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| <b>A.R., Appellant</b>                       | ) |                             |
|                                              | ) |                             |
| <b>and</b>                                   | ) | <b>Docket No. 26-0340</b>   |
|                                              | ) | <b>Issued: June 5, 2026</b> |
| <b>DEPARTMENT OF JUSTICE, FEDERAL</b>        | ) |                             |
| <b>BUREAU OF PRISONS, FEDERAL MEDICAL</b>    | ) |                             |
| <b>CENTER -- FORT WORTH, Fort Worth, TX,</b> | ) |                             |
| <b>Employer</b>                              | ) |                             |
|                                              | ) |                             |

*Case Submitted on the Record*

Before:  
PATRICIA H. FITZGERALD, Deputy Chief Judge  
JANICE B. ASKIN, Judge  
VALERIE D. EVANS-HARRELL, Alternate Judge

On February 10, 2026 appellant filed a timely appeal from a December 10, 2025 merit decision of the Office of Workers' Compensation Programs (OWCP). Pursuant to the Federal Employees' Compensation Act<sup>1</sup> (FECA) and 20 C.F.R. §§ 501.2(c) and 501.3, the Board has jurisdiction over the merits of this case.<sup>2</sup>

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

<sup>2</sup> The Board notes that, following the December 10, 2025 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.*

## **FACTUAL HISTORY**

On September 15, 2025 appellant, then a 55-year-old corrective therapist filed an occupational disease claim (Form CA-2) alleging that he sustained bilateral wrist pain due to factors of his federal employment, including opening and closing cell doors, responding to body alarms, fights, and repetitive and continuous typing over the 24 years he has worked for the employing establishment. He noted that he first became aware of his condition on October 5, 2023, and realized its relationship to his federal employment on March 5, 2024. Appellant stopped work on October 26, 2023 and retired in March 2024.

In a development letter dated September 23, 2025, OWCP informed appellant of the deficiencies of his claim. It advised him of the type of factual and medical evidence necessary to establish his claim and provided a questionnaire for his completion. OWCP afforded appellant 60 days to respond.

In a September 17, 2025 response to the development questionnaire, appellant described his employment duties which he believed caused or contributed to his bilateral upper extremity conditions including repeated use of heavy key rings and manipulation of heavy steel security doors, frequent handcuffing, restraining, and escorting inmates, carrying and lifting heavy equipment, continuous writing, and typing, and participation in defensive tactics and physical altercations with inmates.

On September 19, 2025 Dr. Michael Smith, an emergency medicine physician, noted a work-related injury on October 5, 2023. He performed a physical examination finding loss of range of motion of the bilateral wrists and tenderness in the left shoulder and elbow. Dr. Smith diagnosed joint derangements of the bilateral shoulders, wrists, and left elbow. In his October 3, 2025 treatment note, he related that appellant experienced pain in his shoulders, wrists, and left elbow since lifting a heavy desk in September 2023.

In a letter dated October 21, 2025, OWCP notified appellant that it had performed an interim review and determined that the evidence of record remained insufficient to establish his claim. It advised that he had 60 days from the September 23, 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.

OWCP subsequently received an October 3, 2025 attending physician's report (Form CA-20) completed by Dr. Smith wherein he diagnosed internal derangement of the wrists, shoulders, and left elbow. He attributed the diagnosed conditions to repetitive use injury from working at the employing establishment for 24 years. Dr. Smith related that appellant's work activity directly contributed to his diagnosed conditions, that the activity was significant enough to cause the conditions, and that a causal relationship had been established.

In a November 7, 2025 note, Dr. Rory Allen, an osteopath, related appellant's symptoms of bilateral wrist, shoulder, and left elbow pain and discomfort. He described the implicated employment duties of wearing a duty belt, shaking down inmates and cells, lifting, pushing, pulling, restraining inmates, handling keys, and opening and closing heavy doors. Dr. Allen diagnosed sprains of the shoulders, wrists, and left elbow. He opined that the direct cause of the diagnosed conditions was the "repetitive forceful overload" of the shoulders including repetitive forceful torque and loading of the bones and joints during repetitive job-related duties.

In a December 9, 2025 report, Dr. Allen reviewed the diagnostic testing and diagnosed sprains of the left shoulder elbow, wrist, and hand, right wrist and hand and right shoulder joint. He also diagnosed superior glenoid labrum lesions of the bilateral shoulders.

By decision dated December 10, 2025, OWCP denied appellant's occupational disease claim, finding that the medical evidence of record was insufficient to establish causal relationship between a medical condition and the accepted factors of his federal employment.

### **LEGAL PRECEDENT**

An employee seeking benefits under FECA<sup>3</sup> 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,<sup>4</sup> 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.<sup>5</sup> 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.<sup>6</sup>

To establish that an injury was sustained in the performance of duty in an occupational disease claim, a claimant must submit: (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.<sup>7</sup>

Causal relationship is a medical question that requires rationalized medical opinion evidence to resolve the issue.<sup>8</sup> The opinion of the physician must be based upon 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 factors.<sup>9</sup>

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<sup>3</sup> *Supra* note 1.

<sup>4</sup> *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).

<sup>5</sup> *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).

<sup>6</sup> *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).

<sup>7</sup> *See P.L.*, Docket No. 19-1750 (issued March 26, 2020); *R.G.*, Docket No. 19-0233 (issued July 16, 2019); *L.M.*, Docket No. 13-1402 (issued February 7, 2014); *Delores C. Ellyett, id.*

<sup>8</sup> *See I.J.*, Docket No. 19-1343 (issued February 26, 2020); *T.H.*, 59 ECAB 388 (2008); *Robert G. Morris*, 48 ECAB 238 (1996).

<sup>9</sup> *See D.C.*, Docket No. 19-1093 (issued June 25, 2020).

## ANALYSIS

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

In reports dated September 19 and October 3, 2025, Dr. Smith provided two different factual histories as the cause of appellant's upper extremity conditions. He initially indicated that appellant was injured on October 5, 2023 while employed with the employing establishment. In his October 3, 2025 treatment note, Dr. Smith related that appellant experienced pain in the shoulders, wrists, and left elbow after lifting a heavy desk in September 2023. However, appellant explained in his October 3, 2025 Form CA-2 that his diagnosed conditions were due to repetitive motion over the 24 years he worked with the employing establishment. Dr. Smith opined that appellant's work activity directly contributed to his diagnosed conditions, that the activity was significant enough to cause the conditions, and that causal relationship had been established. He did not clearly explain whether he believed that appellant's conditions were due to a traumatic lifting episode or to an occupational disease. The Board has held that medical reports based on an incomplete or inaccurate history are of limited probative value.<sup>10</sup> For this reason, Dr. Smith's reports are insufficient to establish appellant's claim.

Appellant also submitted a November 7, 2025 report from Dr. Allen who provided examination findings, reviewed diagnostic testing, and diagnosed sprains of the shoulders, wrists, and left elbow. Dr. Allen opined that the direct cause of the diagnosed conditions was the "repetitive forceful overload" of the bilateral shoulders including repetitive forceful torque and loading of the bones and joints during repetitive job-related duties. While he provided an affirmative opinion in support of causal relationship, Dr. Allen did not offer sufficient rationale to support his opinion.<sup>11</sup> The Board has held that medical opinion evidence must offer a medically-sound explanation of how the specific employment factors physiologically caused an injury.<sup>12</sup> This evidence is therefore insufficient to establish the claim.

In his December 9, 2025 report, Dr. Allen reviewed the diagnostic testing and provided diagnoses. However, he did not render an opinion on causal relationship. The Board has held that

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<sup>10</sup> See *S.E.*, Docket No. 26-0036 (issued January 29, 2026); *B.C.*, Docket No. 24-0036 (issued March 19, 2024); *S.B.*, Docket No. 21-0646 (issued July 22, 2022); *D.H.*, Docket No. 21-0537 (issued October 18, 2021); *T.B.*, Docket No. 17-0304 (issued May 16, 2017); *S.R.*, Docket No. 14-1086 (issued February 26, 2015) (medical conclusions based on an incomplete or inaccurate factual background are of limited probative value).

<sup>11</sup> See *S.J.*, Docket No. 26-0123 (issued April 10, 2026); *J.S.*, Docket No. 25-0231 (issued March 7, 2025); *A.C.*, Docket No. 24-0661 (issued September 11, 2024); *R.B.*, Docket No. 23-1027 (issued April 3, 2024); *S.B.*, Docket No. 24-0064 (issued February 28, 2024); *S.C.*, Docket No. 21-0929 (issued April 28, 2023); *J.D.*, Docket No. 19-1953 (issued January 11, 2021); *M.W.*, Docket No. 14-1664 (issued December 5, 2014).

<sup>12</sup> *S.J.*, *id.*; *R.S.*, Docket No. 26-0053 (issued February 18, 2026); *C.L.*, Docket No. 25-0593 (issued July 15, 2025); *K.J.*, Docket No. 21-0020 (issued October 22, 2021); *L.R.*, Docket No. 16-0736 (issued September 2, 2016); *J.R.*, Docket No. 12-1099 (issued November 7, 2012); *Douglas M. McQuaid*, 52 ECAB 382 (2001).

medical evidence that does not offer an opinion regarding the cause of an employee's condition is of no probative value.<sup>13</sup> Thus, his opinion is of no probative value.

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 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 a medical condition causally related to the accepted factors of his federal employment.

### **ORDER**

**IT IS HEREBY ORDERED THAT** the December 10, 2025 decision of the Office of Workers' Compensation Programs is affirmed.

Issued: June 5, 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

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<sup>13</sup> See *T.M.*, Docket No. 25-0467 (issued May 21, 2025); *A.B.*, Docket No. 23-0937 (issued January 24, 2024); *L.B.*, Docket No. 18-0533 (issued August 27, 2018); *D.K.*, Docket No. 17-1549 (issued July 6, 2018); *Victor J. Woodhams*, 41 ECAB 345 (1989).