

FACTUAL HISTORY

On May 14, 2025 appellant, then a 56-year-old mail handler, filed a traumatic injury claim (Form CA-1) alleging that on May 6, 2025 she injured her neck while in the performance of duty. She noted that she felt neck stiffness followed by pain after culling mail throughout her shift. Appellant stopped work on May 7, 2025 and returned to work on May 10, 2025.

In a statement dated May 10, 2025, appellant indicated that, on May 6, 2025, she noticed left shoulder soreness and left arm pain after culling mail.

In a statement dated May 11, 2025, an employing establishment supervisor indicated that appellant complained of hand pain after culling mail. She was transported to a medical facility for treatment.

In work status notes dated May 12, 13, and 22, 2025, Susan McCabe and Kristen Wong, both physician assistants, diagnosed neck strain and cervicgia and released appellant to return to work with restrictions.

A physical therapy note dated May 26, 2025 indicated a diagnosis of cervicgia and neck strain.

In a May 27, 2025 development letter, OWCP informed appellant of the deficiencies of her claim. It advised her of the type of factual and medical evidence needed to establish her claim and provided a questionnaire for her completion. OWCP afforded appellant 60 days to submit the necessary evidence.

OWCP thereafter received a medical report dated May 22, 2025 by Dr. Tien-Hoa Ko, an occupational medicine physician, who noted that appellant related complaints of pain and stiffness in her neck and left shoulder. Dr. Ko performed a physical examination of her neck and observed tenderness in the left trapezius muscle, left-sided muscle spasms, and limited range of motion (ROM) with flexion, right-side bending, right rotation, and extension due to pain. He diagnosed strain of neck muscle and released appellant to return to work with restrictions.

In a medical report dated May 22, 2025, Ms. Wong noted that appellant related complaints of neck pain and stiffness with radiation down her left arm, which she attributed to the May 6, 2025 work injury. She documented examination findings, diagnosed neck strain, and recommended work restrictions.

Appellant submitted a response to OWCP's development questionnaire on May 29, 2025, further describing her alleged employment injury.

OWCP also received additional physical therapy reports, medical reports by Dr. Ko dated June 5 and 19, 2025, and a medical report by Ms. Wong dated June 5, 2025.

In a follow-up letter dated June 30, 2025, 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 May 27, 2025 letter to submit the necessary evidence. OWCP further advised that if sufficient evidence was not received during this time, it would issue a decision based on the evidence contained in the record.

OWCP thereafter received a May 11, 2025 medical report from Ms. McCabe, who noted that appellant felt a pulling sensation in the left side of her neck while using a pole with a hook to pull mail, which progressively worsened to include radiation down the left arm into the hand. Ms. McCabe documented examination findings, diagnosed neck muscle strain and cervicalgia, and recommended work restrictions.

An x-ray of the cervical spine dated May 11, 2025 revealed muscle spasm and mild focal spondylosis without acute traumatic osseous abnormality.

In a medical report dated May 12, 2025, Dr. Ko noted that appellant related that she felt a pull in the left side of her neck while using a pole with a hook to pull mail. He also noted that she had a history of multiple sclerosis. Dr. Ko performed a physical examination of the cervical spine and observed stiffness, tenderness to palpation in the left paraspinal musculature from C2 through T2, and limited ROM with flexion, right rotation, left rotation, and extension due to pain. He diagnosed strain of neck muscle and cervicalgia and recommended work restrictions. Dr. Ko checked a box marked “Yes” to indicate that his findings and diagnosis were consistent with appellant’s account of the injury.

In a medical report dated May 13, 2025, Reuben San Juan, a physician assistant, diagnosed cervicalgia and neck strain.

In an attending physician’s report (Form CA-20) and a medical report, both dated July 3, 2025, Dr. Ko noted that appellant related that she was using a pole to pull mail and felt pain in her neck. He observed physical examination findings of tenderness to the posterior cervical area and limited ROM. Dr. Ko diagnosed a cervical muscle strain and opined that the condition was caused or aggravated by appellant’s employment duties. He explained that the pulling action strained her cervical area. In a work status note of even date, Dr. Ko released appellant to return to work with restrictions.

In a medical report dated July 17, 2025, Dr. Ko diagnosed neck muscle strain and recommended work restrictions. In a medical report and work status note of even date, Ms. Wong also diagnosed strain of neck muscle and recommended work restrictions.

By decision dated July 31, 2025, OWCP denied appellant’s claim, finding that the medical evidence of record was insufficient to establish causal relationship between appellant’s diagnosed neck condition and the accepted May 6, 2025 employment incident. It concluded, therefore, that the requirements had not been met to establish an injury as defined by FECA.

LEGAL PRECEDENT

An employee seeking benefits under FECA³ 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, that an injury was sustained in the performance of duty, as alleged, and that any disability or medical condition for

³ 5 U.S.C. § 8101 *et seq.*

which compensation is claimed is causally related to the employment injury.⁴ These are the essential elements of every compensation claim regardless of whether the claim is predicated on a traumatic injury or an occupational disease.⁵

To determine whether a federal employee has sustained a traumatic injury in the performance of duty, it first must be determined whether fact of injury has been established. There are two components involved in establishing fact of injury. First, the employee must submit sufficient evidence to establish that he or she actually experienced the employment incident at the time and place, and in the manner alleged. Second, the employee must submit sufficient evidence to establish that the employment incident caused an injury.⁶

The medical evidence required to establish causal relationship between a claimed specific condition and an employment incident is rationalized medical opinion evidence.⁷ The opinion of the physician must be based on a complete factual and medical background of the employee, 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 identified by the claimant.⁸

In any case where a preexisting condition involving the same part of the body is present and the issue of causal relationship, therefore, involves aggravation, acceleration or precipitation, the physician must provide a rationalized medical opinion that differentiates between the effects of the work-related injury or disease and the preexisting condition.⁹

ANALYSIS

The Board finds that appellant has not met her burden of proof to establish a neck condition causally related to the accepted May 6, 2025 employment incident.

Dr. Ko, in a medical report and Form OWCP-20 dated July 3, 2025, noted the history of the May 6, 2025 employment incident and documented physical examination findings. He diagnosed cervical muscle strain and opined that the pulling action strained appellant's cervical area. However, Dr. Ko did not provide a sufficiently rationalized medical explanation as to how her neck condition was physiologically caused or aggravated by the accepted May 6, 2025 employment incident. The Board has held that medical evidence that does not offer a well-

⁴ *C.G.*, Docket No. 20-0058 (issued September 30, 2021); *S.B.*, Docket No. 17-1779 (issued February 7, 2018); *J.P.*, 59 ECAB 178 (2007); *Joe D. Cameron*, 41 ECAB 153 (1989).

⁵ *J.M.*, Docket No. 17-0284 (issued February 7, 2018); *R.C.*, 59 ECAB 427 (2008); *James E. Chadden, Sr.*, 40 ECAB 312 (1988).

⁶ *T.H.*, Docket No. 19-0599 (issued January 28, 2020); *K.L.*, Docket No. 18-1029 (issued January 9, 2019); *John J. Carlone*, 41 ECAB 354 (1989).

⁷ *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).

⁸ *A.S.*, Docket No. 19-1955 (issued April 9, 2020); *Leslie C. Moore*, 52 ECAB 132 (2000).

⁹ Federal (FECA) Procedure Manual, Part 2 -- Claims, *Causal Relationship*, Chapter 2.805.3e (May 2023); *M.B.*, Docket No. 20-1275 (issued January 29, 2021); *see R.D.*, Docket No. 18-1551 (issued March 1, 2019).

rationalized explanation by the physician of how the specific employment incident physiologically caused or aggravated the diagnosed condition(s) is of limited probative value.¹⁰ Therefore, this evidence is insufficient to establish appellant's claim.

In a medical report dated May 12, 2025, Dr. Ko diagnosed strain of neck muscle and cervicgia. He checked a box marked "Yes" to indicate that his findings and diagnosis were consistent with appellant's account of the injury. However, Dr. Ko provided no rationale for his opinion on causal relationship. The Board has held that when a physician's opinion on causal relationship consists only of checking "Yes" to a form question, without providing medical rationale, that opinion is of limited probative value and is insufficient to establish causal relationship.¹¹ As such, this report is insufficient to establish appellant's traumatic injury claim.

In medical reports dated May 22, June 5 and 9, and July 17, 2025, Dr. Ko diagnosed neck muscle strain. However, he did not offer an opinion regarding the cause of the diagnosed condition. The Board has held that an opinion which does not address the cause of an employee's condition is of no probative value on the issue of causal relationship.¹² Thus, these reports are insufficient to establish appellant's claim.

Appellant also submitted physical therapy notes and reports by Ms. McCabe, Ms. Wong, and Mr. San Juan, physician assistants. Certain healthcare providers such as physical therapists and physician assistants are not considered physicians as defined under FECA, and their reports do not constitute competent medical evidence.¹³ Consequently, their medical findings and/or opinions will not suffice for purposes of establishing entitlement to compensation benefits.¹⁴

The remaining evidence of record consists of a May 11, 2025 x-ray of the cervical spine. Diagnostic studies, standing alone, lack probative value on causal relationship as they do not address whether employment factors caused the diagnosed condition.¹⁵

¹⁰ See *S.B.*, Docket No. 25-0839 (issued January 21, 2026); *D.D.*, Docket No. 25-0751 (issued August 27, 2025); *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).

¹¹ *S.K.*, Docket No. 25-0296 (issued March 5, 2025); *M.G.*, Docket No. 23-1049 (issued November 26, 2024); *G.C.*, Docket No. 24-0672 (issued September 16, 2024); *Lillian M. Jones*, 34 ECAB 379, 381 (1982).

¹² *T.D.*, Docket No. 19-1779 (issued March 9, 2021); *L.B.* Docket No. 18-0533 (issued August 27, 2018); *D.K.* Docket No. 17-1549 (issued July 6, 2018).

¹³ Section 8102(2) of FECA provides as follows: 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. § 8102(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 therapists are not competent to render a medical opinion under FECA); see also *S.S.*, Docket No. 21-1140 (issued June 29, 2022) (physician assistants are not considered physicians under FECA and are not competent to provide medical opinions).

¹⁴ *T.H.*, Docket No. 23-1142 (issued March 28, 2024).

¹⁵ *A.D.*, Docket No. 24-0770 (issued October 22, 2024); *C.S.*, Docket No. 19-1279 (issued December 30, 2019).

As the medical evidence of record is insufficient to establish causal relationship between a neck condition and the accepted May 6, 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 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 neck condition causally related to the accepted May 6, 2025 employment incident.

ORDER

IT IS HEREBY ORDERED THAT the July 31, 2025 decision of the Office of Workers' Compensation Programs is affirmed.

Issued: March 18, 2026
Washington, DC

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

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

Janice B. Askin, Judge
Employees' Compensation Appeals Board