

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

R.C., Appellant	)	
	)	
and	)	Docket No. 26-0037
	)	Issued: February 13, 2026
U.S. POSTAL SERVICE, NORTH TORRANCE	)	
POST OFFICE, Torrance, CA, 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  
JANICE B. ASKIN, Judge  
VALERIE D. EVANS-HARRELL, Alternate Judge

**JURISDICTION**

On October 15, 2025 appellant filed a timely appeal from an October 9, 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.

**ISSUE**

The issue is whether appellant has met his burden of proof to establish a medical condition causally related to the accepted July 14, 2025 employment incident.

**FACTUAL HISTORY**

On July 22, 2025 appellant, then a 54-year-old city carrier, filed a traumatic injury claim (Form CA-1) alleging that on July 14, 2025 he injured his neck, low back, and right shoulder when loading heavy packages into his work vehicle while in the performance of duty. He further related

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

in a July 22, 2025 statement that he had previously sustained an injury at work on July 22, 2024.<sup>2</sup> Appellant stopped work on July 15, 2025.

In a July 25, 2025 form report, Dr. Christopher P. DeCarlo, a Board-certified physiatrist, recounted the history of appellant's July 14, 2025 incident. He related appellant's physical examination findings regarding the cervical spine, right shoulder including the upper trapezius muscle, and the lumbar spine. Pending further diagnostic testing, he provided preliminary diagnoses of cervical spine sprain, lumbar spine sprain, and right shoulder sprain, rule out internal derangement, which he opined were consistent with appellant's July 14, 2025 injury. Dr. DeCarlo further opined that appellant could return to limited-duty work with restrictions on July 24, 2025.

In a July 30, 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 60 days to submit the necessary evidence.

OWCP thereafter received appellant's July 31, 2025 statement, wherein he related that the July 14, 2025 incident was new and separate from his July 22, 2024 work incident.

In a July 28, 2025 after-visit summary, Dr. Michael C. Daignault, a Board-certified emergency medicine specialist, diagnosed acute midline low back pain without sciatica.

In an August 4, 2025 report, Dr. Jane B. Kong, a Board-certified family practitioner, reported that appellant's back pain began on July 14, 2025 after lifting a heavy object and had continued for two to three weeks. She also noted that appellant had a history of a resolved work-related back injury and that prior lumbar magnetic resonance imaging (MRI) scan findings indicated disc disease. Dr. Kong related appellant's physical examination findings and provided an assessment of lumbar back pain. She recommended that appellant be referred to physical therapy for back pain and that he be held off work for four weeks. In an August 4, 2025 disability note, Dr. Kong opined that appellant was unable to return to work due to "this medical condition" until September 4, 2025.

An August 14, 2025 MRI scan report of appellant's lumbar spine related an impression of scattered degenerative change. Mild central stenosis was noted, greatest at L4-L5, where there may be crowding upon the descending left L5 nerve root in the left lateral recess, with the need to correlate for left L5 symptomatology. A varying degree of foraminal stenosis, greatest at L4-L5 and L5-S1, was noted with no definite impingement upon any of the exiting components of the lumbar nerve roots. Modic type I endplate change at L5-S1, potentially a source of pain, was also noted.

In a follow-up letter dated August 29, 2025, OWCP advised appellant that it had conducted an interim review, and the evidence remained insufficient to establish his claim. It noted that he had 60 days from the July 30, 2025 letter to submit the necessary evidence. OWCP further advised

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<sup>2</sup> OWCP assigned the present claim OWCP File No. xxxxxx185. Under OWCP File No. xxxxx938, OWCP accepted appellant's traumatic injury claim of July 22, 2024 for a strain of unspecified muscle, fascia and tendon at shoulder and upper arm level, right shoulder. OWCP has not administratively combined these files.

that if sufficient evidence was not received during this time, it would issue a decision based on the evidence contained in the record.

In an August 27, 2025 report, Dr. Kenneth S. Bradley, a pain management specialist and Board-certified anesthesiologist, indicated that appellant presented for a follow-up of chronic intractable lumbar back pain. He performed a physical examination and provided assessments of cervicgia, low back pain, lumbar radiculopathy, lumbar spondylolisthesis, chronic pain syndrome and fibromyalgia. Dr. Bradley provided trigger point injections to three muscle groups including serratus posterior, erector spinae and latissimus dorsi, gluteus medius, and rhomboid major.

In a September 8, 2025 return to work note, Dr. Kong opined appellant was unable to work and required further evaluation and treatment.

In a September 18, 2025 report, Dr. Andrew Kim, a Board-certified orthopedic surgeon, reported that appellant delivered parcels for the employing establishment and that he was initially seen in August 2025 following a possible workplace injury that occurred on July 14, 2025, after lifting a heavy object. He noted that appellant has a prior history of back injury one to two years ago. Dr. Kim noted that appellant was seen for ongoing, subacute back pain. He noted appellant's MRI scan findings and provided an assessment of spinal stenosis of lumbar region, unspecified whether neurogenic claudication present.<sup>3</sup> In a September 18, 2025 return to work note, Dr. Kim held appellant off work from September 18 through October 17, 2025.

By decision dated October 9, 2025, OWCP denied appellant's claim, finding that the medical evidence of record was insufficient to establish a causal relationship between appellant's medical condition and the accepted July 14, 2025 employment incident.

### **LEGAL PRECEDENT**

An employee seeking benefits under FECA<sup>4</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>5</sup> These are the

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<sup>3</sup> It is unclear from the record whether Dr. Kim's report is complete as no examination findings were provided.

<sup>4</sup> *Supra* note 1.

<sup>5</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).

essential elements of every compensation claim regardless of whether the claim is predicated on a traumatic injury or an occupational disease.<sup>6</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 time and place, and in the manner alleged. Second the employee must submit sufficient evidence to establish whether the employment incident caused an injury.<sup>7</sup>

The medical evidence required to establish a causal relationship between a claimed specific condition and an employment incident is rationalized medical opinion evidence.<sup>8</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>9</sup>

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, the physician must provide a rationalized medical opinion that differentiates between the effects of the work-related injury or disease and the preexisting condition.<sup>10</sup>

### ANALYSIS

The Board finds that appellant has not met his burden of proof to establish a medical condition causally related to the accepted July 14, 2025 employment incident.

In a July 25, 2025 report, Dr. DeCarlo provided preliminary diagnoses of cervical spine, right shoulder, and lumbar spine sprains, which he opined were consistent with appellant's July 14, 2025 injury. While Dr. DeCarlo provided an affirmative opinion in support of causal relationship,

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<sup>6</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).

<sup>7</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>8</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>9</sup> *W.C.*, Docket No. 25-0899 (issued December 29, 2025); *A.S.*, Docket No. 19-1955 (issued April 9, 2020); *Leslie C. Moore*, 52 ECAB 132 (2000).

<sup>10</sup> 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).

he did not offer rationale to support his opinion regarding causal relationship.<sup>11</sup> The Board has held that medical opinion evidence must offer a medically-sound explanation of how the specific employment incident physiologically caused injury.<sup>12</sup> For this reason, Dr. DeCarlo's report is insufficient to establish the claim.

In a July 28, 2025 report, Dr. Daignault diagnosed acute midline low back pain without sciatica. Similarly, Dr. Kong, in her August 4, 2025 report, provided an assessment of lumbar back pain. The Board has consistently held that pain is a symptom and not a compensable medical diagnosis.<sup>13</sup> A medical report lacking a firm diagnosis is of no probative value.<sup>14</sup> As such, this evidence is insufficient to meet appellant's burden of proof.

Dr. Bradley, in an August 27, 2025 report, diagnosed cervicalgia, lumbar radiculopathy, lumbar spondylolisthesis, chronic pain syndrome and fibromyalgia. He did not, however, provide a history of injury,<sup>15</sup> or a rationalized opinion regarding the cause of appellant's diagnosed conditions. While Dr. Kim, in his September 18, 2025 report, noted the history of appellant's July 14, 2025 injury, and diagnosed lumbar spine stenosis, he did not provide an opinion on the cause of the diagnosed condition. 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.<sup>16</sup> For these reasons, the reports from Dr. Bradley and Dr. Kim are insufficient to establish appellant's claim.

The remaining medical evidence consists of diagnostic test results, including the August 14, 2025 MRI scan of the lumbar spine. 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.<sup>17</sup> These reports are therefore insufficient to establish appellant's claim.

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<sup>11</sup> 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).

<sup>12</sup> *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).

<sup>13</sup> *B.T.*, Docket No. 22-0022 (issued May 23, 2022); *S.L.*, Docket No. 19-1536 (issued June 26, 2020); *B.P.*, Docket No. 12-1345 (issued November 13, 2012).

<sup>14</sup> *J.P.*, Docket No. 20-0381 (issued July 28, 2020); *R.L.*, Docket No. 20-0284 (issued June 30, 2020).

<sup>15</sup> *M.E.*, Docket No. 08-558 (issued June 18, 2008); *Frank Luis Rembisz*, 52 ECAB 147 (2000) (medical opinions based on an incomplete history have little probative value).

<sup>16</sup> See *C.M.*, Docket No. 25-0772 (issued December 15, 2025); *L.B.*, Docket No. 18-0533 (issued August 27, 2018); *D.K.*, Docket No. 17-1549 (issued July 6, 2018).

<sup>17</sup> 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).

As the medical evidence of record is insufficient to establish a medical condition causally related to appellant's accepted July 14, 2025 employment incident, the Board finds that he 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 July 14, 2025 employment incident.

**ORDER**

**IT IS HEREBY ORDERED THAT** the October 9, 2025 decision of the Office of Workers' Compensation Programs is affirmed.

Issued: February 13, 2026  
Washington, DC

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

Janice B. Askin, Judge  
Employees' Compensation Appeals Board

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