United States Department of Labor
Employees' Compensation Appeals Board

B.M., Appellant	)	
and	)	**Docket No. 25-0876**
	)	**Issued: January 15, 2026**
DEPARTMENT OF VETERANS AFFAIRS, LOUIS STOKES CLEVELAND VA MEDICAL CENTER, Cleveland, OH, Employer	)	

Appearances:
Alan J. Shapiro, Esq., for the appellant[1]
Office of Solicitor, for the Director

Case Submitted on the Record

DECISION AND ORDER

Before:
PATRICIA H. FITZGERALD, Deputy Chief Judge
JANICE B. ASKIN, Judge
VALERIE D. EVANS-HARRELL, Alternate Judge

JURISDICTION

On September 11, 2025 appellant, through counsel, filed a timely appeal from an August 22, 2025 merit decision of the Office of Workers' Compensation Programs (OWCP). Pursuant to the Federal Employees' 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.

[1] In all cases in which a representative has been authorized in a matter before the Board, no claim for a fee for legal or other service performed on appeal before the Board is valid unless approved by the Board. 20 C.F.R. § 501.9(e). No contract for a stipulated fee or on a contingent fee basis will be approved by the Board. *Id.* An attorney or representative's collection of a fee without the Board's approval may constitute a misdemeanor, subject to fine or imprisonment for up to one year or both. *Id.*; *see also* 18 U.S.C. § 292. Demands for payment of fees to a representative, prior to approval by the Board, may be reported to appropriate authorities for investigation.

[2] 5 U.S.C. § 8101 *et seq*.

ISSUE

The issue is whether appellant has met her burden of proof to establish a diagnosed medical condition in connection with the accepted July 25, 2023 employment-related chemical exposure.

FACTUAL HISTORY

On August 4, 2023 appellant, then a 65-year-old medical instrument technician (hemodialysis), filed a traumatic injury claim (Form CA-1) alleging that on July 25, 2023 she experienced neck pain radiating to the lower back after she passed out, fell, and struck her head on the floor while in the performance of duty. She further explained that the incident occurred after supervisor L.L. and coworker L.H. exposed her to Minncare, a chemical to which she was allergic, during retraining in the hemodialysis water room while in the performance of duty. Appellant stopped work on July 25, 2023.

OWCP received a July 25, 2023 statement wherein L.H. recounted that at 6:10 a.m. that day, she requested that appellant confirm her availability to perform the dialysate acid competency recertification. At 11:50 a.m., appellant went into the hemodialysis water room with L.H. "and got the water started" after which they allowed 20 to 30 minutes for the tank to fill. At approximately 12:40 p.m., she joined L.H. in the water room to prepare the acid. L.H. asserted that as they were about to start preparing the acid, appellant "stepped back and fell down" but did not hit her head. L.H. called for manager L.L. to come into the water room. Two coworkers dragged appellant into the hallway and administered oxygen. Coworker V.H. obtained a blood glucose reading. Emergency services workers arrived and inquired as to whether appellant had been exposed to any chemicals. L.H. advised them that no Citrapure acid concentrate or other chemicals were open, but recalled that earlier that day, appellant appeared unwell and stated that she "felt a little dizzy."

In an August 8, 2023 statement, L.L. asserted that at the time of the July 25, 2023 employment incident, appellant had donned personal protective equipment (PPE) in preparation for dialysate acid mixing competency verification. She contended that appellant fell prior to opening any product, landed on her buttocks, and did not strike her head.

In an August 8, 2023 report, Dr. Catherine Watkins Campbell, Board-certified in family medicine and occupational medicine, noted that appellant had a history of hypertension and diabetes mellitus type 2. She related appellant's account of the July 25, 2023 occupational exposure, fall, and emergency room treatment including a computer-assisted tomography (CAT) scan of the head and cervical spine which indicated a suspicion of a Chiari malformation. While being transported home, appellant began to feel worse, returned to the hospital, was administered two bags of saline and pain medication, then released. Dr. Watkins Campbell indicated that July 26, 2023 hospital records noted a July 25, 2023 occupational exposure to formaldehyde. She diagnosed sprain of cervical spine, strain of cervical spine, and contusion of the head "[a]s a direct result of the injury as described[.]"

In an attending physician's report (Form CA-20) dated August 8, 2023, Dr. Watkins Campbell provided a history of injury of "[r]espiratory reaction to formaldehyde," with a history of previous similar reactions to formaldehyde. She diagnosed contact hazardous chemical, cough, syncope, and head contusion. Dr. Watkins Campbell indicated that the July 25, 2023 employment

incident caused post-traumatic headache, bilateral trapezius sprain, and contusion of the low back/pelvis.

In an October 13, 2023 development letter, OWCP informed appellant of the deficiencies of her claim and advised her of the type of factual and medical evidence needed. It afforded her 60 days to respond. No additional evidence was received.

In a follow-up letter dated October 30, 2023, 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 October 13, 2023 letter to submit the necessary evidence. OWCP 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.

Thereafter, OWCP received a June 25, 2023 hospital emergency department report, wherein Dr. Pauline Wiltz, an osteopath, related appellant's account of exposure to formaldehyde fumes while at work, causing her to feel lightheaded, lose consciousness, fall, and strike her head. Appellant also described difficulty breathing, a sensation of her throat closing, sore throat, voice changes, and difficulty swallowing. Dr. Wiltz noted that appellant had a history of chemical allergy, hypertension, diabetes, coronary artery disease, and a prior myocardial infarction presenting with syncope. On examination, she observed voice changes with some stridor on auscultation. A nasopharyngoscopy revealed no vocal cord edema, and a clear airway without edema or erythema of the nasal oropharynx.

By decision dated December 18, 2023, OWCP denied appellant's traumatic injury claim, finding that the evidence of record was insufficient to establish the identified employment exposure. It concluded, therefore, that she had not met the requirements to establish that she sustained an injury as defined by FECA.

On December 27, 2023 appellant, through counsel, requested an oral hearing before a representative of OWCP's Branch of Hearings and Review.

Thereafter, OWCP received a July 25, 2023 incident report from coworker T.G., a registered nurse, wherein he recalled that at approximately 12:40 p.m. that day, appellant experienced a medical episode while in the hemodialysis water room. Appellant was on the floor, wearing a surgical mask and splash protection. Coworkers L.B. and S.G. dragged appellant from the room in distress, with complaints of chest pain, shortness of breath, and headache. The door to the water room was shut to limit further exposure. T.G. assisted with administering oxygen to appellant, with initial 90 percent saturation, which increased to 98 percent by the time emergency personnel arrived. He noted that appellant was "a known diabetic with extensive cardiac history." T.G. left to make copies of material safety data sheet (MSDS) for Minncare for the paramedics but was later advised by a manager that "the chemical was not being used at this time. However, the chemical is in a cabinet in each RO [reverse osmosis] system with a lo[o]se cap on that does not create a vapor seal." T.G. asserted that appellant had prior reactions to Minncare. As a charge nurse, he had reviewed her medical documentation restricting her from working in an area with Minncare present as her assignment needed to be changed.

In an October 28, 2023 statement, J.S., one of appellant's coworkers, recounted that the hemodialysis water purification system underwent a weekly sterilization process with heat and

Minncare. Although Minncare containers were capped, there were fumes in the water room, particularly when the doors of the reverse osmosis devices were open. As Minncare fumes were caustic, employees were required to wear a mask, gown, and gloves while working with the reverse osmosis machines. The smell became troublesome such that manager Y.G. "posted signs to keep water room doors closed at all times" and requested that engineers make the water room a negative pressure room, but the attempt failed. Appellant had a sensitivity to Minncare, with episodes of facial flushing and irritated mucosal membranes. Management initially prohibited appellant from working in the water room but recently reassigned her to areas near the water room.

During the hearing, held on March 7, 2024, appellant asserted that the employing establishment had been aware of her formaldehyde allergy such that she had not been assigned to the water room for eight years prior to the July 25, 2023 incident. L.B. required her to retrain as she had not performed the acid making process for an extended period. Appellant asserted that fumes from Minncare were also present in the area outside the water room. She acknowledged her history of diabetes mellitus but asserted that she did not have any fainting incidents prior to the July 25, 2023 event.

Thereafter, OWCP received a notification of personnel action (Standard Form (SF) 50) indicating that appellant voluntarily retired from federal employment effective December 31, 2023.

By decision dated May 16, 2024, the OWCP hearing representative set aside OWCP's October 18, 2023 decision and remanded the case to obtain additional information from the employing establishment regarding the presence and use of Minncare in the hemodialysis water room on July 25, 2023, and whether appellant was not required to work in the water room or in this area for several years prior to July 25, 2023, to be followed by issuance of a *de novo* decision.

In a development letter dated June 26, 2024, OWCP requested that the employing establishment explain whether appellant had been required to work in the water room on July 25, 2023, whether Minncare had been used in the water room on July 25, 2023, and whether appellant had been restricted from working in the water room for any period. It also requested that the employing establishment review the statements of J.S. and T.G. and indicate points of agreement and disagreement. OWCP afforded the employing establishment 30 days to respond.

In response, OWCP received a February 19, 2018 MSDS for Minncare Cold Sterilant, composed of hydrogen peroxide, acetic acid, peroxyacetic acid, and a proprietary stabilizer. Storage recommendations included using only the original, tightly closed container. Minncare was described as a respiratory irritant that could cause drowsiness or dizziness.

OWCP also received chemical vapor surveys of the hemodialysis water room and adjacent hallway for hydrogen peroxide and acetic acid, which were below the Occupational Safety and Health Administration (OSHA) regulatory permissible exposure limit for short term exposure.

In a July 11, 2024 statement, the employing establishment asserted that appellant had failed to inform her new supervisor of any allergies, and that she did not provide medical evidence of a formaldehyde allergy.

In a July 11, 2024 statement, M.B., appellant's supervisor, explained that employees who worked with Minncare were required to wear protective equipment. Environmental testing

revealed very low levels of exposure in the water room and adjacent hallway "when the reverse osmosis door is open for disinfection." M.B. asserted that while a roof exhaust system had required repair, there had not been an attempt to create a negative pressure environment in the water room. M.B. asserted that during the July 25, 2023 dialysate mixing recertification, the Minncare remained in capped bottles without a vacuum seal, stored in a closed cabinet. M.B. contended that Minncare did not require a vapor seal. Appellant had filed two requests for reasonable accommodation, the first involving formaldehyde, and the second "identifying the correct chemical," but appellant did not provide the required medical documentation. She did not work in the water room while the reasonable accommodation request was under development.

By *de novo* decision dated November 6, 2024, OWCP found that the July 25, 2023 employment incident occurred as alleged as Minncare had been present in the hemodialysis water room, but denied appellant's claim as the medical evidence was insufficient to establish that the accepted exposure to Minncare caused the diagnosed conditions of contusion or cervical strain.

On November 14, 2024 appellant, through counsel, requested an oral hearing before a representative of OWCP's Branch of Hearings and Review.

Following a preliminary review, by decision dated December 31, 2024, OWCP's hearing representative set aside the November 6, 2024 decision, and remanded the case for further development, to be followed by a *de novo* decision. The hearing representative directed that OWCP obtain clarification from the employing establishment as to whether formaldehyde was also present in the hemodialysis water room on July 25, 2023, the period during which the ventilation system was broken, whether appellant had been present in the water room prior to July 25, 2023, and whether the vapor readings were meant to address the presence of Minncare fumes. The hearing representative further directed that OWCP obtain clarification from appellant as to the substances to which she claimed exposure on July 25, 2023. The hearing representative noted reminders to OWCP that concentrations of chemicals did not have to exceed the OSHA standard to be compensable, an approved reasonable accommodation request and medical evidence supporting an allergy/sensitivity to certain chemicals was not required to establish exposure, and appellant was not claiming that she came into direct physical contact with Minncare or formaldehyde, but rather that there were fumes from the chemical used to clean the water system in the water room.

In a January 10, 2025 development letter, OWCP requested that the employing establishment provide additional evidence regarding whether appellant had been present in the water room prior to July 25, 2023, whether Minncare was used to clean equipment in the water room prior to appellant's arrival on July 25, 2023, and whether the exhaust system was operational in the water room on July 25, 2023.

In a separate development letter also dated January 10, 2025, OWCP requested that appellant clarify whether she claimed exposure to formaldehyde or Minncare on July 25, 2023, and the manner of exposure. It did not receive a response.

In a January 14, 2025 statement, M.B. asserted that Minncare was run through reverse osmosis equipment in the hemodialysis water room on a four-hour cycle each Monday evening after patient care was completed. On Tuesday morning, an employee returned a valve to a neutral position. The valve was switched off at 5:00 a.m. on Tuesday, July 25, 2023 by another technician.

M.B. asserted that the exhaust system was functioning on July 25, 2023 and that the room was set to negative pressure.

By *de novo* decision dated March 7, 2025, OWCP denied appellant's claim, finding that the evidence of record was insufficient to establish occupational exposure to either formaldehyde or Minncare on July 25, 2023. It further found that the hospital emergency department reports and the reports of Dr. Watkins Campbell were insufficient to establish causal relationship as they referred to formaldehyde exposure which was not supported by the factual record.

On March 13, 2025 appellant, through counsel, requested an oral hearing before a representative of OWCP's Branch of Hearings and Review. Appellant subsequently changed her hearing request to a request for a review of the written record.

By decision dated August 22, 2025, OWCP's hearing representative modified the March 7, 2025 decision to find that evidence of record was sufficient to establish exposure to chemicals, as alleged. However, the claim remained denied as the evidence of record was insufficient to establish a diagnosed medical condition in connection with the accepted employment exposure.

LEGAL PRECEDENT

An employee seeking benefits under FECA[3] has the burden of proof to establish the essential elements of his or her claim, including that the individual is an employee of the United States within the meaning of FECA, that the claim was timely filed within the applicable time limitation of FECA,[4] 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.[5] These are the essential elements of each and every compensation claim, regardless of whether the claim is predicated upon a traumatic injury or an occupational disease.[6]

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. The first component is that 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. The second component is whether the employment incident caused an injury.[7]

[3] *Id*.

[4] *F.H.,* Docket No. 18-0869 (issued January 29, 2020); *J.P.,* Docket No. 19-0129 (issued April 26, 2019); *Joe D. Cameron,* 41 ECAB 153 (1989).

[5] *L.C.,* Docket No. 19-1301 (issued January 29, 2020); *J.H.,* Docket No. 18-1637 (issued January 29, 2020); *James E. Chadden, Sr.,* 40 ECAB 312 (1988).

[6] *P.A.,* Docket No. 18-0559 (issued January 29, 2020); *K.M.,* Docket No. 15-1660 (issued September 16, 2016); *Delores C. Ellyett,* 41 ECAB 992 (1990).

[7] *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).

The medical evidence required to establish causal relationship between a claimed specific condition and an employment incident is rationalized medical opinion evidence.[8] 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 specific employment incident identified by the employee.[9]

ANALYSIS

The Board finds that appellant has met her burden of proof to establish a diagnosed medical condition in connection with the accepted July 25, 2023 employment-related chemical exposure.

In an August 8, 2023 report, Dr. Watkins Campbell diagnosed sprain of cervical spine, strain of cervical spine, and contusion of the head as a direct result of the accepted incident. In a Form CA-20 of even date, Dr. Watkins Campbell indicated that the July 25, 2023 employment incident caused post-traumatic headache, bilateral trapezius sprain, and contusion of the low back/pelvis.

As the medical evidence of record establishes diagnosed medical conditions, the case must be remanded for consideration of the medical evidence regarding the issue of causal relationship.[10] Following this and other such further development as deemed necessary, OWCP shall issue a *de novo* decision.

CONCLUSION

The Board finds that appellant has met her burden of proof to establish a medical diagnosis in connection with the accepted July 25, 2023 employment-related chemical exposure.

[8] *S.M.,* Docket No. 22-0075 (issued May 6, 2022); *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).

[9] *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).

[10] *M.E*, Docket No. 25-0724 (issued August 26, 2025).

ORDER

IT IS HEREBY ORDERED THAT the August 22, 2025 decision of the Office of Workers' Compensation Program is reversed, and the case is remanded for further proceedings consistent with this decision of the Board.

Issued: January 15, 2026
Washington, DC

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

Janice B. Askin, Judge
Employees' Compensation Appeals Board

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