

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

M.H., Appellant)	
)	
and)	Docket No. 26-0262
)	Issued: May 11, 2026
U.S. POSTAL SERVICE, MADISON)	
PROCESSING & DISTRIBUTION CENTER,)	
Madison, WI, 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 January 20, 2026 appellant filed a timely appeal from a January 8, 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 a medical condition causally related to the accepted July 5, 2025 employment incident.

¹ 5 U.S.C. § 8101 *et seq.*

² The Board notes that following the January 8, 2026 decision, OWCP received additional evidence. 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 16, 2025 appellant, then a 33-year-old mail processing clerk, filed a traumatic injury claim (Form CA-1) alleging that on July 5, 2025 he sustained left hand carpal tunnel syndrome, and right forearm tendinitis with possible torn tendon, when lifting heavy sacks of mail into containers while in the performance of duty. He further explained that, as he was lifting a 40- to 50-pound sack, he felt a tearing sensation in his right arm and numbness in his left hand. Appellant stopped work on August 13, 2025, and returned to work with restrictions on August 14, 2025.

In a July 6, 2025 emergency department report, Dr. Christopher Nielsen, a Board-certified emergency medicine physician, diagnosed left wrist pain and right lateral elbow epicondylitis. He noted appellant's complaints of right elbow-to-hand pain after lifting a bag of packages at work the previous night.

A July 6, 2025 x-ray of appellant's right elbow showed no acute osseous abnormality.

In a development letter dated September 29, 2025, OWCP informed appellant of the deficiencies of his claim. It advised him of the type of factual and medical evidence needed to establish his claim and (afforded him 60 days to submit the necessary evidence. No additional evidence was received.

In a follow-up letter dated October 28, 2025, OWCP advised appellant that it had conducted an interim review, and the evidence remained insufficient to establish his claim. It noted that no additional evidence had been submitted and he had 60 days from the September 29, 2025 letter to submit the necessary evidence. OWCP further advised that if the evidence was not received, it would issue a decision based on the evidence in the record.

OWCP subsequently received a progress note dated August 13, 2025, wherein Dr. Brett F. Michelotti, a physician specializing in hand surgery and plastic surgery, noted that appellant had sustained a right forearm injury at work. On physical examination, Dr. Michelotti reported that appellant had tenderness along his right forearm extensor muscles, pain with resisted extension, and left wrist positive Tinel's sign. He diagnosed right forearm pain and left carpal tunnel syndrome.

Hospital records dated August 26, 2025 reflect that appellant underwent left carpal tunnel release surgery on that date by Dr. Michelotti.

In an attending physician's report (Form CA-20) dated November 26, 2025, Dr. Michelotti diagnosed right lateral epicondylitis and left carpal tunnel syndrome. He opined that appellant's "right elbow pain may be exacerbated by work-related tasks."

By decision dated December 2, 2025, OWCP denied appellant's claim, finding that he had failed to establish a medical condition causally related to the accepted July 5, 2025 employment incident.

On December 10, 2025 appellant requested reconsideration. In support thereof, he submitted progress notes dated November 26, 2025 from Dr. Michelotti. Appellant's diagnosis was noted as right lateral epicondylitis. His physical examination findings were reported as right

lateral epicondyle tenderness, normal hand range of motion, no pain with resisted extension, and pain with resisted flexion. A well-healed left carpal tunnel incision was also noted.

By decision dated January 8, 2026, OWCP denied modification.

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 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,⁴ 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.⁵ 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.⁶

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. 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.⁷

The medical evidence required to establish causal relationship between a claimed specific condition and an employment incident is rationalized medical opinion evidence.⁸ 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 specific employment incident identified by the employee.⁹

³ *Supra* note 1.

⁴ *M.G.*, Docket No. 26-0089 (issued March 10, 2026); *E.K.*, Docket No. 22-1130 (issued December 30, 2022); *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).

⁵ *M.G.*, *id.*; *S.H.*, Docket No. 22-0391 (issued June 29, 2022); *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).

⁶ *M.G.*, *id.*; *E.H.*, Docket No. 22-0401 (issued June 29, 2022); *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).

⁷ *M.G.*, *id.*; *H.M.*, Docket No. 22-0343 (issued June 28, 2022); *T.J.*, Docket No. 19-0461 (issued August 11, 2020); *K.L.*, Docket No. 18-1029 (issued January 9, 2019); *John J. Carlone*, 41 ECAB 354 (1989).

⁸ *M.G.*, *id.*; *S.M.*, Docket No. 22-0075 (issued May 6, 2022); *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).

⁹ *M.G.*, *id.*; *J.D.*, Docket No. 22-0935 (issued December 16, 2022); *T.L.*, Docket No. 18-0778 (issued January 22, 2020); *Y.S.*, Docket No. 18-0366 (issued January 22, 2020); *Victor J. Woodhams*, 41 ECAB 345, 352 (1989).

ANALYSIS

The Board finds that appellant has not met his burden of proof to establish a medical condition causally related to the accepted July 5, 2025 employment incident.

In a July 6, 2025 emergency department report, Dr. Nielsen related the history of appellant's July 5, 2025 employment incident. He diagnosed left wrist pain and right lateral elbow epicondylitis. Dr. Michelotti, in an August 13, 2025 report, diagnosed right forearm pain and left carpal tunnel syndrome and noted a right forearm work injury. However, neither physician offered a rationalized medical opinion explaining the cause of appellant's diagnosed conditions.¹⁰ The Board has held that medical opinion evidence must offer a medically-sound explanation of how the specific employment incident physiologically caused an injury.¹¹ This evidence is therefore insufficient to establish the claim.

OWCP also received August 26, 2025 hospital records by Dr. Michelotti reflecting that appellant had undergone a left carpal tunnel release. In a November 26, 2025 report, Dr. Michelotti diagnosed right lateral epicondylitis. However, these reports did not offer an opinion regarding the cause of the diagnosed conditions. The Board has held that a medical report that does not contain an opinion on causal relationship is of no probative value.¹² Thus, this evidence is insufficient to establish appellant's claim.

In a November 26, 2025 Form CA-20, Dr. Michelotti diagnosed right lateral epicondylitis and left carpal tunnel syndrome. He opined that appellant's "right elbow pain may be exacerbated by work-related tasks." The Board has held that medical opinions that are speculative or equivocal in character have little probative value.¹³ Therefore, Dr. Michelotti's November 26, 2025 Form CA-20 is insufficient to establish appellant's claim.

The remaining evidence of record consists of a July 6, 2025 x-ray of appellant's right elbow. The Board has held that diagnostic reports, standing alone, lack probative value on the issue of causal relationship as they do not provide an opinion as to whether the accepted

¹⁰ *D.B.*, Docket No. 25-0919 (issued February 13, 2026); *S.S.*, Docket No. 18-0081 (issued August 18, 2018).

¹¹ *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).

¹² *B.A.*, Docket No. 24-0406 (issued May 25, 2024); *W.O.*, Docket No. 22-0418 (issued February 15, 2023); *L.E.*, Docket No. 19-0470 (issued August 12, 2019); *M.J.*, Docket No. 18-1114 (issued February 5, 2019); *see also J.B.*, Docket No. 22-0872 (issued August 22, 2022); *L.B.*, Docket No. 18-0533 (issued August 27, 2018); *D.K.*, Docket No. 17-1549 (issued July 6, 2018).

¹³ *See S.D.*, Docket No. 26-0088 (issued February 19, 2026); *B.D.*, Docket No. 25-0852 (issued December 1, 2025); *L.B.*, Docket No. 23-0099 (issued July 26, 2023); *C.C.*, Docket No. 22-0609 (issued October 25, 2022); *H.A.*, Docket No. 18-1455 (issued August 23, 2019); *Ricky S. Storms*, 52 ECAB 349 (2001).

employment incident caused a diagnosed condition.¹⁴ Such reports are therefore insufficient to establish appellant's claim.

As the medical evidence of record is insufficient to establish causal relationship between a medical condition and the accepted July 5, 2025 employment incident, the Board finds that appellant has not met his burden of proof.¹⁵

Appellant may submit new evidence or argument, together 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 July 5, 2025 employment incident.

ORDER

IT IS HEREBY ORDERED THAT the January 8, 2026 decision of the Office of Workers' Compensation Programs is affirmed.

Issued: May 11, 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

¹⁴ See *D.B.*, *supra* note 10; *M.P.*, Docket No. 23-1131 (issued June 18, 2024); *V.A.*, Docket No. 21-1023 (issued March 6, 2023); *M.K.*, Docket No. 21-0520 (issued August 23, 2021); *F.D.*, Docket No. 19-0932 (issued October 3, 2019).

¹⁵ *I.D.*, Docket No. 22-0848 (issued September 2, 2022); *T.G.*, Docket No. 14-751 (issued October 20, 2014).