).

¹⁴ *See M.P.*, Docket No. 23-1131 (issued June 18, 2024); *V.A.*, Docket No. 21-1023 (issued March 6, 2023); *M.K.*, Docket No. 21-0520 (issued August 23, 2021); *F.D.*, Docket No. 19-0932 (issued October 3, 2019).

¹⁵ *I.D.*, Docket No. 22-0848 (issued September 2, 2022); *T.G.*, Docket No. 14-751 (issued October 20, 2014).

ORDER

IT IS HEREBY ORDERED THAT the November 4, 2025 and February 17, 2026 decisions of the Office of Workers' Compensation Programs are affirmed.

Issued: August 12, 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