United States Department of Labor
Employees' Compensation Appeals Board

G.C., Appellant	)	
and	)	**Docket No. 25-0709**
DEPARTMENT OF VETERANS AFFAIRS, MARTINEZ VA MEDICAL CENTER, Martinez, CA, Employer	)	**Issued: January 30, 2026**

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 July 18, 2025 appellant filed a timely appeal from a May 14, 2025 merit decision of the Office of Workers' Compensation Programs (OWCP).[1] Pursuant to the Federal Employees'

[1] Appellant submitted a timely request for oral argument before the Board. 20 C.F.R. § 501.5(b). Pursuant to the Board's *Rules of Procedure*, oral argument may be held in the discretion of the Board. 20 C.F.R. § 501.5(a). In support of the oral argument request, appellant asserted that oral argument should be granted because OWCP had misinterpreted the evidence she submitted in support of her claim. The Board, in exercising its discretion, denies appellant's request for oral argument because this matter requires an evaluation of the evidence required. As such, the arguments on appeal can be adequately addressed in a decision based on a review of the case record. Oral argument in this appeal would not serve a useful purpose. Therefore, the oral argument request is denied and this decision is based on the case record as submitted to the Board.

Compensation Act[2] (FECA) and 20 C.F.R. §§ 501.2(c) and 501.3, the Board has jurisdiction over the merits of this case.[3]

ISSUE

The issue is whether appellant has met her burden of proof to establish that she sustained an emotional/stress-related condition in the performance of duty, as alleged.

FACTUAL HISTORY

On June 26, 2024 appellant, then a 61-year-old nurse, filed an occupational disease claim (Form CA-2) alleging that she sustained emotional/stress-related conditions in the form of a bleeding perforating stress ulcer in her aorta and injuries to her femoral and external iliac arteries due to factors of her federal employment. She asserted that she sustained these conditions due to stress from performing an extensive amount of work without enough staff. Appellant claimed that she had to work overtime to complete administrative tasks and that she worked "in place of 4-6 staff." She indicated that she first became aware of her condition on April 13, 2023, and realized its relation to her federal employment on June 13, 2024. Appellant stopped work on April 13, 2023.[4]

Appellant submitted a notification of personnel action Standard Form (SF) 50 with an effective date of January 1, 2023; a screenshot of a May 24, 2023 entry, listing a diagnosis aneurysm of descending thoracic aorta; leave and earning statements from December 2023 and June 2024; a list of leave usage in June 2024; a June 26, 2024 report by Dr. Robert E. Noll, a Board-certified surgeon, who diagnosed peripheral arterial disease; a June 26, 2024 e-mail exchange between appellant and Jeffrey Sabido, a physician assistant in Dr. Noll's office, concerning appellant's work restrictions; and a July 2, 2024 claim for compensation (Form CA-7).

In a June 28, 2024 letter, the employing establishment challenged appellant's claim, asserting that it remained unclear how the events alleged by appellant resulted in the claimed conditions.

In a July 10, 2024 development letter, OWCP notified appellant of the deficiencies of her claim. It advised her of the type of evidence needed and provided a questionnaire for her completion. OWCP afforded appellant 60 days to respond. In a separate development letter of even date, it requested that the employing establishment provide comments from a knowledgeable

[2] 5 U.S.C. § 8101 *et seq*.

[3] The Board notes that, following the May 14, 2025 decision, appellant submitted additional evidence to OWCP. However, the Board's *Rules of Procedures* provides: "The Board's review of a case is limited to the evidence in the case record that was before OWCP at the time of its final decision. Evidence not before OWCP will not be considered by the Board for the first time on appeal." 20 C.F.R. § 501.2(c)(1). Thus, the Board is precluded from reviewing this additional evidence for the first time on appeal. *Id*.

[4] Appellant later returned to work but stopped work again on May 21, 2024. She retired from the employing establishment effective February 28, 2025.

supervisor regarding appellant's allegations. OWCP afforded the employing establishment 30 days to respond.

In an undated response to OWCP's development letter, received on July 18, 2024, appellant related that she had been working for the employing establishment since February 20, 2007, and began working in primary care on August 17, 2020. She asserted that after she began working in the dermatology clinic on April 11, 2022 she worked with two surgeons and was required to review a backlog of surgery scheduling for skin cancer patients. Appellant advised C.M., who was her supervisor when she first began working in the dermatology clinic, but that A.R. later became her supervisor.[5] She claimed that after she became a general dermatology nurse she was required to address work-flow management, staffing, e-mails from patients, alerts, tissue management, and heating/cooling of the building. Appellant asserted that the clinic was short-staffed on an almost-daily basis and that she had to work on the floor assisting with procedures. She alleged that she asked for additional staff on an almost-daily basis and that management told her that it was attempting to provide additional staffing but was having difficulty doing so. Appellant claimed that she worked overtime on an almost-daily basis and was basically managing the clinic and doing most of the work. She asserted that her work was particularly overwhelming for almost a year when she had to manage staff and provide answers to providers, noting that the clinic manager rarely came to the clinic and the chief nurse did not come to the clinic until after the dermatology chief complained. Appellant indicated that in March 2023 she took off a week from work due to chest pains but that A.R. did not act upon her request to reassign her work for that period, including handling patient scheduling and addressing alerts, to another employee. She alleged that when she returned to work on April 12 and 13, 2023 there was an overwhelming amount of work that had to be completed with urgency, including responding to numerous alerts, and that she worked from 7:30 a.m. to 8:00 p.m. on those dates, despite her usual workday extending from 7:30 a.m. to 4:00 p.m. Appellant indicated that, after stopping work on April 13, 2023, she went to the emergency room due to chest pains and underwent diagnostic testing which revealed she had a bleeding perforating stress ulcer in her aorta. She advised that on April 14, 2024 she was transferred to another hospital and was told that she would have to undergo surgery.

Appellant asserted that on April 14, 2023 A.R. began to harass her by requesting a return-to-work letter without justification and that she wrote to her on the day of her surgery, April 18, 2023, to ask whether her physicians knew when she would return to work. She asserted that A.R. improperly threatened to place her on absent without leave (AWOL) status during this period. Appellant alleged that when she returned to work in June 2023 A.R. improperly attempted to add more work to her duties and unjustifiably placed a counseling statement in her record after she refused the additional work. She indicated that in January 2024 she learned that the April 18, 2023 surgery had damaged her femoral and external iliac arteries, and she also discussed her upper extremity conditions, including right trigger finger and reinjury of her right wrist after carpal tunnel surgery. Appellant advised that on April 15, 2024 she put in a request for reasonable accommodation and indicated that her physicians advised that she should be accommodated by being permanently placed in an administrative job. She stated that management advised it did not currently have permanent administrative work available and that she would be let go if such work was not found to be available within 40 days. Appellant noted that management instructed her to take leave as she "should not abuse her [reasonable accommodation]" and that she thereupon

[5] Appellant advised that A.R. began managing her on a temporary basis in January 2023.

stopped work on May 21, 2024 without pay. She described alleged work factors which she considered stressful and detrimental to her health, including management's failure to replace staff members who had left their jobs, intermittent placement of staff members off duty due to funding shortages, and extra work she had to perform due to inadequate staffing. Appellant further described the additional duties she had to perform, including addressing all the patient advocate complaints/investigations, serving as "clinic champion" in her work unit, and handling scheduling/coordination matters. She asserted that she never took breaks, that she ate lunch while working, and that each workday she was the first person to start working at the clinic and the last to leave it. Appellant generally alleged that A.R. caused stress by adding more work and refusing overtime work, and also claimed that the employing establishment improperly failed to provide a functional statement which listed her exact job duties.

Appellant submitted additional medical evidence, including April 2 and October 22, 2024 reports by Dr. Noll who diagnosed peripheral arterial disease and aneurysm of the descending thoracic aorta; an April 17, 2024 report of Dr. Andrew M. Ho, a Board-certified surgeon, who advised that he had been treating appellant for stenosing tenosynovitis of the right ring finger; and a November 30, 2023 mental health consult report by Kandice D. Rivers, a nurse practitioner.

In an unsigned and undated response to OWCP's development letter, received on July 18, 2024, an employing establishment official indicated that the clinic where appellant worked ran from 8:00 a.m. to 4:30 p.m., Monday through Friday, with the clinic occasionally remaining open late for periods not exceeding 30 minutes.[6] In response to a question regarding accommodations made to appellant, the employing establishment official asserted that appellant received additional staff support for workload balance and that she was reassigned to another section of the clinic. On September 14, 2024 OWCP received appellant's response to this document in which she asserted that she worked until 8:00 p.m. on the day she had to go to the emergency room and that she was tasked to perform the duties of four to six people. She asserted that from April 2022 until A.R. came to the clinic she had been working overtime on a daily basis and was paid for overtime work, but A.R. always found an excuse not to pay her for overtime she had worked. Appellant asserted that she was responsible for all the administrative work in the clinic; she claimed that she asked for additional staff every day, but rarely was provided with such staff.

The employing establishment also submitted a functional statement for the position of licensed vocational nurse, signed by management on September 11, 2023, and an "occupational illness packet" including an August 5, 2024 notice of election of physician. In a final accommodation determination from September 2024, the employing establishment indicated that appellant's case was closed because she could not be accommodated in the current position and no other viable position was found.

On October 31, 2024 OWCP received additional documents from appellant. In undated statements, some in the form of computer screenshots, appellant discussed various matters, including A.R.'s communications with her on April 13 and 14, 2023 regarding her return to work, the August 1, 2024 counseling session, and her work duties, which included setting up the clinic, responding to alerts, and handling surgery scheduling matters. Appellant submitted e-mails between herself and managers, dated in 2023 and 2024, which related to such matters as leave

[6] The case record contains a July 23, 2024 e-mail in which the employing establishment requested that O.A. complete the "supervisor response" to appellant's workers' compensation claim.

usage, workload, and disciplinary actions. In a May 19, 2023 e-mail to A.R., she discussed her leave usage and potential return to work. In an August 16, 2023 e-mail to K.M., a human resources manager, appellant asserted that A.R. wrongly accused her of refusing to perform consult work.

Appellant also submitted an August 1, 2023 written counseling document, in which A.R. asserted that on that date appellant engaged in insubordination and unprofessional conduct when she refused, in a rude and argumentative manner, to follow the consult process for the clinic. The case record also contains statements, dated in 2024, in which coworkers asserted that A.R. and other managers created stress by giving them additional duties. In an April 20, 2024 statement, B.G., a coworker, asserted that the nurses in the clinic were given added work duties, but that A.R. and S.H., another supervisor, told them that overtime would not be approved. B.G. stated that A.R. and S.H. wrongly concluded that the nurses were not seeing enough patients per day and that A.R. complained to her regarding appellant's use of leave. In an undated statement, R.I., chief of dermatology, and several other witnesses from the employing establishment discussed appellant's work at the clinic. The witnesses stated that appellant "was the first one to come to work and the last to leave, working late almost daily. She even worked during lunch hours."

In a November 4, 2024 development letter, OWCP requested additional information from the employing establishment. It requested that A.R. comment on the accuracy of appellant's claim, including her assertions regarding working in place of four to six staff members, working overtime on an almost-daily basis, performing most of the clinic's work for approximately a year, being required to work overtime upon her return to work on April 13, 2023, and being harassed about returning to work after her April 14, 2023 work stoppage. OWCP afforded the employing establishment 30 days to respond.

On November 15, 2024 OWCP received additional statements from appellant, some in the form of computer screenshots, in which she discussed various matters, including A.R.'s communications with her in April 2023 regarding her return to work, requests for use of overtime, and assignment of additional work duties. She also submitted additional medical evidence, an August 9, 2023 e-mail to management in which she discussed her work duties, and a proficiency report from 2024.

In a November 22, 2024 statement, A.R. asserted that appellant never had to work in place of four to six staff members. She indicated that appellant's department was authorized for four staff members and was staffed with three until April 2024 when a second registered nurse was hired. A.R. maintained that, until that time, the department borrowed staff to assist with the workload of the surgical nurses. She asserted that appellant never was required to work until 8:00 p.m., noting the assistance provided by two other staff members and a contract hire worker. A.R. indicated that time system records confirmed that appellant worked from 7:30 a.m. to 8:00 p.m. on April 12, 2023, and that she was then sent an e-mail stating that going forward all overtime had to be pre-approved by a manager before the overtime was worked. She noted that on April 13, 2023 appellant again worked overtime until 8:00 p.m. without pre-approval. A.R. denied appellant's claim that she harassed her beginning April 14, 2023, and noted that appellant filed an Equal Employment Opportunity (EEO) claim "which came back unfounded." She maintained that reasonable accommodations were offered to appellant, and that leave without pay was authorized for the period May 1 to June 23, 2023. A.R. attached several e-mails from April 2023, including e-mails sent between appellant and herself, discussing appellant's overtime work on April 12

and 13, 2023 and the procedures for using overtime. She also attached e-mails she sent to appellant in May 2023 in which she denied harassing her about returning to work.

In a December 4, 2024 statement, A.R. indicated that she started covering appellant's department in January 2023, that from January to April 2023 a detail nurse assisted in covering the department, and that in April 2023 a new registered nurse was hired. She discussed the assistance she provided appellant, and noted that in March 2023 she hired an intermittent health technician to assist with some clinical duties. A.R. maintained that the witnesses who signed a statement submitted by appellant, including R.I., would not have knowledge of her work duties and day-to-day activities.

By decision dated December 10, 2024, OWCP denied appellant's claim for a work-related emotional/stress-related condition, finding that she had not established a compensable employment factor. It concluded, therefore, that she did not establish an injury in the performance of duty as defined by FECA.

On February 20, 2025 appellant requested reconsideration of the December 10, 2024 decision.

In a March 18, 2025 statement, appellant again asserted that she had to perform an overwhelming amount of work while there were staff shortages. She further discussed her trip to the emergency room on April 13, 2023, the April 18, 2023 surgery and its effects, and A.R.'s requests to return to work.

In a March 25, 2025 statement, K.M., a human resources specialist for the employing establishment, discussed appellant's preexisting cardiac problems, noting that the most common cause of thoracic aortic aneurysms was atherosclerosis, a hardening of arteries from plaque building up gradually inside them. She maintained that A.R. provided adequate staff support for appellant, that it was not mandated that appellant stay late at work other than when there was an occasional clinic lasting less than 30 minutes, and that A.R.'s counseling of appellant was within her supervisory duties. K.M. asserted that A.R. provided a detailed description of the staff members who assisted appellant and maintained that appellant provided inconsistent accounts of the amount of work she was required to perform. She acknowledged that appellant performed a large amount of administrative work, including responding to alerts, when she briefly returned to work in mid-April 2023. K.M.'s statement includes a mostly illegible screenshot which appears to depict a timesheet record.

In a May 5, 2025 statement, appellant further discussed the treatment of her medical conditions, including her April 18, 2023 cardiac surgery for a stress ulcer, and her use of blood pressure medication. She asserted that her blood pressure was extremely high during her encounters with A.R. in mid-April 2023. Appellant also submitted additional medical evidence, an August 2024 reassignment search document, and an undated screenshot regarding registered nurse positions at the employing establishment.

By decision dated May 14, 2025, OWCP denied modification of its December 10, 2024 decision.

LEGAL PRECEDENT

An employee seeking benefits under FECA[7] 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 within 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 employment injury.[8] These are the essential elements of each and every compensation claim regardless of whether the claim is predicated on a traumatic injury or an occupational disease.[9]

To establish an emotional condition in the performance of duty, a claimant must submit: (1) factual evidence identifying an employment factor or incident alleged to have caused or contributed to his or her claimed emotional condition; (2) medical evidence establishing that he or she has a diagnosed emotional or psychiatric disorder; and (3) rationalized medical opinion evidence establishing that the accepted compensable employment factors are causally related to the diagnosed emotional condition.[10]

Workers' compensation law does not apply to each and every injury or illness that is somehow related to an employee's employment. There are situations where an injury or an illness has some connection with the employment but nevertheless does not come within the concept or coverage of workers' compensation. Where the disability results from an employee's emotional reaction to his or her regular or specially assigned duties or to a requirement imposed by the employment, the disability comes within the coverage of FECA.[11] On the other hand, the disability is not covered where it results from such factors as an employee's fear of a reduction-in-force or his or her frustration from not being permitted to work in a particular environment, or to hold a particular position.[12]

Administrative and personnel matters, although generally related to the employee's employment, are administrative functions of the employer rather than the regular or specially assigned work duties of the employee and are not covered under FECA.[13] Where, however, the evidence demonstrates that the employing establishment either erred or acted abusively in

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[7] 5 U.S.C. § 8101 *et seq*.

[8] *A.J.,* Docket No. 18-1116 (issued January 23, 2019); *Gary J. Watling,* 52 ECAB 278 (2001).

[9] 20 C.F.R. § 10.115(e); *M.K.*, Docket No. 18-1623 (issued April 10, 2019); *see T.O.,* Docket No. 18-1012 (issued October 29, 2018); *see Michael E. Smith,* 50 ECAB 313 (1999).

[10] *See S.K.,* Docket No. 18-1648 (issued March 14, 2019); *M.C.,* Docket No. 14-1456 (issued December 24, 2014); *Debbie J. Hobbs*, 43 ECAB 135 (1991); *Donna Faye Cardwell*, 41 ECAB 730 (1990).

[11] *Lillian Cutler*, 28 ECAB 125 (1976).

[12] *A.E.,* Docket No. 18-1587 (issued March 13, 2019); *Gregorio E. Conde*, 52 ECAB 410 (2001).

[13] *See R.M.,* Docket No. 19-1088 (issued November 17, 2020); *Thomas D. McEuen,* 41 ECAB 387 (1990), *reaff'd on recon.,* 42 ECAB 556 (1991).

discharging its administrative or personnel responsibilities, such action will be considered a compensable employment factor.[14]

For harassment or discrimination to give rise to a compensable disability under FECA, there must be probative and reliable evidence that harassment or discrimination did in fact occur.[15] Mere perceptions of harassment are not compensable under FECA.[16]

ANALYSIS

The Board finds that this case is not in posture for decision.

As appellant alleged that she sustained a work-related emotional/stress-related condition, the Board must initially determine whether she has established a compensable employment factor under FECA. The Board notes that some of appellant's allegations directly relate to her regular or specially assigned duties pursuant to *Lillian Cutler*.[17]

Specifically, appellant alleged that on April 12 and 13, 2023, while working overtime, she had to perform a high amount of administrative work. The statements by employing establishment officials, including A.R. and K.M., provide support for appellant's allegation. Therefore, the Board finds that appellant has established overwork as a compensable employment factor.

Appellant also has alleged that the employing establishment committed error and abuse with respect to administrative/personnel matters, and that she was subjected to harassment by the employing establishment. She claimed that managers improperly handled matters relating to leave usage, assignment of work duties, requests to work overtime, and denial of reasonable accommodation. Appellant further claimed that A.R. improperly ignored her requests for help from additional staff members and that the employing establishment wrongly failed to provide a functional statement which listed her exact job duties. The Board finds that appellant did not submit sufficient evidence to establish that the employing establishment committed error or abuse with respect to administrative/personnel matters. Although appellant expressed dissatisfaction with the actions of superiors, the Board has held that mere dislike or disagreement with certain supervisory actions will not be compensable absent error or abuse on the part of the supervisor.[18] Appellant, therefore, has not established a compensable employment factor with respect to administrative or personnel matters.

Appellant also alleged harassment by the employing establishment. She asserted that on April 14, 2023 A.R. began to subject her to harassment by improperly requesting a return-to-work letter. Appellant asserted that A.R. improperly threatened to place her on AWOL status during this period. However, she did not submit witness statements or other documentary evidence to

[14] *L.R.,* Docket No. 23-0925 (issued June 20, 2024); *M.A.,* Docket No. 19-1017 (issued December 4, 2019).

[15] *See E.G.,* Docket No. 20-1029 (issued March 18, 2022); *S.L.,* Docket No. 19-0387 (issued October 1, 2019); *S.B.,* Docket No. 18-1113 (issued February 21, 2019).

[16] *Id.*

[17] *See supra* note 12.

[18] *T.C.,* Docket No. 16-0755 (issued December 13, 2016).

corroborate that the alleged harassment occurred as alleged.[19] Therefore, appellant has not established a compensable employment factor in this regard.

In the present case, appellant has established compensable factor of employment with regard to overwork. To establish her occupational disease claim for an emotional/stress-related condition, appellant must also submit rationalized medical evidence establishing such condition and that such condition is causally related to an accepted compensable employment factor.[20]

As OWCP found there were no compensable employment factors, the case must be remanded for an evaluation of the medical evidence with regard to the issue of causal relationship.[21] Following this and other such further development as deemed necessary, OWCP shall issue a *de novo* decision.

CONCLUSION

The Board finds that this case is not in posture for decision.

[19] *See B.S.,* Docket No. 19-0378 (issued July 10, 2018).

[20] *See supra* note 11.

[21] *See M.D.,* Docket No. 15-1796 (issued September 7, 2016).

ORDER

IT IS HEREBY ORDERED THAT the May 14, 2025 decision of the Office of Workers' Compensation Programs is set aside, and the case is remanded for further proceedings consistent with this decision of the Board.

Issued: January 30, 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