

FACTUAL HISTORY

On May 27, 2025 appellant, then a 39-year-old rural carrier, filed a traumatic injury claim (Form CA-1) alleging that on May 17, 2025 she injured her right shoulder when she closed the sliding door of her postal vehicle while in the performance of duty. She stopped work on the claimed date of injury.

On May 22, 2025 appellant sought medical treatment from Dr. Ruchir Thakkar, an osteopath specializing in family medicine. Dr. Thakkar advised that she could return to work on May 27, 2025. On May 29, 2025 Filimon Ramos, a physician assistant, noted that appellant was seen on that date and released her to return to work on June 2, 2025.

In a June 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 form report signed by Mr. Ramos on June 2, 2025, he held appellant off work pending diagnostic findings related to her right shoulder.

A June 9, 2025 right shoulder magnetic resonance imaging (MRI) scan demonstrated a complex tear/detachment of the anteroinferior glenoid labrum, minimal bony spurring, subcortical edema of the underlying anteroinferior bony glenoid lip possibly degenerative due to the labral tear, and small glenohumeral joint effusion.

On June 16, 2025 Dr. Sujal Desai, an osteopathic Board-certified orthopedic surgeon, held appellant off work for three weeks, to be followed by a reevaluation of her work status. In a July 7, 2025 note, he diagnosed right glenoid labral tear. On July 16, 2025 Dr. Desai completed an insurance form report diagnosing glenoid labral tear of the right shoulder, recommending right shoulder arthroscopy with capsular plication, and concluding that appellant was disabled for work during the period June 16 through August 5, 2025.

In an undated note, Dr. Thakkar diagnosed effusion right shoulder and right shoulder glenohumeral tear. He also completed an undated and partially illegible attending physician's report (Form CA-20) which described the May 17, 2025 employment incident when appellant closed the sliding door on her postal vehicle. Dr. Thakkar diagnosed tear of the glenoid labrum of the right shoulder. He opined that the diagnosed condition was employment related due to sliding and lifting the door of the postal truck.

In a follow-up letter dated August 1, 2025, OWCP advised appellant that it had conducted an interim review, and the evidence remained insufficient to establish her claim. It noted that she had 60 days from the June 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.

On August 4, 2025 Dr. Desai completed a treatment note in which he continued to support appellant's disability from work. He also provided an August 5, 2025 report diagnosing right glenoid labral tear and recommending surgery.

By decision dated August 11, 2025, OWCP denied appellant's claim, finding that the medical evidence of record was insufficient to establish a causal relationship between appellant's diagnosed medical condition and the accepted May 17, 2025 employment incident.

OWCP subsequently received notes commencing June 24, 2025, from Michael Carli, a physical therapist.

On September 3 and 8, 2025 appellant requested reconsideration and provided additional evidence. In reports dated June 16 through August 4, 2025, Dr. Desai related the accepted May 17, 2025 employment incident and reviewed diagnostic studies. He diagnosed complex right glenoid labral tear and recounted appellant's continued report of right shoulder pain. Dr. Desai recommended surgical repair of the torn labrum.

By decision dated October 1, 2025, OWCP denied modification.

LEGAL PRECEDENT

An employee seeking benefits under FECA³ 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.⁴ These are the essential elements of every compensation claim regardless of whether the claim is predicated on a traumatic injury or an occupational disease.⁵

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.⁶

The medical evidence required to establish a causal relationship between a claimed specific condition and an employment incident is rationalized medical opinion evidence.⁷ 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

³ *Supra* note 1.

⁴ *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).

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

⁶ *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).

⁷ *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).

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

ANALYSIS

The Board finds that appellant has not met her burden of proof to establish a right shoulder condition causally related to the accepted May 17, 2025 employment incident.

Dr. Thakkar, in an undated form report, described the accepted May 17, 2025 employment incident, diagnosed right shoulder tear of the glenoid labrum, and opined that the diagnosed condition was employment related due to sliding and lifting the door of the mail truck. However, he did not provide medical rationale explaining, physiologically, how appellant's additional diagnosed conditions were caused or aggravated by the accepted May 17, 2025 employment injury.⁹ As Dr. Thakkar failed to provide rationale in support of causal relationship between the diagnosed conditions and the accepted May 17, 2025 employment incident, this evidence is of limited probative value and is insufficient to establish the claim.

In reports dated June 16 through August 5, 2025, Dr. Desai diagnosed complex right glenoid labral tear. In an undated note, Dr. Thakkar diagnosed effusion right shoulder and right shoulder glenohumeral tear. However, these reports failed to provide an opinion regarding causal relationship between a diagnosed condition and the accepted May 17, 2025 employment incident. 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.¹⁰ Therefore, this evidence is insufficient to establish appellant's claim.

In support of her claim, appellant submitted reports from Mr. Ramos, a physician assistant, and Mr. Carli, a physical therapist. However, certain health care providers such as physician assistants and physical therapists are not considered physicians under FECA and, therefore, are not competent to provide a medical opinion.¹¹ As such, this evidence is of no probative value and insufficient to establish appellant's claim.

The remainder of the evidence of record consists of diagnostic studies. The Board has held, however, that diagnostic studies, standing alone, lack probative value on the issue of causal

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

⁹ *V.F.*, Docket No. 25-0548 (issued September 5, 2025); *S.S.*, Docket No. 23-0391 (issued October 24, 2023); *see F.H.*, Docket No. 18-1238 (issued January 18, 2019); *J.R.*, Docket No. 18-0206 (issued October 15, 2018).

¹⁰ *See B.B.*, Docket No. 25-0661 (issued September 9, 2025); *G.R.*, Docket No. 25-0540 (issued June 26, 2025); *F.S.*, Docket No. 23-0112 (issued April 26, 2023); *L.B.*, Docket 18-0533 (issued August 27, 2018); *D.K.*, Docket 17-1549 (issued July 6, 2018).

¹¹ Section 8102(2) of FECA provides as follows: "(2) 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). 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 H.S.*, Docket No. 20-0939 (issued February 12, 2021) (physician assistants are not considered physicians as defined under FECA). *See also V.R.*, Docket No. 19-0758 (issued March 16, 2021) (a physical therapist is not considered a physician under FECA); *C.K.*, Docket No. 19-1549 (issued June 30, 2020) (physical therapists are not considered physicians as defined under FECA).

relationship as they do not address whether the accepted employment incident resulted in a medical condition.¹²

As the medical evidence of record is insufficient to establish a medical condition causally related to the accepted May 17, 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(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 a right shoulder condition causally related to the accepted May 17, 2025 employment incident.

ORDER

IT IS HEREBY ORDERED THAT the August 11 and October 1, 2025 decisions of the Office of Workers' Compensation Programs are affirmed.

Issued: February 17, 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

¹² *L.A.*, Docket No. 22-0463 (issued September 29, 2022); *D.K.*, Docket No. 21-0082 (issued October 26, 2021); *O.C.*, Docket No. 20-0514 (issued October 8, 2020); *R.J.*, Docket No. 19-0179 (issued May 26, 2020).