United States Department of Labor
Employees' Compensation Appeals Board

L.R., Appellant	)	
and	)	**Docket No. 26-0432**
	)	**Issued: July 9, 2026**
U.S. POSTAL SERVICE, CARDISS COLLINS POST OFFICE, Chicago, IL, Employer	)	

Appearances:
Appellant, pro se
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 April 9, 2026 appellant filed a timely appeal from a January 29, 2026 merit decision of the Office of Workers' Compensation Programs (OWCP). Pursuant to the Federal Employees' Compensation Act[1] (FECA) and 20 C.F.R. §§ 501.2(c) and 501.3, the Board has jurisdiction over the merits of this case.[2]

ISSUE

The issue is whether appellant has met her burden of proof to establish a medical condition causally related to the accepted factors of her federal employment.

[1] 5 U.S.C. § 8101 *et seq.*

[2] The Board notes that, following the January 29, 2026 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.*

FACTUAL HISTORY

On November 17, 2025 appellant, then a 51-year-old city carrier, filed an occupational disease claim (Form CA-2) alleging that she developed a bilateral knee condition due to factors of her federal employment, including constant walking, standing, and bending over the course of her 25-year career with the employing establishment. She noted that she first became aware of her condition on February 19, 2017, and realized its relation to her federal employment on September 20, 2018. Appellant stopped work on September 7, 2018.

In a June 3, 2025 report, Dr. William Thomas, a Board-certified orthopedic surgeon, reported that appellant presented for evaluation of bilateral knee pain which had been a chronic issue since 2017 due to excessive walking as she was formerly a mail carrier. He discussed findings on examination and reported that x-rays of both knees demonstrated bilateral tricompartmental knee osteoarthritis with joint space narrowing, osteophyte formation, and subchondral sclerosis, as well as a small sclerotic appearing lesion in the right proximal tibia. Dr. Thomas diagnosed tricompartmental osteoarthritic disease of the bilateral knees, worse in the patellofemoral compartment and conservative treatment.

In an undated and unsigned report received on November 24, 2025, x-ray and physical examination findings of both knees were noted. Appellant's complaints of knee pain were found to be consistent with tricompartmental osteoarthritic disease of the bilateral knees. It was further related that surgical and conservative treatment, including total knee arthroplasty and radiofrequency ablation (RFA), was explained and that she opted to proceed with a referral for RFA.

In a November 26, 2025 development letter, OWCP informed appellant of the deficiencies of her claim. It advised her as to the type of factual and medical evidence required 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 appellant's occupational disease claim, including comments from a knowledgeable supervisor. OWCP afforded the employing establishment 30 days to respond.

OWCP subsequently received a December 12, 2025 report from Dr. Samuel Chmell, a Board-certified orthopedic surgeon, wherein he discussed appellant's ongoing course of treatment for worsening pain and swelling of both knees, with her most recent dates of treatment taking place on February 26, May 23, and October 24, 2025. Dr. Chmell provided physical examination findings where he observed tenderness along the joint lines of both knees with diminished range of motion and noted that x-rays of the knees demonstrated joint space narrowing, osteophyte formation, and subchondral sclerosis which were indicative of tri-compartmental knee osteoarthritis. He diagnosed bilateral knee osteoarthritis which he opined was caused by her work-related activities of repetitive standing, walking, and bending. Dr. Chmell explained that repetitive trauma to appellant's knees was a causative factor for the development of her tri-compartmental advanced osteoarthritis of the knees, and therefore, there was a direct causal between her work activities and the development of her tri-compartmental osteoarthritis of the knees.

In a follow-up letter dated January 7, 2026, 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 November 26, 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 January 14, 2026 response to OWCP's development questionnaire, appellant indicated that she worked 8 to 10 hours a day as a carrier for the employing establishment over the last 25 years and engaged in no sports or activities outside of work.

In support of her claim, appellant submitted a November 30, 2018 after-visit summary documenting treatment with Dr. Alexander Sheng, a Board-certified physiatrist, and she resubmitted a signed copy of Dr. Thomas' June 3, 2025 report.

By decision dated January 29, 2026, OWCP denied appellant's claim, finding that the medical evidence of record was insufficient to establish causal relationship between the diagnosed condition and the accepted factors of her federal employment.

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 establish that an injury was sustained in the performance of duty in an occupational disease claim, an employee must submit the following: (1) a factual statement identifying employment factors alleged to have caused or contributed to the presence or occurrence of the disease or condition; (2) medical evidence establishing the presence or existence of the disease or condition for which compensation is claimed; and (3) medical evidence establishing that the diagnosed condition is causally related to the employment factors identified by the employee.[7]

[3] *Supra* note 1.

[4] *E.K.*, Docket No. 22-1130 (issued December 30, 2022); *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] *S.H.*, Docket No. 22-0391 (issued June 29, 2022); *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] *E.H.,* Docket No. 22-0401 (issued June 29, 2022); *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] *R.G.*, Docket No. 19-0233 (issued July 16, 2019); *see also Roy L. Humphrey*, 57 ECAB 238, 241 (2005); *Ruby I. Fish*, 46 ECAB 276, 279 (1994); *Victor J. Woodhams*, 41 ECAB 345 (1989).

Causal relationship is a medical question that requires rationalized medical opinion evidence to resolve the issue.[8] A physician's opinion on whether there is causal relationship between the diagnosed condition and the implicated employment factor(s) must be based on a complete factual and medical background.[9] Additionally, the physician's opinion must be expressed in terms of a reasonable degree of medical certainty, and must be supported by medical rationale explaining the nature of the relationship between the diagnosed condition and appellant's specific employment factor(s).[10]

ANALYSIS

The Board finds that appellant has not met her burden of proof to establish a medical condition causally related to the accepted factors of her federal employment.

In a December 12, 2025 report, Dr. Chmell discussed appellant's treatment for bilateral knee pain and swelling, examination findings which demonstrated tenderness along the joint lines of both knees with diminished range of motion, and noted that x-rays of the knees revealed joint space narrowing, osteophyte formation, and subchondral sclerosis which were indicative of tri-compartmental knee osteoarthritis. He diagnosed bilateral knee osteoarthritis which he opined was caused by her work-related activities of repetitive standing, walking, and bending. Dr. Chmell explained that repetitive trauma to appellant's knees was a causative factor for the development of her tri-compartmental advanced osteoarthritis, and therefore, a direct cause between her work activities and the development of her tri-compartmental osteoarthritis of the knees. However, he did not explain a pathophysiological process of how the accepted employment factors caused or contributed to the diagnosed conditions. The Board has held that a medical opinion should offer a medically-sound and rationalized explanation by the physician of how the specific employment factors physiologically caused or aggravated the diagnosed conditions.[11] Medical evidence, which does not explain the nature of the relationship between the diagnosed condition and the specific employment incident, is insufficient to meet the claimant's burden of proof.[12] As such, Dr. Chmell's December 12, 2025 report is insufficient to meet appellant's burden of proof.

In a June 3, 2025 report, Dr. Thomas evaluated appellant for bilateral knee pain which he explained had been a chronic issue since 2017 related to excessive walking as a former mail carrier. He discussed findings on examination, reviewed diagnostic studies, and diagnosed tri-compartmental osteoarthritic disease of both knees, worse in the patellofemoral compartment. Dr. Thomas did not, however, provide an opinion on the cause of the diagnosed medical condition.

[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] *M.V.*, Docket No. 18-0884 (issued December 28, 2018).

[10] *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).

[11] *See E.C.,* Docket No. 24-0668 (issued September 26, 2024); *S.B.,* Docket No. 24-0064 (issued February 28, 2024); *T.L.,* Docket No. 23-0073 (issued January 9, 2023); *V.D.,* Docket No. 20-0884 (issued February 12, 2021); *Y.D.,* Docket No. 16-1896 (issued February 10, 2017).

[12] *Id*.

The Board has held that medical evidence that does not offer an opinion regarding the cause of an employee's condition is of no probative value on the issue of causal relationship.[13] Therefore, this evidence is insufficient to establish appellant's claim.

The remaining medical evidence includes a November 30, 2018 after-visit summary documenting treatment with Dr. Sheng, that provided no opinion on causal relationship. As noted above medical evidence that does not offer an opinion regarding the cause of an employee's condition is of no probative value on the issue of causal relationship.[14] Therefore, this evidence is insufficient to establish appellant's claim. Additionally, appellant submitted an undated and unsigned report received on November 24, 2025. The Board has held that reports that are unsigned or bear an illegible signature lack proper identification and cannot be considered probative medical evidence because the author cannot be identified as a physician.[15] Thus, this report is of no probative value and is insufficient to establish appellant's claim.

As the medical evidence of record is insufficient to establish causal relationship between a medical condition and the accepted factors of federal employment, the Board finds that appellant has not met her burden of proof.[16]

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 factors of her federal employment.

[13] *See B.B.*, Docket No. 25-0661 (issued September 9, 2025); *G.R.*, Docket No. 25-0540 (issued June 26, 2025); *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).

[14] *Id.*

[15] *See C.C.,* Docket No. 25-0776 (issued September 15, 2025); *P.V.,* Docket No. 25-0187 (issued March 17, 2025); *M.H.,* Docket No. 19-0162 (issued July 3, 2019); *see also Z.G.,* Docket No. 19-0967 (issued October 21, 2019); *D.D.,* 57 ECAB 734 (2006); *Merton J. Sills,* 39 ECAB 572, 575 (1988).

[16] *I.D.*, Docket No. 22-0848 (issued September 2, 2022); *T.G.*, Docket No. 14-751 (issued October 20, 2014).

ORDER

IT IS HEREBY ORDERED THAT the January 29, 2026 decision of the Office of Workers' Compensation Programs is affirmed.

Issued: July 9, 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