

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

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| L.S., Appellant |) | |
| |) | |
| and |) | Docket No. 25-0862 |
| |) | Issued: March 23, 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:
PATRICIA H. FITZGERALD, Deputy Chief Judge
JANICE B. ASKIN, Judge
VALERIE D. EVANS-HARRELL, Alternate Judge

JURISDICTION

On September 9, 2025, appellant filed a timely appeal from an April 18, 2025 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 her burden of proof to establish disability from work commencing January 13, 2025, causally related to her accepted November 27, 2024 employment injury.

¹ 5 U.S.C. § 8101 *et seq.*

² The Board notes that, following the April 18, 2025 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 January 12, 2025, appellant, then a 40-year-old city carrier, filed a traumatic injury claim (Form CA-1) alleging that on November 27, 2024 she sustained a patellar tendon rupture of her left knee when she tripped and fell, landing on her left knee, when carrying packages while ascending stairs in the performance of duty. On the reverse side of the claim form, the employing establishment controverted the claim. Appellant stopped work on November 27, 2024 and returned to full-time regular-duty work on November 29, 2024.

Appellant submitted medical evidence in support of her claim. In a duty status report (Form CA-17) and progress note dated January 13, 2025, Dr. David Barnes, an osteopath specializing in family medicine, restricted appellant from returning to work due to a left knee condition.

A January 14, 2025 magnetic resonance imaging (MRI) scan of the left knee revealed an impression of patella alta; partial lateral subluxation of the patella; horizontal cleavage tear within the outer peripheral margin of posterior body of medial meniscus; patellar tendon strain with interstitial split tear through entire patellar tendon; sprain of the posterior cruciate ligament which could be acute in a clinical setting; chronic mild insertional quadriceps tendinosis; early osteoarthritis in the medial and lateral compartments with small marginal osteophytes; and proximal tibiofibular joint effusion.

In a January 23, 2025 report, Dr. Barnes reported that appellant presented for evaluation following a November 27, 2024 employment injury when she tripped while ascending stairs to deliver a package, causing her to hit her left knee directly on the stair. Appellant complained of worsening pain, causing her to seek medical treatment on January 9, 2025, where she was diagnosed with patellar tendon rupture. Dr. Barnes noted complaints of sharp stabbing pain, catching and popping in the left knee, and difficulty with weight bearing. He provided physical examination findings and discussed the results of appellant's January 14, 2025 left knee MRI scan. Dr. Barnes diagnosed sprain of left knee, tendinosis and interstitial split tear, and edema of left knee, which he opined was unequivocally directly related to the November 27, 2024 work-related injury. He further discussed the mechanism of injury explaining that appellant fell squarely on her left knee, resulting in direct trauma. Dr. Barnes explained that this placed pressure on her ligaments and bones in a position that could lead to spraining of the ligaments and tendons of the knee, which was further evidenced by her physical examination findings of joint swelling, point tenderness following a traumatic event, and decreased range of motion and weakness of left knee.

In a January 27, 2025 attending physician's report, Part B of an authorization for examination and/or treatment (Form CA-16), Dr. Barnes discussed the history of injury reporting that appellant was delivering mail when she tripped while ascending stairs, causing her knee to directly hit the stair. He diagnosed sprain of left knee, edema of left knee, and tendinosis and interstitial split tear of left knee, and checked a box marked "YES" indicating that the condition was caused or aggravated by the employment activity described. Dr. Barnes determined that appellant was totally disabled from work from January 13 through February 10, 2025.

On February 4, 2025, appellant filed a claim for compensation (Form CA-7) for disability from work during the period January 13 through 31, 2025. She continued to file CA-7 forms for additional periods of disability thereafter.

In a February 6, 2025 attending physician's report (Form CA-20), Dr. Barnes diagnosed sprain of left knee, tendinosis and interstitial split tear, and edema of left knee. He opined that appellant was totally disabled from work commencing January 13, 2025 due to her November 27, 2024 employment injury.

On February 18, 2025, OWCP accepted appellant's claim for left knee sprain, left knee tendinosis and interstitial split tear, and left knee edema.

In a development letter dated February 18, 2025, OWCP informed appellant of the deficiencies of her claim for wage-loss compensation for disability from work commencing January 13, 2025. It advised her of the type of medical evidence needed to establish her claim and afforded her 30 days to respond.

In support of her claim, appellant submitted notes from Dr. Barnes, prescribing physical therapy for the period January 29 through May 20, 2025, to treat her left knee condition.

In a March 7, 2025 report, Dr. Barnes provided additional information pertaining to appellant's disability from work, commencing January 13, 2025. He discussed appellant's history of injury, reporting that on November 27, 2024 she was ascending stairs to deliver a package to a customer and tripped, causing her to hit her left knee directly on the stairs. Dr. Barnes noted complaints of sharp stabbing pain, catching and popping in the left knee, and difficulty with weight bearing. He reported that physical examination revealed muscle spasm, swelling and pain, severe pain on palpation of left patellar tendon, medial portion left knee joint effusion, and inability to toe or heel walk. Dr. Barnes further reported that appellant's initial evaluation revealed limited left knee range of motion, positive McMurray's test on left, and positive medial and lateral stress testing on left. This resulted in the January 14, 2025 left knee MRI scan, which revealed an impression of patella alta; partial lateral subluxation of the patella; horizontal cleavage tear within the outer peripheral margin of posterior body of medial meniscus; and patellar tendon strain with interstitial split tear through entire patellar tendon. Given appellant's history of injury, clinical findings, and evaluation, Dr. Barnes diagnosed sprain of left knee, tendinosis and interstitial split tear, and edema of left knee. He determined that it was in appellant's best interest to be held off work as the split tear would only worsen if put through continued physical stress at work.

By decision dated April 18, 2025, OWCP denied appellant's disability claim, finding that the medical evidence of record was insufficient to establish disability from work during the claimed period, causally related to the accepted November 27, 2024 employment injury.

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.³

³ *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).

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.⁴ Disability is thus not synonymous with physical impairment, which may or may not result in an incapacity to earn wages.⁵ 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.⁶ 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.⁷

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.⁸

For each period of disability claimed, the employee has the burden of proof to establish that he or she was disabled from work as a result of the accepted employment injury.⁹ 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.¹⁰

ANALYSIS

The Board finds that this case is not in posture for decision.

In reports dated January 23 and March 7, 2025, Dr. Barnes provided diagnoses of sprain of left knee, tendinosis and interstitial split tear, and edema of left knee which he opined was causally related to the accepted November 27, 2024 employment injury. In his January 23, 2025 report, he discussed the mechanism of injury explaining that appellant fell squarely on her left knee resulting in direct trauma, thereby placing pressure on the ligaments and bones in a position that can lead to spraining of the ligaments and tendons of the knee which was further evidenced by her physical examination findings of joint swelling, point tenderness following a traumatic event, and decreased range of motion and weakness of left knee. Dr. Barnes opined that appellant was temporarily

⁴ 20 C.F.R. § 10.5(f).

⁵ See *L.W.*, Docket No. 17-1685 (issued October 9, 2018).

⁶ See *K.H.*, Docket No. 19-1635 (issued March 5, 2020).

⁷ See *D.R.*, Docket No. 18-0323 (issued October 2, 2018).

⁸ *S.J.*, Docket No. 17-0828 (issued December 20, 2017); *Kathryn E. DeMarsh*, 56 ECAB 677 (2005).

⁹ See *B.D.*, Docket No. 18-0426 (issued July 17, 2019); *Amelia S. Jefferson*, 57 ECAB 183 (2005); *Fereidoon Kharabi*, 52 ECAB 291, 293 (2001).

¹⁰ *Id.*

totally disabled from work commencing January 13, 2025, and held her off work as she underwent physical therapy and ongoing treatment. In his March 7, 2025 report, he determined that appellant was unable to work as the split tear that was found on the January 14, 2025 left knee MRI scan would only worsen if she was put through the physical stress of her daily employment duties. While the opinions from Dr. Barnes are insufficiently rationalized to meet appellant's burden of proof to establish the claim, they are sufficient to require further development of the medical evidence.¹¹

It is well established that proceedings under FECA are not adversarial in nature and OWCP is not a disinterested arbiter.¹² While the claimant has the responsibility to establish entitlement to compensation, OWCP shares responsibility in the development of the evidence. It has the obligation to see that justice is done.¹³

The case shall, therefore, be remanded for further development. On remand, OWCP shall refer appellant, along with a statement of accepted facts, and the medical record to a specialist in the appropriate field of medicine for a rationalized medical opinion regarding whether appellant was disabled from work commencing January 13, 2025, causally related to the accepted November 27, 2024 employment injury. If the second opinion physician disagrees with the opinion of Dr. Barnes, he or she must provide a fully-rationalized opinion explaining why the accepted November 27, 2024 employment injury was insufficient to have caused the claimed disability for the period in question. After this and other such further development of the case record as deemed necessary, OWCP shall issue a *de novo* decision.

CONCLUSION

The Board finds that this case is not in posture for decision.

¹¹ See *H.W.*, Docket No. 24-0881 (issued November 19, 2024); *V.D.*, Docket No. 21-1053 (issued March 20, 2023); *A.C.*, Docket No. 20-1340 (issued November 1, 2022); *Richard E. Simpson*, 55 ECAB 490, 500 (2004); *John J. Carlone*, 41 ECAB 354, 360 (1989).

¹² See *W.W.*, Docket No. 23-0676 (issued February 20, 2024); *V.K.*, Docket No. 20-0989 (issued January 25, 2022); *M.T.*, Docket No. 19-0373 (issued August 22, 2019); *B.A.*, Docket No. 17-1360 (issued January 10, 2018).

¹³ *T.B.*, Docket No. 23-0988 (issued March 8, 2024); *A.J.*, Docket No. 18-0905 (issued December 10, 2018); *Donald R. Gervasi*, 57 ECAB 281, 286 (2005); *William J. Cantrell*, 34 ECAB 1233, 1237 (1983).

ORDER

IT IS HEREBY ORDERED THAT the April 18, 2025 decision of the Office of Workers' Compensation Programs is set aside, and the case is remanded for further proceedings consistent with this decision of the Board.

Issued: March 23, 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