United States Department of Labor
Employees' Compensation Appeals Board

H.M., Appellant	)	
and	)	**Docket No. 26-0426**
	)	**Issued: July 28, 2026**
U.S. POSTAL SERVICE, SANTA CLARITA POST OFFICE, Santa Clarita, CA, Employer	)	

Appearances:
Brett E. Blumstein, 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
PATRICIA H. FITZGERALD, Deputy Chief Judge
JANICE B. ASKIN, Judge

JURISDICTION

On April 7, 2026 appellant, through counsel, filed a timely appeal from a February 18, 2026 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.

ISSUE

The issue is whether appellant has met his burden of proof to establish disability from work for the periods May 29 through 31 and June 7 through October 28, 2021, causally related to his accepted February 10, 2021 employment injury.

[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*.

FACTUAL HISTORY

On February 12, 2021 appellant, then a 42-year-old city carrier, filed a traumatic injury claim (Form CA-1) alleging that on February 10, 2021 he injured, his neck, shoulders, arms, head, groin, and left side of his ribcage when the vehicle he was operating was struck by another vehicle while in the performance of duty. He stopped work on the date of injury.[3] By decision dated June 9, 2021, OWCP accepted the claim for chondromalacia of the right hip and strains of the front wall of thorax, right thigh, neck, and right hip.[4] It noted that it had not accepted additional conditions of possible labral tear, headache, and bilateral arm paresthesia as causally related to, or consequential to, the accepted February 10, 2021 employment injury.

On July 9 and August 27, 2021 appellant filed claims for compensation (Form CA-7) for disability from work during the periods May 29 through 31 and commencing June 7, 2021.

In development letters dated July 13 and August 31, 2021, OWCP informed appellant of the deficiencies of his claims for wage-loss compensation. It advised him of the type of factual and medical evidence needed to establish his claims and afforded him 30 days to respond.

In a May 20, 2021 narrative report, Dr. Philip H. Conwisar, a Board-certified orthopedic surgeon, noted that appellant related complaints of constant right hip pain and loss of mobility, which he attributed to the February 10, 2021 employment injury. He noted that he performed a physical examination of the hips and observed negative Trendelenburg test bilaterally, no tenderness over the right or left trochanters, full range of motion (ROM) of the left hip, and slightly restriction ROM of the right hip with pain. Dr. Conwisar reviewed an x-ray of the right hip dated April 15, 2021, which revealed no abnormalities. He also reviewed a magnetic resonance imaging (MRI) scan of the right hip dated May 18, 2021, which demonstrated mild cartilage thinning/chondromalacia of the lateral aspect of the acetabulum and mild blunting of the labrum, laterally. Dr. Conwisar diagnosed right hip sprain, chondromalacia of the right hip acetabulum, and possible labral tear of the right hip.

Dr. Conwisar subsequently completed work status notes on August 12, 2021, in which he indicated that appellant was totally disabled from work for the period May 20, through October 1, 2021.

In a follow-up medical report dated October 28, 2021, Dr. Conwisar noted that appellant related complaints of occasional neck and left-sided rib pain and frequent right hip pain. He also noted that he had a history of a hernia in 2016. Dr. Conwisar documented physical examination findings and diagnosed right hip sprain, possible labral tear right hip, and cervicothoracic spine myoligamentous sprain/strain. He released appellant to return to work with restrictions of no repetitive bending or stooping, and no lifting greater than 30 pounds.

[3] On February 23, 2021 appellant accepted an offer of a full-time position as a modified city carrier supervisor. He stopped work again that date.

[4] OWCP assigned the present claim OWCP File No. xxxxxx827. Appellant previously filed a Form CA-1 for a December 11, 2017 injury, which OWCP accepted for right thigh strain under OWCP File No. xxxxxx030. OWCP has not administratively combined OWCP File Nos. xxxxxx827 and xxxxxx030.

OWCP also received a work capacity evaluation (Form OWCP-5c), dated December 6, 2021, wherein Dr. Conwisar released appellant to medium-duty work, and a follow-up report dated January 18, 2022. Dr. Conwisar again provided restrictions.

By decision dated February 18, 2022, OWCP denied appellant's claims for disability from work during the periods May 29 through 31 and June 7 through October 28, 2021, causally related to the accepted February 10, 2021 employment injury.

Subsequently, OWCP received additional evidence, including follow-up reports by Dr. Conwisar dated March 11 through June 9, 2022 wherein he continued his restrictions.

On February 17, 2023 appellant, through counsel, requested reconsideration of OWCP's February 18, 2022 decision.

OWCP subsequently received follow-up reports by Dr. Conwisar dated December 1, 2022 through March 2, 2023 wherein he continued his restrictions.

By decision dated June 21, 2023, OWCP denied modification of the February 18, 2022 decision.

OWCP continued to receive evidence, including additional follow-up reports by Dr. Conwisar dated April 27, 2023 through March 25, 2024 wherein he continued his restrictions.

In a narrative report dated May 23, 2024, Dr. Glenna W. Tolbert, Board-certified in physiatry and spinal cord injury medicine, performed a physical examination and observed reproducible tenderness over the left side of his ribcage and no reproducible tenderness over the anterior-superior iliac spine or surrounding ligaments. She diagnosed right hip strain and chondromalacia and cervical and thoracic sprain/strain. Dr. Tolbert opined that the February 10, 2021 employment injury "significantly impaired [appellant's] ability to perform even light-duty tasks during the specified periods of disability." She further noted that his underlying hernia "may have compounded [his] difficulty in returning to work during the referenced periods." Dr. Tolbert indicated that her examination findings suggested that appellant's pain was more consistent with hernia pain than hip joint pain.

On June 13, 2024 appellant, through counsel, requested reconsideration of OWCP's June 21, 2023 decision.

OWCP referred appellant, along with the case record, a statement of accepted facts (SOAF), and a series of questions to Dr. Hrair E. Darakjian, a Board-certified orthopedic surgeon, for a second opinion evaluation regarding the nature of his condition, the extent of disability, and appropriate treatment recommendations.

In a report dated August 12, 2024, Dr. Darakjian reviewed the case record and SOAF and noted appellant's complaints of pain in the right groin. He related that the left side of his ribcage pain had subsided and that he had a history of hernia surgery. Dr. Darakjian performed a physical examination and observed pain in the anterior aspect of the right hip but an otherwise normal examination. He diagnosed left ribcage contusion, cervical and thoracic myofascial sprains, and a history of right hernia surgery. Dr. Darakjian requested an ultrasound of the right groin to evaluate whether appellant's right hip complaints were the result of an underlying hernia. He

opined that he was capable of performing the February 23, 2021 modified-duty city carrier supervisor position between May 29 and October 29, 2021.

On August 12, 2024 OWCP referred appellant for an ultrasound of the soft tissue of the right groin. An ultrasound dated August 26, 2024 demonstrated a right inguinal hernia.

In a supplemental report dated September 12, 2024, Dr. Darakjian reviewed the August 26, 2024 ultrasound and recommended an evaluation by a general surgeon to determine appropriate treatment options. He indicated that his opinion regarding appellant's disability status for the claimed periods remained unchanged.

OWCP also received follow-up reports by Dr. Conwisar dated June 3 through December10, 2024 wherein he continued his restrictions.

By decision dated January 28, 2025, OWCP denied modification of its June 21, 2023 decision.

OWCP continued to receive evidence, including follow-up medical reports by Dr. Conwisar dated February 3 and March 31, 2025 wherein he continued his restrictions.

In a narrative report dated May 23, 2025, Dr. Robbie K. Sooriash, Board-certified in public health and general preventative medicine, reviewed medical records and noted appellant's complaints of left rib pain and neck discomfort which radiated to both shoulders and down his arms. He indicated that he had been working modified duty, lifting no more than 20 pounds. Dr. Sooriash documented physical examination findings and diagnosed right inguinal hernia, chronic neck pain, rib muscle strain sequela, and right arm paresthesia. He recommended an MRI scan of the pelvis and released him to return to work with no lifting greater than 20 pounds.

OWCP also received follow-up reports by Dr. Sooriash dated June 6 and 16, 2025, as well as physical therapy reports wherein he repeated her prior findings and conclusions and diagnoses.

In a June 12, 2025 medical report, Dr. Jay Shah, Board-certified in anesthesiology and pain medicine, noted appellant's complaints of left thoracic and chest pain. He documented examination findings and diagnosed intercostal neuralgia and chronic pain.[5]

On January 28, 2026 appellant, through counsel, requested reconsideration of OWCP's January 28, 2025 decision. In support thereof, he submitted a narrative report dated January 28, 2026, wherein Dr. Tolbert reiterated her opinion that appellant's underlying hernia contributed to his inability to perform light duties during the claimed period of disability.

By decision dated February 18, 2026, OWCP denied modification of the January 28, 2025 decision.

[5] On March 7, 2023 appellant, through counsel, requested expansion of the acceptance of his claim to include cervicothoracic spine myoligamentous sprain/strain, as causally related to, or consequential to, the accepted February 10, 2021 employment injury. On June 20, 2025 appellant, through counsel, requested expansion of the acceptance of his claim to include right inguinal hernia as causally related to, or consequential to, the accepted February 10, 2021 employment injury. The Board notes that OWCP has not issued a final decision regarding appellant's expansion claims, thus that issue is not currently before the Board. *See* 20 C.F.R. §§ 501.2(c) and 501.3.

LEGAL PRECEDENT

An employee seeking benefits under FECA has the burden of proof to establish the essential elements of his or her claim including that any disability or specific condition for which compensation is claimed is causally related to the employment injury.[6] Under FECA, the term "disability" means the incapacity, because of an employment injury, to earn the wages that the employee was receiving at the time of injury.[7] Disability is, thus, not synonymous with physical impairment, which may or may not result in an incapacity to earn wages.[8] An employee who has a physical impairment causally related to a federal employment injury, but who nevertheless has the capacity to earn the wages he or she was receiving at the time of injury, has no disability as that term is used in FECA.[9] When, however, the medical evidence establishes that the residuals or sequelae of an employment injury are such that, from a medical standpoint, they prevent the employee from continuing in his or her employment, he or she is entitled to compensation for loss of wages.[10]

The medical evidence required to establish causal relationship between a claimed period of disability and an employment injury is rationalized medical opinion evidence. The opinion of the physician must be based on a complete factual and medical background of the claimant, must be one of reasonable medical certainty, and must be supported by medical rationale explaining the nature of the relationship between the claimed disability and the accepted employment injury.[11]

The Board will not require OWCP to pay compensation for disability in the absence of medical evidence directly addressing the specific dates of disability for which compensation is claimed. To do so would essentially allow an employee to self-certify his or her disability and entitlement to compensation.[12]

ANALYSIS

The Board finds that appellant has not met his burden of proof to establish disability from work during the periods May 29 through 31 and June 7 through October 28, 2021, causally related to the accepted February 10, 2021 employment injury.

In support of his disability claim, appellant submitted work status notes dated August 12, 2021 wherein Dr. Conwisar indicated that he was totally disabled for the period May 20 through October 1, 2021. However, Dr. Conwisar did not explain with sufficient rationale how appellant's

[6] *S.F.*, Docket No. 20-0347 (issued March 31, 2023; *S.W.*, Docket No. 18-1529 (issued April 19, 2019); *J.F.*, Docket No. 09-1061 (issued November 17, 2009); *Kathryn Haggerty*, 45 ECAB 383 (1994); *Elaine Pendleton*, 40 ECAB 1143 (1989).

[7] 20 C.F.R. § 10.5(f).

[8] *See H.B.*, Docket No. 20-0587 (issued June 28, 2021); *L.W.*, Docket No. 17-1685 (issued October 9, 2018).

[9] *See H.B.*, *id.*; *K.H.*, Docket No. 19-1635 (issued March 5, 2020).

[10] *See D.R.*, Docket No. 18-0323 (issued October 2, 2018).

[11] *F.B.,* Docket No. 22-0679 (issued January 23, 2024); *Y.S.*, Docket No. 19-1572 (issued March 12, 2020).

[12] *J.B.*, Docket No. 19-0715 (issued September 12, 2019); *Fereidoon Kharabi,* 52 ECAB 291, 293 (2001).

disability resulted from the accepted employment injury. The Board has held that a report is of limited probative value regarding causal relationship if it does not contain medical rationale explaining how a given disability was related to the accepted employment injury.[13] Thus, this evidence is insufficient to establish appellant's disability claim.

In medical reports dated May 20 and October 28, 2021, Dr. Conwisar provided diagnoses and restrictions. In follow-up reports dated December 6, 2021 through March 31, 2025, he continued to provide restrictions. However, Dr. Conwisar did not provide an opinion on disability from work during the claimed periods causally related to the accepted February 10, 2021 employment injury.[14] 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.[15] Therefore, this evidence is insufficient to establish the disability claim.

In narrative reports dated May 23, 2024 and January 28, 2026, Dr. Tolbert opined that the February 10, 2021 employment injury "significantly impaired [appellant's] ability to perform even light-duty tasks during the specified periods of disability." She further noted that his underlying inguinal hernia "may have compounded [his] difficulty in returning to work during the referenced periods." However, Dr. Tolbert did not explain with sufficient rationale how appellant's claimed disability resulted from the accepted employment injury. As explained above, a report is of limited probative value regarding causal relationship if it does not contain medical rationale explaining how a given disability was related to the accepted employment injury.[16] Thus, this evidence is insufficient to establish appellant's disability claim.

Dr. Sooriash, in reports dated May 23 through June 16, 2025, provided restrictions. In a June 12, 2025 medical report, Dr. Shah diagnosed intercostal neuralgia and chronic pain. However, neither physician offered an opinion regarding whether appellant was disabled from work during the claimed periods, causally related to the accepted employment injury.[17] As explained. above, 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.[18] This evidence is, therefore, insufficient to establish appellant's disability claim.

The remaining evidence submitted by appellant consists of physical therapy reports and diagnostic studies. The Board has held that certain healthcare providers such as physical therapists are not considered physicians as defined under FECA and, therefore, are not competent to provide

[13] *See S.Y.,* Docket No. 20-0347 (issued March 31, 2023); *T.B.,* Docket No. 20-0255 (issued March 11, 2022); *Y.D.,* Docket No. 16-1896 (issued February 10, 2017).

[14] *See D.D.*, Docket No. 26-0094 (issued March 4, 2026).

[15] *See T.H.,* Docket No. 23-0811 (issued February 13, 2024); *L.B*., Docket No. 18-0533 (issued August 27, 2018); *D.K*., Docket No. 17-1549 (issued July 6, 2018).

[16] *Supra* note 12.

[17] *See supra* note 13.

[18] *See supra* note 14.

a medical opinion.[19] Thus, these reports are of no probative value and are insufficient to establish appellant's claim.

In reports dated August 12 and September 12, 2024, Dr. Darakjian, OWCP's second opinion physician, reviewed the SOAF and medical record and documented physical examination findings. He opined that appellant was capable of performing the February 23, 2021 modified duty city carrier supervisor position between May 29 and October 29, 2021. The Board finds that Dr. Darakjian's report was well-reasoned and based on a complete and accurate history and, therefore, constitutes the weight of the medical evidence.[20]

As the medical evidence of record is insufficient to establish disability from work during the periods May 29 through 31 and June 7 through October 28, 2021 causally related to the accepted February 10, 2021 employment injury, the Board finds that appellant has not met his 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 his burden of proof to establish disability for work for the periods May 29 through 31 and June 7 through October 28, 2021, causally related to his accepted February 10, 2021 employment injury.

[19] Section 8101(2) of FECA 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 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).

[20] *See S.W.*, Docket No. 25-0473 (issued May 15, 2025); *D.L.*, Docket No. 23-0850 (issued March 8, 2024); *P.N.*, Docket No. 22-0794 (issued October 20, 2023).

ORDER

IT IS HEREBY ORDERED THAT the February 18, 2026 decision of the Office of Workers' Compensation Programs is affirmed.

Issued: July 28, 2026
Washington, DC

Alec J. Koromilas, Chief Judge
Employees' Compensation Appeals Board

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

Janice B. Askin, Judge
Employees' Compensation Appeals Board