

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

M.M., Appellant)
and) Docket No. 26-0016
DEPARTMENT OF HOMELAND SECURITY,) Issued: January 21, 2026
U.S. IMMIGRATION AND CUSTOMS)
ENFORCEMENT, Philadelphia, PA, Employer)

)

Appearances:
Appellant, pro se
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 October 8, 2025, appellant filed a timely appeal from a September 9, 2025 merit decision of the Office of Workers' Compensation Programs (OWCP). Pursuant to the Federal Employees' Compensation Act¹ (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 nonaneurysmal subarachnoid hemorrhage (SAH) causally related to the accepted May 25, 2025 employment incident.

¹ 5 U.S.C. § 8101 *et seq.*

FACTUAL HISTORY

On June 28, 2025 appellant, then a 54-year-old general inspection, investigation, and compliance officer, filed a traumatic injury claim (Form CA-1) alleging that on May 25, 2025 he experienced a SAH due to sustained elevated blood pressure approximately 15 minutes prior to the end of a scheduled administratively uncontrollable overtime (AUO)/mandatory overtime shift while in the performance of duty. He attributed his condition to cumulative occupational stress, physical demands, and irregular hours inherent to his position as a law enforcement officer. Appellant stopped work on May 25, 2025.

In an accompanying narrative statement, appellant asserted that on May 25, 2025 he felt an intense heat spike rising from the base of his neck over his scalp, and toward his eyes. He initially believed that this was a migraine, but the symptoms progressed to include dizziness, nausea, visual changes, and severe headache requiring emergency transport from his home. Appellant related that he had worked 70 hours over the seven days prior to May 25, 2025 including extended shifts and voluntary overtime. He attributed his SAH to a combination of physical strain, mental fatigue, and preexisting service-connected hypertension.

In a June 12, 2025 report, Dr. Zakaria Hakma, a neurosurgeon, diagnosed a perimesencephalic angio negative SAH and related that appellant had a history of preexisting hypertension and that “his job can be stressful at times with the need for sudden strenuous physical activity.”

On June 30, 2025 the employing establishment controverted the claim asserting that it should be developed as an occupational disease.

Appellant completed a July 1, 2025 statement and asserted that his claim was for a traumatic injury as the SAH occurred suddenly within a single overtime shift while he was in the performance of duty. He asserted that the SAH was precipitated by duty-related exertion and vascular demand. In a separate statement of even date, appellant described repeated physical on-duty trauma to his head and neck including an August 23, 2016 employment-related motor vehicle accident which resulted in a concussion and injuries to his neck and back. He asserted that his current disability was the culmination of a series of traumatic, physical events, rather than an occupational disease.

In a July 9, 2025 development letter, OWCP informed appellant of the deficiencies of his claim. It advised him of the type of additional factual and medical evidence required and provided a questionnaire for his completion. OWCP afforded appellant 60 days to submit the necessary evidence.

In a July 10, 2025 statement appellant asserted that his injury was precipitated by duty-related physiological stress, aggravated by service-connected hypertension, and accelerated in clinical manifestation due to his workload. He related that on May 25, 2025 he was working over 16 hours on a regularly scheduled day off, and that the event occurred after working 70 hours during the preceding week including back-to-back shifts and weekend duty without adequate rest. Appellant alleged that his elevated blood pressure was aggravated by physical/mental stress due to the unprecedented increase in his work schedule.

Appellant also provided medical records from his hospitalization. Dr. Hakma performed a diagnostic cerebral angiogram on May 26, 2025 which demonstrated an angio negative SAH, no aneurysms, no vessel malformation, or dural fistula. On May 26, 2025 Dr. Hana Park, an osteopath, provided a history of injury and noted that appellant's medical history was significant for hypertension.

In an August 13, 2025 follow-up letter, OWCP advised appellant that it had conducted an interim review and found that the evidence remained insufficient to establish his claim. It noted that he had 60 days from the July 9, 2025 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. In a development letter of even date, it requested that the employing establishment provide additional information regarding appellant's claim, including comments from a knowledgeable supervisor. OWCP afforded the employing establishment 30 days to provide the requested information. No response from the employing establishment was received.

On September 1, 2025 appellant responded to the development questionnaire and asserted that his SAH arose due to uncontrolled hypertension in the setting of occupational stress and mandatory overtime. He asserted that he was required to perform excessive overtime during the period January 12 through May 31, 2025 prior to his injury and provided his earnings and leave statements.

By decision dated September 9, 2025, OWCP denied appellant's claim, finding that the evidence of record was insufficient to establish causal relationship between his diagnosed SAH and the accepted May 25, 2025 employment incident.

LEGAL PRECEDENT

An employee seeking benefits under FECA 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,² that the claim was timely filed within the applicable time limitation period of FECA, 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.³ 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.⁴

To establish a claim for an emotional condition in the performance of duty, an employee must submit: (1) factual evidence identifying employment factors or incidents alleged to have

² *K.R.*, Docket No. 20-0995 (issued January 29, 2021); *A.W.*, Docket No. 19-0327 (issued July 19, 2019); *S.B.*, Docket No. 17-1779 (issued February 7, 2018); *J.P.*, 59 ECAB 178 (2007); *Joe D. Cameron*, 41 ECAB 153 (1989).

³ *J.M.*, Docket No. 17-0284 (issued February 7, 2018); *R.C.*, 59 ECAB 427 (2008); *James E. Chadden, Sr.*, 40 ECAB 312 (1988).

⁴ *J.B.*, Docket No. 20-1566 (issued August 31, 2021); *K.M.*, Docket No. 15-1660 (issued September 16, 2016); *L.M.*, Docket No. 13-1402 (issued February 7, 2014); *Delores C. Ellyett*, 41 ECAB 992 (1990).

caused or contributed to his or her condition; (2) medical evidence establishing that he or she has an emotional or psychiatric disorder; and (3) rationalized medical opinion evidence establishing that the identified compensable employment factors are causally related to his or her emotional condition.⁵

Workers' compensation law does not apply to each and every injury or illness that is somehow related to an employee's employment. In the case of *Lillian Cutler*,⁶ the Board explained that there are distinctions as to the type of employment situations giving rise to a compensable emotional condition arising under FECA. There are situations where an injury or illness has some connection with the employment but nevertheless does not come within coverage of FECA.⁷ When disability results from an emotional reaction to regular or specially assigned work duties, or to a requirement imposed by the employing establishment, the disability is deemed compensable.⁸

ANALYSIS

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

In denying appellant's traumatic injury claim, OWCP found that he had not established causal relationship between his diagnosed condition and the accepted employment incident of May 25, 2025. The Board, however, finds that appellant is alleging an emotional/stress-related condition. Appellant has asserted that he was overworked, and that he experienced duty-related physiological stress, physical demands, and irregular hours inherent to his position as a law enforcement officer.

OWCP has not adequately developed appellant's emotional/stress-related condition claim. It did not provide appellant with a development letter identifying and requesting the information needed to adjudicate his emotional/stress-related condition claim in accordance with its procedures.⁹ Additionally, a statement from the employing establishment is necessary to properly develop and adjudicate an emotional/stress-related condition claim.¹⁰

Proceedings under FECA are not adversarial in nature, nor is OWCP a disinterested arbiter.¹¹ While the claimant has the burden of proof to establish entitlement to compensation,

⁵ *S.D.*, Docket No. 23-0898 (issued July 13, 2023); *R.B.*, Docket No. 19-0343 (issued February 14, 2020).

⁶ 28 ECAB 125 (1976).

⁷ See *L.Y.*, Docket No. 21-0344 (issued June 15, 2023); *M.R.*, Docket No. 18-0305 (issued October 18, 2018); *Robert W. Johns*, 51 ECAB 136 (1999).

⁸ *A.C.*, Docket No. 18-0507 (issued November 26, 2018); *Pamela D. Casey*, 57 ECAB 260, 263 (2005); *Lillian Cutler*, *supra* note 6.

⁹ *K.L.*, Docket No. 24-0871 (issued December 2, 2024); *D.F.*, Docket No. 24-0178 (issued April 5, 2024); *O.G.*, Docket No. 18-0359 (issued August 7, 2019).

¹⁰ Federal(FECA) Procedure Manual, Part 2 -- Claims, *Initial Development of Claims*, Chapter 2.800.7a(2) (June 2011).

¹¹ See *L.S.*, Docket No. 18-1208 (issued April 30, 2020); *Phillip L. Barnes*, 55 ECAB 426 (2004).

OWCP shares responsibility in the development of the evidence, particularly when such evidence is of the character normally obtained from the employing establishment or other governmental source.¹²

On remand OWCP shall develop appellant's emotional/stress-related condition claim, pursuant to its procedures, to determine whether the implicated employment factors are compensable, to be followed by a *de novo* decision.

CONCLUSION

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

ORDER

IT IS HEREBY ORDERED THAT the September 9, 2025 decision of the Office of Workers' Compensation Programs is set aside, and the case is remanded to OWCP for further proceedings consistent with this decision of the Board.

Issued: January 21, 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

¹² A.F., Docket No. 20-1635 (issued June 9, 2022); N.S., 59 ECAB 422 (2008).