United States Department of Labor
Employees' Compensation Appeals Board

R.P., Appellant	)	
and	)	**Docket No. 26-0676**
	)	**Issued: October 7, 2026**
U.S. POSTAL SERVICE, POST OFFICE, Tampa, FL, Employer	)	

Appearances:
Wayne Johnson, 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
PATRICIA H. FITZGERALD, Deputy Chief Judge
JANICE B. ASKIN, Judge

JURISDICTION

On July 14, 2026 appellant, through counsel, filed a timely appeal from a January 15, 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.

ISSUE

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.

[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.*

FACTUAL HISTORY

On March 31, 2022 appellant, then a 33-year-old assistant rural carrier, filed an occupational disease claim (Form CA-2) alleging that he sustained thoracolumbar levoscoliosis and a herniated disc with nerve root compression due to factors of his federal employment, which required constant repetitive activity, including lifting/pulling/pushing packages weighing between 5 ounces and 70 pounds, as well as reaching, bending, and walking with packages in hand. He explained that each workday he picked up and delivered packages, often in quantities more than 100. Appellant noted that he first became aware of his condition and realized its relation to his federal employment on March 23, 2022. He stopped work on March 24, 2022.

In a March 24, 2022 statement, appellant noted that he worked 32 to 40 hours per week as an assistant rural carrier and asserted that the duties of his position caused the low back conditions found on diagnostic testing. He reported experiencing neck, shoulder, hand, knee, and back pain and discomfort.

In a November 9, 2021 report, Dr. Pari Limbachia, a chiropractor, indicated that appellant reported pain in his neck, left shoulder, left hand, back, and knees which he attributed to reaching and overarching his body since March 2021. She documented examination findings and diagnosed cervicalgia, pain in the thoracic spine, muscle spasm of the back, radiculopathy of the lumbosacral region, and segmental/somatic dysfunction of the cervical, thoracic, lumbar, sacral, and pelvic regions. In reports dated November 18, 2021, and February 3 and 24, and March 7 and 23, 2022, Dr. Limbachia provided the same diagnoses as contained in her November 9, 2021 report. In a March 30, 2022 form report, she opined that appellant could return to work on March 29, 2022 with restrictions, including lifting no more than 20 pounds.

A March 14, 2022 magnetic resonance imaging (MRI) scan of the lumbar spine contained an impression of thoracolumbar levoscoliosis, disc bulge at L4-5 with facet hypertrophy and mild central stenosis, and disc herniation/loss of disc height at L5-S1 with compression of the L5 and S1 nerve roots.

In a duty status report (Form CA-17) dated April 18, 2022, Dr. Britney Huneycutt, an osteopath and Board-certified family practitioner, listed a March 23, 2022 date of injury and diagnosed lumbar stenosis. She opined that appellant could perform his regular work for four hours per day beginning April 25, 2022.

In a development letter dated April 19, 2022, OWCP informed appellant of the deficiencies of his claim. It advised him of the type of factual and medical evidence needed and afforded him 60 days to respond. In a separate development letter dated April 19, 2022, OWCP requested that the employing establishment provide information regarding appellant's claim, including comments from a knowledgeable supervisor. It afforded the employing establishment 30 days to respond.

On April 28, 2022 OWCP received an undated statement, wherein the employing establishment controverted appellant's claim.

Appellant subsequently submitted a May 16, 2022 report, wherein Dr. Huneycutt noted that appellant was evaluated on April 18, 2022 for low back pain, which was exacerbated by standing, repetitive bending, and lifting/pushing/pulling over 50 pounds of weight. Dr. Huneycutt opined that, "[h]is back pain appears to come from disc herniations with lumbar spinal stenosis and is aggravated by the above movements." She noted that appellant's pain began without known injury and "became worse with continued work, to the point where one morning he could hardly walk to get out of bed."

By decision dated June 24, 2022, OWCP accepted the employment factors implicated by appellant, as alleged. However, it denied the claim as the medical evidence of record was insufficient to establish a medical condition causally related to the accepted employment factors of his federal employment.

Appellant subsequently submitted reports, dated April 18 through September 9, 2022, wherein Dr. Huneycutt documented physical examination findings and diagnosed multiple conditions, including low back pain, spinal stenosis of the lumbar region with neurogenic claudication, and idiopathic scoliosis of the thoracolumbar region.

Appellant also submitted an ultrasound study dated May 25, 2022, which contained an impression of borderline enlarged, mildly heterogeneous thyroid gland; and unsigned progress notes dated December 6, 2022, and January 16, March 10, and May 22, 2023.

In reports dated June 13, 2022 through May 8, 2023, Drs. John J. Damrath and Michael Munson, chiropractors, documented examination findings and diagnosed muscle spasm of the back; low back pain; intervertebral disc disorders with radiculopathy of the lumbar/lumbosacral regions; and segmental/somatic dysfunction of the lumbar, sacral, and pelvic regions. In reports dated March 6 through May 24, 2023, Dr. Jason Job, a chiropractor, diagnosed multiple conditions, including muscle spasm of the back low back pain; radiculopathy of the cervical region; intervertebral disc disorders with radiculopathy of the lumbar/lumbosacral regions; and segmental/somatic dysfunction of the cervical, thoracic, lumbar, sacral, and pelvic regions. In a May 5, 2022 note, Dr. Limbachia recommended spinal decompression surgery.

On June 23, 2023 appellant, through counsel, requested reconsideration of the merits of his claim.

By decision dated September 20, 2023, OWCP denied modification of its June 24, 2022 decision.

Appellant subsequently submitted additional reports, dated May 15 through October 25, 2023, wherein Drs. Job, Munson, and Damrath reiterated their prior diagnoses. He also submitted unsigned October 2, 2023, and January 4 and 15, 2024 progress notes; 2024 chiropractic notes with illegible signatures; and an October 19, 2023 lumbar spine MRI scan, which revealed disc bulging and other findings at L5-S1.

On September 20, 2024 appellant, through counsel, requested reconsideration of his claim.

By decision dated October 21, 2024, OWCP denied modification of its September 20, 2023 decision.

On October 21, 2025 appellant, through counsel, requested reconsideration of his claim.

In support thereof, appellant submitted additional chiropractic notes with illegible signatures; unsigned progress notes dated January 3, 2025; and a September 26, 2023 weight management report with an illegible signature.

By decision dated January 15, 2026, OWCP denied modification of its October 21, 2024 decision.

LEGAL PRECEDENT

An employee seeking benefits under FECA[3] 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 filed with the applicable time limitation, that an injury was sustained while in the performance of duty, as alleged, and that any disability or specific condition for 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 upon a traumatic injury or an occupational disease.[5]

In an occupational disease claim, appellant's burden of proof requires submission of the following: (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.[6]

Causal relationship is a medical question that requires rationalized medical opinion evidence to resolve the issue.[7] A physician's opinion on whether there is causal relationship between the diagnosed condition and the implicated employment factor(s) must be based on a complete factual and medical background.[8] Additionally, the physician's opinion must be expressed in terms of a reasonable degree of medical certainty, and must be supported by medical

[3] *Id*.

[4] *S.P.*, Docket No. 26-0378 (issued June 22, 2026); *E.S.*, Docket No. 18-1580 (issued January 23, 2020); *M.E.*, Docket No. 18-1135 (issued January 4, 2019); *C.S.,* Docket No. 08-1585 (issued March 3, 2009); *Bonnie A. Contreras*, 57 ECAB 364 (2006).

[5] *J.C.*, Docket No. 26-0179 (issued March 25, 2026); *S.P.,* 59 ECAB 184 (2007); *Joe D. Cameron,* 41 ECAB 153 (1989); *Elaine Pendleton,* 40 ECAB 1143 (1989).

[6] *A.C.*, Docket No. 25-0783 (issued September 15, 2025); *S.C.,* Docket No. 18-1242 (issued March 13, 2019).

[7] *W.M.,* Docket No. 14-1853 (issued May 13, 2020); *T.H.,* 59 ECAB 388, 393 (2008); *Robert G. Morris,* 48 ECAB 238 (1996).

[8] *T.C.*, Docket No. 24-0948 (issued January 10, 2025); *M.V.*, Docket No. 18-0884 (issued December 28, 2018).

rationale explaining the nature of the relationship between the diagnosed condition and appellant's specific employment factor(s).[9]

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 support of his claim, appellant submitted a May 16, 2022 report, wherein Dr. Huneycutt noted that appellant was evaluated on April 18, 2022 for low back pain, which was exacerbated by standing, repetitive bending, and lifting/pushing/pulling over 50 pounds of weight. She opined, "His back pain appears to come from disc herniations with lumbar spinal stenosis and is aggravated by the above movements." Dr. Huneycutt also noted that appellant's pain began without known injury and "became worse with continued work, to the point where one morning he could hardly walk to get out of bed." She, however, did not provide sufficient medical rationale in support of her opinion on causal relationship. The Board has held that a report is of limited probative value regarding causal relationship if it does not contain medical rationale explaining how an employment activity could have caused or aggravated a medical condition.[10] Therefore, this evidence is insufficient to establish appellant's occupational disease claim.

In an April 18, 2022 Form CA-17, Dr. Huneycutt listed a March 23, 2022 date of injury, diagnosed lumbar stenosis, and advised that appellant could perform his regular work for four hours per day beginning April 25, 2022. In reports dated April 18 through September 9, 2022, she documented physical examination findings and diagnosed multiple conditions, including low back pain, spinal stenosis of the lumbar region with neurogenic claudication, and idiopathic scoliosis of the thoracolumbar region. Dr. Huneycutt, however, did not provide an opinion on the cause of appellant's diagnosed conditions. The Board has held that medical evidence that does not offer an opinion regarding the cause of an employee's condition or disability is of no probative value on the issue of causal relationship.[11] Therefore, this evidence is insufficient to establish appellant's occupational disease claim.

Appellant also submitted multiple reports dated 2022 and 2023 by attending chiropractors, including Drs. Limbachia, Damrath, Munson, and Job. However, these chiropractors did not diagnose a subluxation as demonstrated to exist by x-rays, and thus their reports are of diminished value.[12] Chiropractors are physicians under FECA only to the extent that their reimbursable expenses are limited to treatment consisting of the manual manipulation of the spine to correct a

[9] *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).

[10] *See T.M.,* Docket No. 26-0397 (issued July 8, 2026); *B.M.,* Docket No. 26-0249 (issued May 26, 2026); *Y.D.*, Docket No. 16-1896 (issued February 10, 2017).

[11] *See L.R.*, Docket No. 26-0397 (issued July 8, 2026); *F.S.,* Docket No. 23-0112 (issued April 26, 2023); *L.B.,* Docket No. 18-0533 (issued August 27, 2018); *D.K.,* Docket No. 17-1549 (issued July 6, 2018).

[12] *See M.R.,* Docket No. 15-0583 (issued December 9, 2015).

subluxation as demonstrated to exist by x-rays.[13] Therefore, this evidence is insufficient to establish appellant's occupational disease claim.

OWCP also received diagnostic test results from 2022 and 2023. However, diagnostic studies, standing alone, lack probative value on the issue of on causal relationship as they do not address whether the accepted employment factors caused or contributed to the diagnosed condition.[14] Therefore, this evidence is insufficient to establish appellant's occupational disease claim.

Appellant also submitted unsigned progress notes, chiropractic notes with illegible signatures, and a September 26, 2023 narrative report with an illegible signature. 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.[15] Therefore, this evidence is of no probative value and is insufficient to establish appellant's occupational disease claim.

As the medical evidence of record is insufficient to establish a medical condition causally related to 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.

[13] 5 U.S.C. § 8101(2). *See also* 20 C.F.R. § 10.311; *S.R.,* Docket No. 22-0421 (issued July 15, 2022).

[14] *V.C.,* Docket No. 26-0380 (issued June 29, 2026); *C.S.,* Docket No. 19-1279 (issued December 30, 2019).

[15] *See B.M.,* Docket No. 26-0249 (issued May 26, 2026); *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 January 15, 2026 decision of the Office of Workers' Compensation Programs is affirmed.

Issued: October 7, 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