

² 5 U.S.C. § 8101 *et seq.*

FACTUAL HISTORY

On September 22, 2024 appellant, then a 59-year-old city carrier, filed an occupational disease claim (Form CA-2) alleging that he sustained a left shoulder rotator cuff condition due to delivering mail at work for 36 years. He noted that he first became aware of his condition and realized its relation to his federal employment on December 4, 2023. Appellant did not stop work.³

In a development letter dated September 30, 2024, OWCP informed appellant of the deficiencies of his claim. It advised him of the type of factual and medical evidence needed and provided a questionnaire for his completion. OWCP afforded appellant 60 days to respond. In a separate development letter dated September 30, 2024, it requested that the employing establishment provide information regarding appellant's claim, including comments from a knowledgeable supervisor. OWCP afforded the employing establishment 30 days to respond. No response was received.

In a follow-up development letter dated October 25, 2024, OWCP advised appellant that it had conducted an interim review, and the evidence remained insufficient to establish his claim. It provided a copy of the development questionnaire for his completion. OWCP noted that appellant had 60 days from the September 30, 2024 letter to submit the necessary evidence. It 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.

On October 30, 2024 OWCP received a job description for appellant's city carrier position.

In an October 30, 2024 statement, the employing establishment controverted appellant's claim. It noted that, during each workday, appellant was entitled to two 10-minute breaks, a 30-minute lunch break, and comfort stops throughout his mail delivery route.

By decision dated December 10, 2024, OWCP denied appellant's occupational disease claim, finding that the evidence of record was insufficient to establish that "the injury and/or event(s) occurred." It concluded, therefore, that the requirements had not been met to establish that he sustained an injury as defined by FECA.⁴

On December 12, 2024 appellant, through counsel, requested an oral hearing before a representative of OWCP's Branch of Hearings and Review.

During the hearing held on March 5, 2025 appellant testified regarding the duties of his city carrier position, noting that he lifted tubs of mail, drove a postal vehicle, sorted and carried mail, and placed mail in mailboxes.

³ OWCP assigned the present claim OWCP File No. xxxxxx834. Under OWCP File No. xxxxxx833, it previously accepted a July 23, 2019 traumatic injury (Form CA-1) wherein appellant sustained a contusion of the left front wall of the thorax. OWCP has administratively combined OWCP File Nos. xxxxxx833 and xxxxxx834, with the latter serving as the master file.

⁴ Appellant retired from the employing establishment in December 2024.

By decision dated April 10, 2025, OWCP's hearing representative modified the December 12, 2024 decision to find that appellant established the implicated employment factors, as alleged. However, the claim remained denied as the medical evidence of record was insufficient to establish a diagnosis in connection with the accepted employment factors.

OWCP subsequently received a March 25, 2025 report wherein Dr. Stephen Wilson, a Board-certified orthopedic surgeon, indicated that appellant was evaluated for a left shoulder injury sustained due to performing repetitive duties with his upper extremities during 37 years of work for the employing establishment. Dr. Wilson noted that he denied any previous work-related or nonwork-related injuries to his left shoulder, and that his job involved reaching away from his body and reaching overhead to sort mail, carrying a mail satchel which he alternated between shoulders, and operating a postal vehicle, a task which during the winter often required using great force to open vehicle doors that were frozen shut. He documented physical examination findings of left shoulder weakness with resisted flexion, extension, abduction, adduction, internal rotation, and external rotation, as well as a positive left shoulder impingement sign. Dr. Wilson noted that there was some atrophy of the left shoulder and that there was tenderness to palpation over the anterior, lateral, and posterior aspects of the left shoulder.

Dr. Wilson diagnosed impingement syndrome of the left shoulder, unspecified injury of muscle(s) and tendon(s) of the rotator cuff of the left shoulder, and primary osteoarthritis (permanent aggravation) of the left shoulder as casually related to the accepted employment factors. He explained that "the above occupational disease conditions that in this case have been made in connection with his repetitive physically demanding work-related duties that he performed throughout and in the course of his greater than 37 years of employment with his date of awareness being December 4, 2023, while employed by the [employing establishment]." Dr. Wilson indicated that appellant was free from injury to his left shoulder when he began working for the employment establishment more than 37 years prior. He advised that appellant performed his regular duties without restrictions until his symptoms became severe and he had to undergo a reverse total left shoulder arthroplasty on October 21, 2024. Dr. Wilson opined that appellant's left shoulder condition was directly related to his work duties.

On January 14, 2026 appellant, through counsel, requested reconsideration.

By decision dated April 10, 2026, OWCP modified the April 10, 2025 decision to find that appellant had established a medical diagnosis in connection with the accepted employment factors. However, the claim remained denied as the medical evidence of record was insufficient to establish a medical condition causally related to the accepted employment factors.

LEGAL PRECEDENT

An employee seeking benefits under FECA⁵ 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 filed with the applicable time limitation, that an injury was sustained while in the performance of duty, as alleged, and that any disability or specific condition for which compensation is claimed is causally related to the

⁵ *Supra* note 2.

employment injury.⁶ These are the essential elements of every compensation claim regardless of whether the claim is predicated upon a traumatic injury or an occupational disease.⁷

In an occupational disease claim, appellant's burden of proof requires submission of 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.⁸

Causal relationship is a medical question that requires rationalized medical opinion evidence to resolve the issue.⁹ 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.¹⁰ Additionally, the physician's opinion must be expressed in terms of a reasonable degree of medical certainty, and must be supported by medical rationale explaining the nature of the relationship between the diagnosed condition and appellant's specific employment factor(s).¹¹

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.

Appellant submitted a March 25, 2025 report wherein Dr. Wilson diagnosed impingement syndrome of the left shoulder, unspecified injury of muscle(s) and tendon(s) of the rotator cuff of the left shoulder, and primary osteoarthritis (permanent aggravation) of the left shoulder as causally related to the accepted employment factors. He explained that "the above occupational disease conditions that in this case have been made in connection with his repetitive physically demanding work-related duties that he performed throughout and in the course of his greater than 37 years of employment with his date of awareness being December 4, 2023, while employed by the [employing establishment]." Dr. Wilson indicated that appellant was free from injury to his left shoulder when he began working for the employing establishment more than 37

⁶ *S.P.*, Docket No. 26-0378 (issued June 22, 2026); *E.S.*, Docket No. 18-1580 (issued January 23, 2020); *M.E.*, Docket No. 18-1135 (issued January 4, 2019); *C.S.*, Docket No. 08-1585 (issued March 3, 2009); *Bonnie A. Contreras*, 57 ECAB 364 (2006).

⁷ *J.C.*, Docket No. 26-0179 (issued March 25, 2026); *S.P.*, 59 ECAB 184 (2007); *Joe D. Cameron*, 41 ECAB 153 (1989); *Elaine Pendleton*, 40 ECAB 1143 (1989).

⁸ *A.C.*, Docket No. 25-0783 (issued September 15, 2025); *S.C.*, Docket No. 18-1242 (issued March 13, 2019).

⁹ *W.M.*, Docket No. 14-1853 (issued May 13, 2020); *T.H.*, 59 ECAB 388, 393 (2008); *Robert G. Morris*, 48 ECAB 238 (1996).

¹⁰ *T.C.*, Docket No. 24-0948 (issued January 10, 2025); *M.V.*, Docket No. 18-0884 (issued December 28, 2018).

¹¹ *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).

years prior. He advised that he performed his regular duties without restrictions until his symptoms became severe and he had to undergo a reverse total left shoulder arthroplasty on October 21, 2024. Dr. Wilson opined that therefore “the sole and major cause of the occupational disease injuries and need for treatment” of appellant’s left shoulder was directly related to his work duties. However, he did not provide adequate medical rationale in support of his opinion on causal relationship. Dr. Wilson did not describe the medical mechanism through which appellant’s work duties could have caused or aggravated the claimed left shoulder conditions. The Board has held that a report is of limited probative value regarding causal relationship if it does not contain medical rationale explaining how an employment activity could have caused or aggravated a medical condition.¹² Therefore, this evidence is insufficient to establish appellant’s occupational disease 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.

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.

¹² See *T.M.*, Docket No. 26-0397 (issued July 8, 2026); *B.M.*, Docket No. 26-0249 (issued May 26, 2026); *Y.D.*, Docket No. 16-1896 (issued February 10, 2017).

ORDER

IT IS HEREBY ORDERED THAT the April 10, 2026 decision of the Office of Workers' Compensation Programs is affirmed.

Issued: August 19, 2026
Washington, DC

Alec J. Koromilas, Chief Judge
Employees' Compensation Appeals Board

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

Janice B. Askin, Judge
Employees' Compensation Appeals Board