United States Department of Labor
Employees' Compensation Appeals Board

T.M., Appellant	)	
	)	**Docket No. 26-0397**
and	)	**Issued: July 8, 2026**
U.S. POSTAL SERVICE, LAKEDALE POST OFFICE, Fayetteville, NC, 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:
ALEC J. KOROMILAS, Chief Judge
JANICE B. ASKIN, Judge
VALERIE D. EVANS-HARRELL, Alternate Judge

JURISDICTION

On March 23, 2026 appellant, through counsel, filed a timely appeal from a March 9, 2026 merit decision of the Office of Workers' Compensation Programs (OWCP).[2] Pursuant to

[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] The Board notes that during the pendency of this appeal, OWCP issued a *de novo* decision dated March 26, 2026, denying appellant's claim finding that the medical evidence of record was insufficient to establish causal relationship between appellant's diagnosed condition(s) and the accepted March 11, 2025 employment incident. This decision is null and void as the Board and OWCP may not simultaneously exercise jurisdiction over the same underlying issue in a case on appeal. 20 C.F.R. §§ 501.2(c)(3), 10.626; *see e.g., M.C.*, Docket No. 18-1278 (issued March 7, 2019); *Lawrence Sherman*, 55 ECAB 359, 360 n.4 (2004); *Douglas E. Billings*, 41 ECAB 880 (1990).

the Federal Employees' Compensation Act[3] (FECA) and 20 C.F.R. §§ 501.2(c) and 501.3, the Board has jurisdiction over the merits of this case.[4]

ISSUE

The issue is whether appellant has met her burden of proof to establish a medical condition causally related to the accepted March 11, 2025 employment incident.

FACTUAL HISTORY

On April 8, 2025 appellant, then a 50-year-old rural carrier, filed a traumatic injury claim (Form CA-1) alleging that on March 11, 2025 she injured her right knee while in the performance of duty. She explained that while walking down a concrete driveway her right knee buckled and dislocated. On the reverse side of the claim form, T.H., appellant's supervisor, checked a box marked "No" indicating that she was not injured in the performance of duty. He contended that appellant had prescheduled leave for surgery from March 17 through June 17, 2025, and a paid leave balance available through April 15, 2025. Appellant stopped work on March 17 2025.[5]

On January 16 and March 13, 2025 Dr. Deren T. Bagsby, a Board-certified orthopedic surgeon, related appellant's history of no acute falls, injuries, or other events and diagnosed severe right knee arthritis. He found that her pain had been progressive in nature and was worsened by prolonged standing, walking, or squatting. Dr. Bagsby recommended a total knee arthroplasty (TKA). Appellant also sought treatment with Carrie M. Clough, a family nurse practitioner, on March 13, 2025.

In an April 10, 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 separate development letter of even date, it requested that the employing establishment provide additional information regarding its disagreement with appellant's claim. OWCP afforded 30 days for a response.

[3] 5 U.S.C. § 8101 *et seq*.

[4] The Board notes that, following the March 9, 2026 decision, appellant submitted additional evidence to OWCP. However, the Board's *Rules of Procedure* 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*.

[5] OWCP assigned the present claim OWCP File No. xxxxxx765. Appellant previously filed a Form CA-1 for an April 21, 2022 injury, which OWCP accepted for aggravation of cervical disc displacement (resolved), aggravation of lumbar disc displacement (resolved), aggravation of right knee unilateral primary osteoarthritis (resolved), and contusion of the right knee (resolved) in OWCP File No. xxxxxx518. OWCP has administratively combined OWCP File No. xxxxxx518 and xxxxxx765, with the latter serving as the master file.

OWCP subsequently received notes from Ms. Clough dated August 29, 2024 and February 27, 2025. On November 18, 2024 and April 2, 2025 appellant underwent right knee x-rays.

On April 14, 2025 appellant completed OWCP's development questionnaire. She asserted that her injury on March 11, 2025 was the result of the events described but that she had previously sustained work-related injuries to her right knee. Appellant described "wiggling her right knee" back into place after it was slightly dislocated on March 11, 2025 as she had no cartilage in that knee.

In a follow-up letter dated May 5, 2025, OWCP advised appellant that it had conducted an interim review, and the evidence submitted remained insufficient to establish her claim. It noted that she had 60 days from the April 10, 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.

On April 2, 2025 Dr. Bagsby examined appellant following her March 2025 TKA. He completed an April 15, 2025 attending physician's report (Form CA-20) relating that on March 11, 2025 appellant sustained a work injury when her right knee buckled. Dr. Bagsby diagnosed osteoarthritis of the right knee and opined that this condition was aggravated by her employment activities. He found that appellant was partially disabled from March 17 through June 17, 2025.

In May 6 and 9, 2025 statements, appellant asserted that she had promptly reported her injury to the employing establishment but initially indicated that she would not file an OWCP claim. She also confirmed the facts as presented on her Form CA-1.

On May 29, 2025 Dr. Bagsby diagnosed right TKA and arthrofibrosis. On June 11, 2025 he found that appellant was totally disabled through July 26, 2025. In a treatment note of even date, Dr. Bagsby diagnosed TKA status post manipulation under anesthesia. On July 25, 2025 he released appellant to return to full-duty work. She returned to work on that date.

By decision dated August 4, 2025, OWCP found that the alleged incident occurred as described; however, it denied the claim, finding that the medical evidence of record was insufficient to establish a diagnosed medical condition in connection with the accepted employment incident. It concluded, therefore, that the requirements had not been met to establish an injury as defined by FECA.

On August 13, 2025 appellant, through counsel, requested an oral hearing before a representative of OWCP's Branch of Hearings and Review. The oral hearing took place on February 5, 2026. Appellant resubmitted Dr. Bagsby's March 13, 2025 treatment note.

OWCP also received right knee x-rays dated May 29, 2025.

By decision dated March 9, 2026, OWCP's hearing representative modified the August 4, 2025 decision to find that the medical evidence contained medical diagnoses, by Dr. Bagsby, in connection with the accepted March 11, 2025 employment incident. However, the claim remained denied as appellant had not submitted medical evidence establishing causal

relationship between the claimed medical conditions and the accepted March 11, 2025 employment incident.

LEGAL PRECEDENT

An employee seeking benefits under FECA[6] 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 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.[7] 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.[8]

To determine if an employee has sustained a traumatic injury in the performance of duty, OWCP begins with an analysis of whether fact of injury has been established. Fact of injury consists of two components that must be considered in conjunction with one another. The first component is whether the employee actually experienced the employment incident that allegedly occurred at the time and place, and in the manner alleged.[9] The second component is whether the employment incident caused an injury.[10]

Causal relationship is a medical question that requires rationalized medical opinion evidence to resolve the issue. The opinion of the physician must be based on a complete factual and medical background, 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.[11] Neither the mere fact that a disease or condition manifests itself during a period of employment, nor the belief that the disease or condition was caused or aggravated by employment factors or incidents is sufficient to establish causal relationship.[12]

ANALYSIS

The Board finds that appellant has not met her burden of proof to establish a medical condition causally related to the accepted March 11, 2025 employment incident.

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[6] *Supra* note 3.

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

[8] *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).

[9] *B.P.*, Docket No. 16-1549 (issued January 18, 2017); *Elaine Pendleton*, 40 ECAB 1143 (1989).

[10] *M.H.*, Docket No. 18-1737 (issued March 13, 2019); *John J. Carlone*, 41 ECAB 354 (1989).

[11] *S.S.*, Docket No. 18-1488 (issued March 11, 2019).

[12] *J.L.*, Docket No. 18-1804 (issued April 12, 2019).

Dr. Bagsby completed an April 15, 2025 Form CA-20 relating that on March 11, 2025 appellant sustained a work injury when her right knee buckled. He diagnosed osteoarthritis of the right knee and opined that this condition was aggravated by her employment activities. The Board finds, however, that Dr. Bagsby's April 15, 2025 report does not contain sufficient medical rationale in support of his opinion that appellant's diagnosed condition was aggravated by the accepted March 11, 2025 employment incident. He did not explain how the March 11, 2025 employment incident was competent to have aggravated the diagnosed condition. The Board has held that a report is of limited probative value regarding causal relationship if it does not contain medical rationale explaining how an employment incident/activity could have caused or aggravated a medical condition.[13] Therefore, this evidence is insufficient to establish appellant's claim.

In a series of reports dated January 16 through June 11, 2025, Dr. Bagsby, related a history of no acute falls, injuries, or other events and diagnosed severe right knee arthritis. He found that appellant's pain had been progressive in nature and was worsened by prolonged standing, walking, or squatting. Dr. Bagsby performed a TKA and manipulation under anesthesia. None of these reports, however, contain an opinion that appellant sustained a medical condition causally related to the accepted March 11, 2025 employment incident. The Board has held that medical evidence that does not offer an opinion regarding the cause of an employee's condition or disability is of no probative value on the issue of causal relationship.[14] Therefore, this evidence is insufficient to establish appellant's claim.

Appellant submitted reports/notes by a family nurse practitioner. However, certain healthcare providers such as physician assistants, nurses, and physical and occupational therapists are not considered physicians as defined under FECA.[15] Consequently, their medical findings and/or opinions will not suffice for purposes of establishing entitlement to FECA benefits.[16] Therefore, this evidence is insufficient to establish appellant's claim.

Appellant also submitted several right knee x-rays. The Board has held, however, that diagnostic studies, standing alone, lack probative value on the issue of causal relationship, as

[13] *See B.M.,* Docket No. 26-0249 (issued May 26, 2026); *Y.D.*, Docket No. 16-1896 (issued February 10, 2017).

[14] *See F.S.*, Docket No. 23-0112 (issued April 26, 2023); *L.B.*, Docket No. 18-0533 (issued August 27, 2018); *D.K.*, Docket No. 17-1549 (issued July 6, 2018).

[15] Section 8101(2) provides that 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. § 8101(2); 20 C.F.R. § 10.5(t). *See* 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 also N.Y.*, Docket No. 25-0310 (issued March 20, 2025) (nurse practitioners are not considered physicians under FECA).

[16] *See id.*

they do not address whether the accepted employment incident caused or contributed to the diagnosed conditions.[17]

As the medical evidence of record is insufficient to establish causal relationship between a medical condition and the accepted March 11, 2025 employment incident, the Board finds that she 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 medical condition causally related to the accepted March 11, 2025 employment incident.

ORDER

IT IS HEREBY ORDERED THAT the March 9, 2026 decision of the Office of Workers' Compensation Programs is affirmed.

Issued: July 8, 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

[17] *A.J.*, Docket No. 25-0250 (issued May 27, 2025); *T.Y.*, Docket No. 25-0255 (issued April 2, 2025); *B.O.*, Docket No. 25-0049 (issued January 10, 2025); *A.D.*, Docket No. 24-0770 (issued October 22, 2024); *T.L.*, Docket No. 22-0881 (issued July 17, 2024); *C.S.*, Docket No. 19-1279 (issued December 30, 2019).