United States Department of Labor
Employees' Compensation Appeals Board

J.R., Appellant	)	
and	)	**Docket No. 26-0433**
	)	**Issued: August 11, 2026**
U.S. POSTAL SERVICE, DENVER POST OFFICE, Denver, CO, Employer	)	

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 April 9, 2026 appellant filed a timely appeal from a January 5, 2026 merit decision of the Office of Workers' Compensation Programs (OWCP). Pursuant to the Federal Employees' Compensation Act[1] (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 disability from work commencing December 18, 2021, causally related to the accepted November 24, 2020 employment injury.

FACTUAL HISTORY

On December 14, 2020 appellant, then a 38-year-old rural carrier associate, filed a traumatic injury claim (Form CA-1) alleging that on November 24, 2020 she sustained a laceration

[1] 5 U.S.C. § 8101 *et seq*.

of her mouth, and muscle pain over her entire body as a result of a motor vehicle accident while in the performance of duty. She stopped work on November 24, 2020. OWCP accepted the claim for strain of neck muscle, strains of the wrists, strains of the shoulders, strain of the right forearm, headache, lumbar strain, and thoracic spine sprain. Appellant returned to part-time work with restrictions on April 10, 2021. On July 8, 2021 she underwent an OWCP-authorized left arthroscopic subacromial decompression, left arthroscopic extensive debridement of biceps tendon, and left arthroscopic distal clavicle resection. OWCP paid appellant wage-loss compensation on the supplemental rolls from January 14 through September 11, 2021, and on the periodic rolls from September 12 through December 15, 2021.

In a December 8, 2021 report, Dr. Jack L. Rook, a Board-certified physiatrist, noted that Dr. David M. Weinstein, a Board-certified orthopedic surgeon, had no further treatment recommendations regarding appellant's residual left shoulder pain status post-surgery and that appellant was not involved in any formal treatment as she had plateaued in physical therapy. Dr. Rook opined that appellant could work with restrictions, noting that one month prior he had released her to full-time work with lifting restrictions, but no work had been offered. In a duty status report (Form CA-17) of even date, he released her to full-time work with restrictions of lifting and pulling/pushing no more than 20 pounds and no lifting more than 5 pounds above shoulder level. Other restrictions included sitting no more than six hours a day, standing/walking/climbing no more than two hours a day, kneeling no more than one hour a day, bending/stooping no more than four hours a day, and driving a vehicle no more than six hours a day.

On December 15, 2021 appellant accepted a modified job offer as a rural carrier associate and she returned to full-time limited duty on December 16, 2021. The physical requirements of the position were noted as walking up to two hours, standing up to two hours, sitting up to six hours, and lifting up to 20 pounds. Appellant stopped work on December 20, 2021.

In a January 6, 2022 progress report, Dr. Rook related that appellant last worked on December 20, 2021 as her neck, back, and shoulder pain had increased significantly. He noted that appellant's fibromyalgia condition complicated her healing from her injury. Dr. Rook released her to work three non-consecutive days a week with the same restrictions he had previously provided. In a Form CA-17 of even date, he related that appellant could return to work that day. Dr. Rook reiterated appellant's restrictions.

On January 12, 2022 appellant filed a claim for compensation (Form CA-7) for disability from work commencing December 18, 2021. She continued to submit CA-7 forms.

In a development letter dated January 20, 2022, OWCP informed appellant of the deficiencies of her disability claim. It advised her of the type of medical evidence necessary to establish her claim and afforded appellant 30 days to submit the necessary evidence.

OWCP subsequently received a January 19, 2022 report, wherein Dr. Rook indicated that appellant likely had a component of facet-mediated pain in the thoracic spine in conjunction with muscle spasm. He opined that her fibromyalgia appeared to be permanently aggravated since her work injury. Dr. Rook opined that appellant was not capable of working as she was extremely

uncomfortable, had difficulty sleeping, and had limited range of motion. In a January 19, 2022 Form CA-17, he placed appellant off work for one month.

On March 3, 2022 OWCP requested additional information from Dr. Rook. In a March 8, 2022 report, Dr. Rook indicated that appellant continued to struggle with symptoms related to the work injury, which have worsened over time. He stated that despite undergoing left subacromial decompression, appellant's left shoulder pain triggered muscle spasm from the shoulder region to the left side of her neck and increased the frequency of her preexisting migraine headaches. Appellant also complained of back pain. Dr. Rook noted physical examination findings, which included muscle spasm, diminished left shoulder range of motion and evidence of impingement. He opined that appellant's residual symptoms were associated with her work injury. With regard to her fibromyalgia condition, Dr. Rook stated that appellant was able to perform all duties of her rural letter carrier position prior to her motor vehicle accident, but had been in chronic pain since then and unable to achieve her preinjury status. He continued to opine that appellant could work with restrictions in a light physical demand level with maximum recommended lift/push/ pull restrictions of 20 pounds for three nonconsecutive days of work. Dr. Rook opined that her recent return to work went poorly, despite being on a part-time basis, as she had worked every day. He opined that her present level of disability was a direct result of the accepted work-related conditions. In a work-capacity evaluation (Form OWCP-5c) of even date, Dr. Rook opined appellant could work full time in a light-duty position, every other day, with restrictions, including pushing/pulling/lifting no more than 20 pounds.

On March 12, 2022 the employing establishment offered appellant a modified job offer as a rural carrier associate. The physical requirements of the position were noted as driving up to six hours a day, standing up to six hours a day, and lifting up to 20 pounds.

In an April 7, 2022 report, Dr. Rook continued to opine that appellant could work three days per week with lifting restrictions, noting it was no longer necessary to have a day off between her workdays.

By decision dated April 12, 2022, OWCP denied appellant's Form CA-7 claims for disability from work commencing December 18, 2021, finding that the medical evidence of record was insufficient to establish disability from work during the claimed period causally related to her accepted November 24, 2020 employment injury.

In an April 21, 2022 report, Dr. Rook explained that appellant was unable to work because the accepted work-related conditions resulted in neck, thoracic, low back and left shoulder pain. He provided a medical explanation for fibromyalgia syndrome, but denied that it was the reason appellant could not work. Rather, the 20-pound restriction, which was initially recommended, caused her clinical deterioration. Dr. Rook noted that he initially recommended that appellant return to part-time work with the 20-pound restriction, but she wanted to try full-time work. Appellant's return to work had worsened her condition as characterized by the objective findings of increased muscle spasm in the neck and shoulder region. Dr. Rook related that she could return to work in a full-time position at the sedentary physical demand level.

On April 26, 2022 the employing establishment offered appellant a modified job as a rural carrier associate. The offer required driving up to six hours, standing up to six hours, and lifting up to 20 pounds.

In a May 16, 2022 report, Dr. Weinstein noted appellant's complaints were unchanged. He presented examination findings, noting that recent left shoulder x-rays of the left shoulder were unremarkable and a March 23, 2022 magnetic resonance imaging (MRI) scan demonstrated mild postoperative changes in the rotator cuff consistent with mild inflammation. Dr. Weinstein provided an impression of left upper extremity/pericervical myofascial inflammation, history of fibromyalgia and healed status post left shoulder arthroscopy with debridement. He stated that clinically appellant had no evidence of any significant rotator cuff pathology or other intraarticular pathology; rather, her main symptoms were myofascial in nature and were present preoperatively. Dr. Weinstein opined that her symptoms were an exacerbation of her fibromyalgia condition which affected her left upper extremity and pericervical areas.

On April 7, 2022 OWCP referred appellant, a March 21, 2022 statement of accepted facts (SOAF), a series of questions, and the medical record to Dr. William V. Watson, a Board-certified orthopedic surgeon, for a second opinion examination to determine whether she had any employment-related residuals or disability.

In a May 31, 2022 report, Dr. Watson noted that prior to her November 24, 2020 work-related accident, appellant was seen for pain in her neck, back, shoulders from elbow to hands in both arms, both knees, left-sided ribs and hips due to fibromyalgia. He noted his physical examination findings and diagnosed status post left arthroscopic extensive debridement of biceps tendon; status post left arthroscopic distal clavicle resection; and history of chronic fibromyalgia. Dr. Watson opined that the accepted conditions had primarily resolved. He also opined that the work-related motor vehicle accident flared up appellant's baseline fibromyalgia, noting continued evidence of fibromyalgia. Dr. Watson recommended that appellant undergo a functional capacity evaluation (FCE).

A July 11, 2022 FCE report indicated that appellant was capable of working at the sedentary physical demand level for 8 hours a day. The functional strength deficit summary suggested that appellant's injured area had returned to normal/near normal function. The Blankenship reliability profile exhibited symptom/disability exaggeration behavior which indicated a few nonorganic signs were present. The validity criteria suggested very poor effort or voluntary submaximal effort, not necessarily related to pain, impairment or disability.

In an undated follow-up report, Dr. Watson noted his review of the July 11, 2022 FCE. Based on the FCE, he opined that appellant's primary issues resulted from her fibromyalgia. Dr. Watson concurred with Dr. Rook's work restrictions of sedentary work.

In an August 10, 2022 report, Dr. Rook opined that the July 11, 2022 FCE was an invalid study. He presented examination findings and continued to opine that appellant had a worsening of her fibromyalgia condition associated with her work-related motor vehicle accident.

On October 12, 2022 appellant requested reconsideration of OWCP's April 12, 2022 decision. She continued to submit CA-7 forms.

On November 9, 2022 the employing establishment offered appellant a modified position as a rural carrier associate. The physical requirements of the position required reaching for two hours, reaching above the shoulder for one hour, pushing, pulling, lifting no more than five pounds for one hour, and repetitive movements with the wrist and elbows for six hours.

Dr. Rook continued to submit progress reports. He concurred with Dr. Watson's permanent restrictions which placed appellant in a sedentary physical demand level.

On January 18, 2023 OWCP requested that Dr. Watson provide clarification as to whether appellant's December 18, 2021 recurrence of disability was due to the accepted conditions under the claim. It noted that the SOAF previously sent was inaccurate as it inadvertently omitted the accepted diagnoses of lumbar strain and thoracic strain.

On April 18, 2023 the employing establishment offered appellant a modified rural carrier associate position. The physical requirements of the position required reaching for two hours a day, reaching above the shoulder for one hour a day, pushing/pulling lifting up to five pounds for one hour a day.

In an April 26, 2023 report, Dr. Rook noted that appellant had been given a tentative job offer and it was her decision if she wanted to return to work. He opined that appellant's restrictions were permanent. In a Form CA-17 of even date, Dr. Rook opined appellant could work full time in a position with no more than five pounds lifting/carrying/pushing/pulling for one hour a day, and no more than one hour reaching above the shoulder. Appellant was also restricted to no more than six hours a day of simple grasping and fine manipulation.

On May 5, 2023 OWCP referred appellant to Dr. Qing-Min Chen, a Board-certified orthopedic surgeon, for a new second opinion evaluation to determine the nature and extent of her accepted employment-related conditions and disability.

In a June 1, 2023 report, Dr. Chen discussed appellant's history of injury and her medical treatment. He provided her physical examination findings. Dr. Chen opined that there was no obvious reason as to why appellant stopped working on December 20, 2021, as she was not totally disabled at that time. He opined that there was no evidence of any aggravation of preexisting condition and there were no additional diagnoses that would be related to the work-related event of November 24, 2020 or December 20, 2021. Dr. Chen explained that appellant's fibromyalgia was not work related, noting that it had been present since 2008. He stated there was no objective evidence of a temporary or permanent aggravation of the fibromyalgia condition and disagreed that fibromyalgia could be verified from an objective standpoint. Dr. Chen stated that appellant's FCE indicated invalidity and that her work restrictions were based on subjective pain. With respect to the accepted conditions, he explained that there was no objective evidence that she required continued work restrictions. In a Form OWCP-5c of even date, Dr. Chen opined that appellant reached maximum medical improvement and was capable of performing her usual job without restriction.

On July 5, 2023 the employing establishment offered appellant a modified rural carrier position. The physical requirements of the position indicated that the position was sedentary, and

that a break would be allowed for five minutes every hour. Appellant refused the job offer on July 6, 2023.

In an August 9, 2023 report, Dr. Rook noted that appellant did not accept the job offer. He indicated that appellant had been given permanent restrictions, and she was not involved in any active treatment.

By decision dated August 30, 2023, OWCP denied modification of its April 12, 2022 decision. It accorded the weight of the medical evidence to Dr. Chen, the second opinion physician.

On October 21, 2023 appellant requested reconsideration.

By decision dated December 18, 2023, OWCP denied modification of its August 30, 2023 decision.

On November 6, 2024 appellant requested reconsideration.

In a February 13, 2024 report, Dr. Rook related that beginning on December 20, 2021 he provided appellant work restrictions based on her chronic left shoulder pain for which she had undergone a surgical procedure, not due to her pain from her fibromyalgia syndrome. He again stated that appellant had not been provided work within her restrictions. After appellant attempted to return to work, she experienced increased muscle spasm in her neck and shoulder. Dr. Rook then revised her restrictions to allow work at a sedentary physical demand level. He related that he never took appellant off work, and that her inability to work had nothing to do with her fibromyalgia syndrome. Dr. Rook noted that the restrictions he provided were based on the same diagnoses listed in Dr. Chen's report. He concluded that appellant should be entitled wage-loss compensation for the time she missed work in late 2021 and 2022.

By decision dated November 22, 2024, OWCP denied modification of its December 18, 2023 decision.

On November 15, 2025 appellant requested reconsideration.

By decision dated January 5, 2026, OWCP denied modification of its November 22, 2024 decision.

LEGAL PRECEDENT

An employee seeking benefits under FECA has the burden of proof to establish the essential elements of his or her claim, including that any disability or specific condition for which compensation is claimed is causally related to the employment injury.[2] For each period of disability claimed, the employee has the burden of proof to establish that he or she was disabled

[2] *See D.A.*, Docket No. 26-0214 (issued April 21, 2026); *M.F.*, Docket No. 24-0445 (issued May 23, 2024); *C.B.*, Docket No. 20-0629 (issued May 26, 2021); *D.S.*, Docket No. 20-0638 (issued November 17, 2020); *B.O.*, Docket No. 19-0392 (issued July 12, 2019); *D.W.*, Docket No. 18-0644 (issued November 15, 2018); *Kathryn Haggerty*, 45 ECAB 383 (1994).

from work as a result of the accepted employment injury.[3] Whether a particular injury causes an employee to become disabled from work, and the duration of that disability, are medical issues that must be proven by a preponderance of probative and reliable medical opinion evidence.[4]

Under FECA the term "disability" means the incapacity, because of an employment injury, to earn the wages that the employee was receiving at the time of injury. Disability is thus not synonymous with physical impairment, which may or may not result in an incapacity to earn wages. An employee who has a physical impairment causally related to a federal employment injury, but who nevertheless has the capacity to earn the wages he or she was receiving at the time of injury, has no disability as that term is used in FECA.[5]

Causal relationship is a medical issue, and the medical evidence required to establish causal relationship is rationalized medical evidence.[6] Rationalized medical evidence is medical evidence, which includes a physician's detailed medical opinion on the issue of whether there is a causal relationship between the claimant's claimed disability and the accepted employment injury. The opinion of the physician must be based on a complete factual and medical background of the claimant, must be one of reasonable medical certainty, and must be supported by medical rationale explaining the nature of the relationship between the claimed period of disability and the accepted employment injury.[7] The Board will not require OWCP to pay compensation for disability in the absence of medical evidence directly addressing the specific dates of disability for which compensation is claimed. To do so would essentially allow an employee to self-certify his or her disability and entitlement to compensation.[8]

ANALYSIS

The Board finds that appellant has not met her burden of proof to establish disability from work commencing December 18, 2021, causally related to the accepted November 24, 2020 employment injury.

In his June 1, 2023 report, Dr. Chen, OWCP's second opinion physician, reviewed the medical record, and related his findings from appellant's physical examination. He opined that there was no obvious reason why appellant stopped working on December 20, 2021 as she was not

[3] *Id. See also* 20 C.F.R. § 10.501(a); *K.H.*, Docket No. 25-0906 (issued January 30, 2026); *V.P.*, Docket No. 21-1111 (issued May 23, 2022); *C.E.*, Docket No. 19-1617 (issued June 3, 2020); *M.M.*, Docket No. 18-0817 (issued May 17, 2019); *T.A.*, Docket No. 18-0431 (issued November 7, 2018); *see also Amelia S. Jefferson*, 57 ECAB 183 (2005).

[4] 20 C.F.R. § 10.5(f); *N.M.*, Docket No. 18-0939 (issued December 6, 2018).

[5] *Id*.

[6] *C.J.*, Docket No. 21-1424 (issued February 27, 2024); *J.M.*, Docket No. 19-0478 (issued August 9, 2019).

[7] *R.H.*, Docket No. 18-1382 (issued February 14, 2019).

[8] *C.E., supra* note 3; *M.M., supra* note 3; *see V.B.*, Docket No. 18-1273 (issued March 4, 2019); *S.M.*, Docket No. 17-1557 (issued September 4, 2018); *William A. Archer*, 55 ECAB 674, 679 (2004); *Fereidoon Kharabi*, 52 ECAB 291, 293 (2001).

totally disabled at that time. With respect to the left shoulder and the accepted conditions, Dr. Chen explained that there was no reason why appellant had continued work restrictions from an objective structural standpoint. He further found no evidence of any sort of aggravation of a pre-existing condition. Dr. Chen also opined that there were no additional diagnoses related to the accepted November 24, 2020 employment injury. He noted that the FCE indicated invalidity and that appellant's work restrictions were based on subjective pain. The Board finds that, as Dr. Chen reviewed the medical record, provided physical examination findings, and supported his opinion with sufficient medical rationale, his report represents the weight of the medical evidence.[9]

In his January 6, 2022 report, Dr. Rook noted that appellant last worked on December 20, 2021 as her neck, back, and shoulder pain had increased significantly. He also provided a new restriction for work three non-consecutive days a week. However, Dr. Rook did not explain, with sufficient medical rationale, why appellant's accepted conditions disabled her from work during the claimed period causally related to the accepted November 24, 2020 employment injury. The Board has held that a report is of limited probative value regarding causal relationship if it does not contain medical rationale explaining how the claimed disability was causally related to the accepted employment injury.[10] This evidence is therefore insufficient to establish appellant's disability claim.

Dr. Rook, in his January 19, 2022 reports, placed appellant off work for one month. He asserted that appellant likely had a component of facet-mediated pain in the thoracic spine in conjunction with muscle spasm; her fibromyalgia condition appeared to be permanently aggravated since her work injury, and her condition had worsened. Dr. Rook, however, did not provide sufficient rationale for his medical opinion. As noted above, the Board has held that a report is of limited probative value regarding causal relationship if it does not contain medical rationale explaining how the claimed disability was causally related to the accepted employment injury.[11] Therefore, this evidence is insufficient to establish appellant's disability claim.

In his March 8 and April 7, 2022 reports, Dr. Rook restricted appellant to three days of work per week at the light physical demand level. He did not, however, provide sufficient rationale for his medical opinion. As noted above, the Board has held that a report is of limited probative value regarding causal relationship if it does not contain medical rationale explaining how the claimed disability was causally related to the accepted employment injury.[12] Therefore, this evidence is insufficient to establish appellant's disability claim.

In an April 21, 2022 report, Dr. Rook specifically denied that appellant's fibromyalgia syndrome was the reason she could not work. He explained that the initial 20-pound restriction caused a deterioration in her condition. Dr. Rook related that appellant's condition deteriorated following her return to work as characterized by the objective findings of increased muscle spasm

[9] *L.D.,* Docket No. 24-0840 (issued March 6, 2025); *A.D.,* Docket No. 24-0770 (issued October 22, 2024); *M.H.,* Docket No. 22-1178 (issued April 25, 2023); *D.H.,* Docket No. 21-0102 (issued July 28, 2021).

[10] *See Y.D.*, Docket No. 16-1896 (issued February 10, 2017).

[11] *Id.*

[12] *Id.*

in the neck and shoulder region. However, in an August 10, 2022 report, he opined, without explanation, that appellant had a worsening of her fibromyalgia condition associated with her work-related motor vehicle accident. Dr. Rook did not, however, provide sufficient rationale for his medical opinion. As noted, the Board has held that a report is of limited probative value regarding causal relationship if it does not contain medical rationale explaining how the claimed disability was causally related to the accepted employment injury.[13] Therefore, this evidence is insufficient to establish appellant's disability claim.

In reports dated December 8, 2021, Dr. Rook released appellant to full-time work with restrictions. In an April 26, 2023 report, he noted that appellant had been given a tentative job offer and it was her decision if she wanted to return to work. In an August 9, 2023 report, Dr. Rook noted that appellant did not accept the employing establishment's latest job offer. He indicated that appellant had been given permanent restrictions, and she was not involved in any active treatment. As such, Dr. Rook negated disability. The Board has held that medical evidence that negates disability is of no probative value.[14] Therefore, this evidence is insufficient to establish appellant's disability claim.

In his February 13, 2024 report, Dr. Rook related that starting December 20, 2021 appellant restrictions were based on her chronic left shoulder pain for which she underwent an operative procedure, not her pain due to her fibromyalgia syndrome. He again stated that appellant had not been provided work within her restrictions. Dr. Rook, however, did not explain with sufficient medical rationale, why or how appellant's accepted conditions disabled her from work.[15] This evidence is therefore insufficient to establish appellant's disability claim.

In a March 8, 2022 report, Dr. Rook opined that appellant's subjective complaints of back pain and left shoulder pain triggered muscle spasm from the shoulder region to the left side of her neck, increased the frequency of her migraine headaches, and were related to the work injury. In a May 16, 2022 progress report, Dr. Weinstein related that appellant's recent left shoulder x-rays of the left shoulder were unremarkable, and the March 23, 2022 MRI scan showed mild postoperative changes in the rotator cuff consistent with mild inflammation. He related that, clinically, appellant had no evidence of any significant rotator cuff pathology or other intraarticular pathology. Rather, her main symptoms were myofascial in nature and were present preoperatively. However, neither physician provided an opinion as to whether appellant was disabled from work during the claimed period causally related to the accepted November 24, 2020 employment injury. The Board has held that medical evidence that does not offer an opinion regarding the cause of an employee's condition/disability is of no probative value.[16] This evidence is therefore insufficient to establish appellant's disability claim.

[13] *Id.*

[14] *See D.S.,* Docket No. 26-0377 (issued July 1, 2026); *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).

[15] *Id.*

[16] *See L.B.*, Docket No. 18-0533 (issued August 27, 2018); *D.K.,* Docket No. 17-1549 (issued July 6, 2018).

As the medical evidence of record is insufficient to establish disability from work during the claimed period causally related to the accepted November 24, 2020 employment injury, 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(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 disability from work commencing December 18, 2021, causally related to the accepted November 24, 2020 employment injury.

ORDER

IT IS HEREBY ORDERED THAT the January 5, 2026 decision of the Office of Workers' Compensation Programs is affirmed.

Issued: August 11, 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