

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

E.R., Appellant

and

**U.S. POSTAL SERVICE, PROCESSING &
DISTRIBUTION CENTER, North Reading, MA,
Employer**

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**Docket No. 26-0315
Issued: June 9, 2026**

Appearances:
Appellant, pro se
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
VALERIE D. EVANS-HARRELL, Alternate Judge

JURISDICTION

On February 14, 2026 appellant filed a timely appeal from a February 3, 2026 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.²

ISSUE

The issue is whether appellant has met his burden of proof to establish intermittent disability from work commencing November 29, 2025, causally related to the accepted February 18, 2025 employment injury.

¹ 5 U.S.C. § 8101 *et seq.*

² The Board notes that, following the February 3, 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 February 25, 2025 appellant, then a 42-year-old mail handler, filed a traumatic injury claim (Form CA-1) alleging that on February 18, 2025 he sustained a left calf injury when he was pulling on a box and he felt a loud pop in his calf while in the performance of duty. He stopped work on February 19, 2025. By decision April 9, 2025, OWCP accepted the claim for left lower leg posterior tendon and muscle strain. It paid appellant wage-loss compensation on the supplemental rolls.

In a report dated July 21, 2025, Dr. Kevin Heaton, an osteopathic physician Board-certified in family medicine, recounted appellant's history of injury and medical treatment, reviewed diagnostic tests, and provided examination findings. A review of appellant's magnetic resonance imaging (MRI) scan indicated some medial gastrocnemius medial atrophy and ankle small tibiotalar and posterior subtalar fusions. Dr. Heaton diagnosed left calf muscle strain and noted chronic left ankle and foot joint pain. He noted that appellant had been undergoing physical therapy since May 14, 2025 and had not returned to work. Dr. Heaton concluded that while appellant could still benefit from some therapy, there was no reason he could not return to full-duty work.

In an unsigned form report dated July 21, 2025, a healthcare provider provided appellant with restrictions of working no more than four hours of work a day, for two weeks.

On July 25, 2025 appellant accepted an offer of modified work for four hours per day and returned to work that day.

By decision dated July 28, 2025, OWCP denied appellant's claims for wage-loss compensation as of July 22, 2025.

In a report dated December 1, 2025, Megan Chapski, a physical therapist, related that appellant had limited improvement in objective measures and tolerance to activity. She noted that he had impairments in range of motion, power, endurance, gait of the left ankle, which limited him from working eight hours a day on his feet.

On December 13, 2025 appellant filed a claim for compensation (Form CA-7) for intermittent disability from work during the period November 29 through December 12, 2025. Appellant also filed a Form CA-7 on December 27, 2025 for intermittent disability from work during the period December 13 through 26, 2025.

In a development letter dated December 30, 2025, OWCP notified appellant of the deficiencies of his disability claim. It advised him of the type of factual and medical evidence needed to establish his claim and afforded him 30 days to respond.

In a report dated January 8, 2026, Dr. Heaton related appellant's history of injury. He diagnosed left medial gastrocnemius strain, chronic left ankle pain, and left lower leg joint pain. Dr. Heaton noted that appellant was last seen on July 22, 2025 when he released appellant to return to full-duty work without restrictions. However, he related that appellant had been advised by occupational therapy, through his work, to start with four hours per day, which he has been doing. On physical examination, Dr. Heaton observed some left calf localized tenderness, intact Achilles, normal sensory examination, and decreased left ankle range of motion due to pain. He further noted that appellant's pain complaints seemed far out of proportion to his accepted employment injury and that his ankle complaints were not part of the initial injury. Dr. Heaton also related that

on several occasions appellant had not followed up with appointments. However, he noted that he would order an electromyography/nerve conduction velocity (EMG/NCV) study to ensure that appellant did not have a neurologic injury. Dr. Heaton concluded that if appellant continued to have such huge gaps in his care, he would no longer feel comfortable providing work restrictions. In a work status form dated January 8, 2026, he advised that appellant could work full duty up to four hours a day.

On January 9, 2026 appellant filed a Form CA-7 claim for intermittent disability from work during the period December 27, 2025 through January 9, 2026.

Appellant also filed a Form CA-7 claim for intermittent disability from work during the period January 10 through 23, 2026.

An unsigned work status form dated January 8, 2026, received by OWCP on January 8, 2026, indicated that appellant could return to work for four hours a day. A second unsigned work status form dated January 8, 2026, received by OWCP on January 16, 2026, noted that appellant could perform sedentary work for eight hours a day, if standing, he was limited to four hours of work per day.

By decision dated February 3, 2026, OWCP denied appellant's claim for intermittent disability from work commencing November 29, 2025, causally related to his accepted February 18, 2025 employment injury.

LEGAL PRECEDENT

An employee seeking benefits under FECA³ 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.⁴

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.⁵ Disability is thus not synonymous with physical impairment, which may or may not result in an incapacity to earn wages.⁶ 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.⁷ When, however, the medical evidence establishes that the residuals or sequelae of an employment injury are such that, from a medical

³ *Id.*

⁴ *R.B.*, Docket No. 25-0715 (issued December 9, 2025); *C.B.*, Docket No. 20-0629 (issued May 26, 2021); *D.S.*, Docket No. 20-0638 (issued November 17, 2020); *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).

⁵ 20 C.F.R. § 10.5(f).

⁶ See *R.B.*, *supra* note 4; *L.W.*, Docket No. 17-1685 (issued October 9, 2018).

⁷ See *M.W.*, Docket Nos. 23-0031 and 23-0333 (issued May 12, 2025); *K.H.*, Docket No. 19-1635 (issued March 5, 2020).

standpoint, they prevent the employee from continuing in his or her employment, he or she is entitled to compensation for loss of wages.⁸

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.⁹

For each period of disability claimed, the employee has the burden of proof to establish that he or she was disabled from work causally related to the accepted employment injury.¹⁰ 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 their disability and entitlement to compensation.¹¹

ANALYSIS

The Board finds that appellant has not met his burden of proof to establish intermittent disability from work commencing November 29, 2025, causally related to the accepted February 18, 2025 employment injury.

In support of his disability claim, appellant submitted a January 8, 2026 report from Dr. Heaton diagnosing left medial gastrocsoleus strain, chronic left ankle, and left lower leg joint pain. Dr. Heaton noted he had previously seen appellant on July 22, 2025 and released him to return to full-duty work. He noted appellant had told him that he had been advised by occupational therapy, at his work, to return to work four hours per day. Dr. Heaton related that he would allow appellant to work full-duty restricted hours for up to four hours. However, he did not provide an opinion on causal relationship between the claimed disability and the accepted February 18, 2025 employment injury. 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.¹² Thus, this evidence is insufficient to establish appellant's disability claim.

⁸ See *R.B.*, *supra* note 4; *D.R.*, Docket No. 18-0323 (issued October 2, 2018).

⁹ *R.B.*, *id.*; *S.J.*, Docket No. 17-0828 (issued December 20, 2017); *Kathryn E. DeMarsh*, 56 ECAB 677 (2005).

¹⁰ *A.M.*, Docket No. 25-0788 (issued November 17, 2025); see *C.W.*, Docket No. 25-0243 (issued July 17, 2025); *B.D.*, Docket No. 18-0426 (issued July 17, 2019); *Amelia S. Jefferson*, 57 ECAB 183 (2005); *Fereidoon Kharabi*, 52 ECAB 291, 293 (2001).

¹¹ *Id.*

¹² See *T.J.*, Docket No. 26-0177 (issued March 25, 2026); *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).

Appellant also submitted physical therapy notes. The Board has held that certain healthcare providers such as physical therapists are not considered physicians as defined under FECA.¹³ Consequently, their medical findings and/or opinions will not suffice for purposes of establishing entitlement to FECA benefits.¹⁴ Thus, this evidence is also insufficient to establish the disability claim.

Lastly, appellant submitted unsigned work status notes. However, the Board has held that unsigned reports and reports that bear illegible signatures cannot be considered probative medical evidence because they do not provide an indication that the person completing the report qualifies as a physician under FECA.¹⁵ Therefore, this evidence is insufficient to establish the disability claim.

As the medical evidence of record is insufficient to establish causal relationship between the claimed disability and the accepted February 18, 2025 employment injury, the Board finds that appellant has not met his 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 his burden of proof to establish intermittent disability from work commencing November 29, 2025, causally related to the accepted February 18, 2025 employment injury.

¹³ 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) (January 2013); *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 *D.V.*, Docket No. 21-1393 (issued April 8, 2024) (physical therapists are not considered qualified physicians as defined under FECA); *H.S.*, Docket No. 20-0939 (issued February 12, 2021) (physical therapists are not considered “physician[s]” as defined under FECA).

¹⁴ *Id.*

¹⁵ *S.M.*, Docket No. 24-0164 (issued May 13, 2024); *B.S.*, Docket No. 22-0918 (issued August 29, 2022); *S.D.*, Docket No. 21-0292 (issued June 29, 2021); *C.B.*, Docket No. 09-2027 (issued May 12, 2010); *Merton J. Sills*, 39 ECAB 572, 575 (1988).

¹⁶ OWCP should consider payment of up to four hours of compensation to appellant for any unpaid lost time from work due to medical appointments to assess or treat symptoms related to the employment injury. See Federal (FECA) Procedure Manual, Part 2 -- Claims, *Compensation Claims*, Chapter 2.901.19(c) (February 2013); *J.E.*, Docket No. 19-1758 (issued March 16, 2021); *A.J.*, Docket No. 21-1211 (issued May 4, 2022); *A.V.*, Docket No. 19-1575 (issued June 11, 2020). See also *K.A.*, Docket No. 19-0679 (issued April 6, 2020); *William A. Archer*, 55 ECAB 674 (2004).

ORDER

IT IS HEREBY ORDERED THAT the February 3, 2026 decision of the Office of Workers' Compensation Programs is affirmed.

Issued: June 9, 2026
Washington, DC

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

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

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