United States Department of Labor
Employees' Compensation Appeals Board

T.B., Appellant	)	
and	)	**Docket No. 26-0381**
	)	**Issued: June 25, 2026**
DEPARTMENT OF VETERANS AFFAIRS, VA MID-ATLANTIC HEALTH CARE NETWORK, Durham, 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 18, 2026 appellant, through counsel, filed a timely appeal from a March 3, 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.

[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.*

ISSUE

The issue is whether appellant has met her burden of proof to establish a medical diagnosis in connection with the accepted March 4, 2025 employment incident.

FACTUAL HISTORY

On March 21, 2025 appellant, then a 38-year-old certified nursing assistant, filed a traumatic injury claim (Form CA-1) alleging that on March 4, 2025 she sustained a right shoulder injury when, with the assistance of a coworker, she placed a patient on a sit-to-stand lift and pulled the patient to the bathroom on this equipment while in the performance of duty. She indicated that it was difficult to get the patient over the hump of the bathroom entrance and noted that she felt popping and burning sensations in her right shoulder. Appellant stopped work on March 26, 2025.

In a March 19, 2025 disability note, a receptionist at a medical facility advised that appellant should be excused from performing her regular work and should only perform light-duty work from March 19 through April 25, 2025. In a March 21, 2025 note, Tunisia Perry, a licensed practical nurse, noted that appellant reported sustaining a right shoulder injury at work on March 4, 2025. In a separate note of even date, Phillip Hanson, a physician assistant, indicated that appellant sustained right shoulder pain due to a workplace accident.

In a March 26, 2025 statement, the coworker who helped appellant move the patient on March 4, 2025 provided further details of the incident. In a March 27, 2025 duty status report (Form CA-17), a medical provider with an illegible signature recommended work restrictions. Appellant also submitted administrative documents regarding matters such as medical care billing, medical appointments, and triage review of her condition.

In an April 14, 2025 development letter, OWCP informed appellant of the deficiencies of her traumatic injury claim and advised her of the type of evidence needed. It afforded her 60 days to respond.

Appellant subsequently submitted April 2 and May 5, 2025 reports wherein Elizabeth Owen, a physician assistant, discussed her medical condition, including her shoulder complaints.

In a follow-up May 23, 2025 letter, 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 April 14, 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.

Appellant submitted partial reports of June 9 and 10, 2025 diagnostic testing, including testing of the shoulder. The June 9, 2025 testing contained an impression of partial-thickness tears of the supraspinatus tendon and the infraspinatus tendon, acromioclavicular joint arthrosis, and numerous subcentimeter right axillary lymph nodes.

By decision dated June 18, 2025, OWCP denied appellant's traumatic injury claim, finding that the medical evidence of record did not contain a diagnosis in connection with the

accepted March 4, 2025 employment incident. It concluded, therefore, that the requirements had not been met to establish an injury as defined by FECA.

Appellant subsequently submitted a June 20, 2025 report wherein Ms. Owen discussed appellant's medical condition, including her shoulder complaints. She also submitted a previously unsubmitted page from the June 9, 2025 diagnostic testing report.

On June 25, 2025 appellant requested a review of the written record by a representative of OWCP's Branch of Hearings and Review.

By decision dated November 3, 2025, OWCP's hearing representative affirmed the June 18, 2025 decision.

On February 4, 2026 appellant, through counsel, requested reconsideration of the November 3, 2025 decision.

Appellant submitted a December 18, 2025 progress note wherein, Dr. Thomas Kelso, II, a Board-certified orthopedic surgeon, noted that appellant was doing well four months status post right shoulder arthroscopic acromioplasty with distal clavicle excision. Dr. Kelso indicated that she had returned to work and diagnosed history of arthroscopy of the right shoulder and right shoulder joint pain. He also discussed appellant's vital signs and medication usage.

By decision dated March 3, 2026, OWCP denied modification of the November 3, 2025 decision.

LEGAL PRECEDENT

An employee seeking benefits under FECA 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.[3] 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.[4]

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

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

[4] *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).

occurred at the time and place, and in the manner alleged.[5] The second component is whether the employment incident caused an injury.[6]

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.[7] 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.[8]

ANALYSIS

The Board finds that appellant has not met her burden of proof to establish a medical diagnosis in connection with the accepted March 4, 2025 employment incident.

Appellant submitted a December 18, 2025 progress note wherein Dr. Kelso indicated that appellant was doing well four months status post right shoulder arthroscopic acromioplasty with distal clavicle excision. Dr. Kelso diagnosed history of arthroscopy of the right shoulder and right shoulder joint pain. However, this report does not provide a medical diagnosis in connection with the accepted March 4, 2025 employment incident. It is appellant's burden of proof to obtain and submit medical documentation containing a firm diagnosis in connection with the accepted employment factors. As this report did not provide a firm diagnosis in connection with the accepted employment incident, it is therefore insufficient to meet appellant's burden of proof.[9] Therefore, this evidence is insufficient to establish appellant's traumatic injury claim.

Appellant submitted diagnostic test results from June 2025. However, diagnostic studies, standing alone, lack probative value on causal relationship as they do not address whether employment factors caused the diagnosed condition.[10]

Appellant also submitted reports, dated from March 21, 2025 through June 20, 2025, by physical assistants, and a March 21, 2025 treatment note from a licensed practical nurse. However, certain healthcare providers such as physician assistants, nurses, and physical and

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

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

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

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

[9] *B.H.*, Docket No. 26-0067 (issued March 3, 2026.

[10] *C.S.,* Docket No. 19-1279 (issued December 30, 2019).

occupational therapists are not considered physicians as defined under FECA.[11] Consequently, their medical findings and/or opinions will not suffice for purposes of establishing entitlement to FECA benefits.[12] Therefore, this evidence is insufficient to establish appellant's traumatic injury claim.

Appellant also submitted a March 27, 2025 Form CA-17 by a medical provider with an illegible signature, as well as unsigned administrative documents. The Board has held that unsigned reports and reports that bear illegible signatures lack proper identification and cannot be considered probative medical evidence as the author cannot be identified as a physician.[13] Thus, this evidence is of no probative value and is insufficient to establish appellant's traumatic injury claim.

As the medical evidence of record is insufficient to establish a medical diagnosis in connection with the accepted March 4, 2025 employment incident, the Board finds that appellant 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 diagnosis in connection with the accepted March 4, 2025 employment incident.

[11] 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 and occupational therapists are not competent to render a medical opinion under FECA); *see also A.K.*, Docket No. 20-0003 (issued June 2, 2020) (a licensed practical nurse is not considered a physician as defined under FECA); *T.S.,* Docket No. 19-0056 (issued July 1, 2019) (a physician assistant is not considered a physician as defined under FECA).

[12] *See id.* Appellant also submitted a March 19, 2025 disability note from a receptionist at a medical center, but such an individual would not be considered a physician as defined by FECA for the purpose of making such a determination. *See* 5 U.S.C. § 8101(2); 20 C.F.R. § 10.5(t).

[13] *See 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).

ORDER

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

Issued: June 25, 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