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

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| **E.F., Appellant** | ) | |
| **and** | ) | **Docket No. 26-0545** |
| | ) | **Issued: September 9, 2026** |
| **U.S. POSTAL SERVICE, POST OFFICE, New Orleans, LA, Employer** | ) | |

*Appearances:*
*Appellant, pro se*
*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
VALERIE D. EVANS-HARRELL, Alternate Judge

## ***JURISDICTION***

On May 28, 2026 appellant filed a timely appeal from a January 23, 2026 merit decision of the Office of Workers' Compensation Programs (OWCP). Pursuant to the Federal Employees' Compensation Act[1] (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 a medical condition causally related to the accepted May 27, 2025 employment incident.

[1] 5 U.S.C. § 8101 *et seq*.

[2] The Board notes that following the January 23, 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 May 27, 2025 appellant, then a 31-year-old retail sales clerk, filed a traumatic injury claim (Form CA-1) alleging that on that date she sustained a right shoulder injury when throwing packages and pulling books out of a gaylord while in the performance of duty. She stopped work on May 28, 2025.

In a May 27, 2025 attending physician's report, Part B of an authorization for examination and/or treatment (Form CA-16), Dr. Kevin Johnson, a physician specializing in family medicine, noted appellant's injury history and diagnosed right shoulder internal derangement, which he opined had been caused or aggravated by lifting while bending/reaching at work. He advised that appellant was totally disabled from work for the period May 27 through September 1, 2025.

In a May 27, 2025 report, Dr. Johnson recounted appellant's history of injury. On physical examination he observed that appellant had moderate right and lower right trapezius muscle spasms, tenderness on palpation of the cervical, thoracic, and lumbar spine, pain with flexion/abduction beyond 70 degrees, acromioclavicular joint click, and decreased cervical, thoracic, and lumbar range of motion (ROM). He diagnosed cervical, thoracic, and ligaments sprains, right shoulder internal derangement, right trapezius muscle spasm, and cervical paraspinal muscle spasms. Dr. Johnson opined that, based on subjective and objective findings and review of available medical records, the diagnosed conditions were, "more likely than not," directly related to the claimed May 27, 2025 employment incident.

In a development letter dated June 13, 2025, OWCP advised appellant of the type of factual and medical evidence needed to establish her claim and afforded her 60 days to submit the necessary evidence.

In a June 13, 2025 attending physician's report (Form CA-20), Dr. Johnson diagnosed right shoulder internal derangement and requested a magnetic resonance imaging (MRI) scan for further evaluation. He advised that the diagnosed condition had been caused or aggravated "while performing job duties." Dr. Johnson further advised that appellant was totally disabled from work from May 27 through August 31, 2025.

OWCP, in a follow-up letter dated July 10, 2025, 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 June 13, 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.

A May 27, 2025 x-ray report noted that the examination was performed at the request of Dr. Johnson. The impression indicated mild right acromioclavicular osteoarthritis and cervical postural subluxations.

In June 13, 2025 report, Dr. Johnson reiterated appellant's diagnoses.

In a June 16, 2025 report, Dr. Jennifer Sever, a chiropractor, recounted appellant's history of injury. She reported appellant's physical examination findings and diagnosed right shoulder internal derangement, cervical and thoracic ligaments sprain, and lumbar sprain, which she

attributed to the August 27, 2025 employment incident. In multiple reports covering the period June 18 through and July 11, 2025, Dr. Sever diagnosed right shoulder internal derangement, cervical and thoracic ligaments sprain, lumbar sprain, which she attributed to the claimed August 27, 2025 employment incident.

In a July 15, 2025 duty status report (Form CA-17), Dr. Johnson noted that on May 27, 2025 appellant injured her right shoulder while bending and lifting packages. He diagnosed right shoulder internal derangement and muscle spasms and advised that appellant could return to work that day with restrictions.

In a July 15, 2025 report, Dr. Johnson explained that the lifting, pushing, pulling, bending, tossing, and twisting actions appellant performed were sufficient to cause right shoulder, neck, and lower back injuries. He diagnosed cervical, thoracic, and lumbar ligaments sprains, right shoulder internal derangement, right trapezius muscle spasm, and cervical paraspinal muscle spasms. Dr. Johnson concluded that "there is a causal temporal relationship to her acute injuries from a clear mechanism with a direct producing cause of injury suffered through employment. In the absence of any other intervening event, it is with medical certainty that the injury sustained on May 27, 2025 was a direct cause of her injuries."

By decision dated August 11, 2025, OWCP denied appellant's claim, finding that the medical evidence of record was insufficient to establish a medical condition causally related to the accepted May 27, 2025 employment incident.

Dr. Johnson, in a Form CA-17 dated August 12, 2025, noted a May 27, 2025 injury date, provided examination findings, and diagnosed right shoulder internal derangement and muscle spasms. He advised that appellant could return to work with restrictions on August 12, 2025.

In a narrative report dated August 12, 2025, Dr. Johnson reiterated his prior findings and diagnoses.

OWCP continued to receive chiropractor reports dated July 14 through 25, 2025 wherein Dr. Sever reiterated her prior findings and diagnoses.

On August 27, 2025 appellant requested a review of the written record by a representative of OWCP's Branch of Hearings and Review. In support thereof, she submitted a narrative statement, further describing how her injury occurred.

In reports dated November 4 and December 9, 2025, Dr. Johnson related appellant's current physical examination findings and reiterated her previous diagnoses.

By decision dated January 23, 2026, the hearing representative affirmed the August 11, 2025 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 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. There are two components involved in establishing fact of injury. The first component is that 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. The second component is that 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]

## ***ANALYSIS***

The Board finds that appellant has not met her burden of proof to establish a medical condition causally related to the accepted May 27, 2025 employment incident.

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[3] *Supra* note 1.

[4] *S.S.*, Docket No. 26-0055 (issued February 25, 2026); *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] *S.S.*, *id.*; *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] *S.S.*, *id.*; *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] *S.S.*, *id.*; *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).

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

In his July 15, 2025 report, Dr. Johnson noted the history of appellant's May 27, 2025 employment incident. He diagnosed cervical, thoracic, and lumbar ligaments sprains, right shoulder internal derangement, right trapezius muscle spasm, and cervical paraspinal muscle spasms causally related to the accepted May 27, 2025 employment incident. Dr. Johnson explained that the lifting, pushing, pulling, bending, tossing, and twisting actions were sufficient to cause appellant's right shoulder, neck, and lower back injuries. He concluded that there was a clear temporal relationship from the incident to her injuries and that there was a clear mechanism of injury; in the absence of any other intervening event it was with medical certainty that the May 27, 2025 incident was the cause of her conditions. While Dr. Johnson offered an opinion generally supportive of appellant's claim, a medical opinion that a condition is causally related to an employment injury because the employee was asymptomatic before the injury, but symptomatic after, is insufficient, without supporting rationale, to establish causal relationship.[10] The Board further finds that Dr. Johnson has not explained how the physical activities appellant performed on May 17, 2025 caused any specific medical condition. The Board has held that medical evidence that does not offer a rationalized explanation by the physician of how the accepted employment incident physiologically caused or aggravated the diagnosed condition(s) is of limited probative value.[11] This evidence is therefore insufficient to establish the claim.

In Part B of a Form CA-16 dated May 27, 2025, Dr. Johnson diagnosed right shoulder internal derangement, which he opined was caused or aggravated by lifting while bending/reaching at work. In a May 27, 2025 narrative report, he opined that based on subjective and objective findings and review of available medical records, it was "more likely than not" that the diagnosed condition was directly related to the May 27, 2025 employment incident. In a June 13, 2025 Form CA-20, Dr. Johnson diagnosed right shoulder internal derangement and opined that the diagnosed condition had been caused or aggravated by the employment incident. In a July 15, 2025 Form CA-17, he noted that on May 27, 2025 appellant injured her right shoulder while bending and lifting packages. However, Dr. Johnson failed to provide medical rationale for his conclusory opinion.[12] This evidence is therefore insufficient to establish appellant's claim.

In additional reports dated June 13, August 12, November 4, and December 9, 2025, Dr. Johnson related appellant's physical examination findings and diagnoses, but offered no opinion regarding the cause of her diagnosed conditions. The Board has held that medical evidence that does not offer an opinion regarding the cause of an employee's condition is of no probative value on the issue of causal relationship.[13] This evidence is, therefore, insufficient to establish appellant's claim.

[10] *S.S.*, Docket No. 24-0814 (issued September 27, 2024); *R.S.,* Docket No. 16-1469 (issue December 8, 2016); *D.R.,* Docket No. 16-0411 (issued June 10, 2016); *Cleopatra McDougal-Saddler,* 47 ECAB 480 (1996).

[11] *S.E.,* Docket No. 26-0036 (issued January 29, 2026); *S.B.,* Docket No. 21-0646 (issued July 22, 2022); *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).

[12] *Id*.

[13] *K.A.*, Docket No. 26-0454 (issued July 29, 2026); *L.B.,* Docket No. 18-0533 (issued August 27, 2018); *D.K.,* Docket No. 17-1549 (issued July 6, 2018).

OWCP also received a series of reports from Dr. Sever. These reports, however, are of no probative medical value because Dr. Sever is not considered a physician as she did not diagnose a spinal subluxation demonstrated by x-ray. The Board has held that a chiropractor may only qualify as a physician in the diagnosis and treatment of spinal subluxation, his or her opinion is not considered competent medical evidence in evaluation of other disorders, including those of the extremities, although these disorders may originate in the spine.[14] Thus, Dr. Sever's opinion is not considered competent medical evidence under FECA.[15]

Appellant also submitted diagnostic test results. However, the Board has held that diagnostic studies, standing alone, lack probative value on causal relationship as they do not address whether employment factors caused the diagnosed condition.[16]

As the medical evidence of record is insufficient to establish a medical condition causally related to the accepted May 27, 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 medical condition causally related to the accepted May 27, 2025 employment incident.[17]

[14] Section 8101(2) provides that under FECA the term physician includes surgeons, podiatrists, dentists, clinical psychologists, optometrists, chiropractors, and osteopathic practitioners within the scope of their practice as defined by the applicable 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(3) (May 2023). Chiropractors are considered physicians under FECA only to the extent that their reimbursable services are limited to treatment consisting of manual manipulation of the spine to correct a subluxation as demonstrated by x-ray to exist and subject to regulations by the Secretary. *See P.T.,* Docket No. 21-0110 (issued December 8, 2021); *R.N.,* Docket No. 19-1685 (issued February 26, 2020); *Merton J. Sills,* 39 ECAB 572, 575 (1988).

[15] *Id.*

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

[17] The Board notes that a completed Form CA-16 authorization may constitute a contract for payment of medical expenses to a medical facility or physician, when properly executed. The form creates a contractual obligation, which does not involve the employee directly, to pay for the cost of the examination or treatment regardless of the action taken on the claim. *See* 20 C.F.R. § 10.300(c); *S.G.,* Docket No. 23-0552 (issued August 28, 2023); *J.G.,* Docket No. 17-1062 (issued February 13, 2018); *Tracey P. Spillane,* 54 ECAB 608 (2003).

## ***ORDER***

**IT IS HEREBY ORDERED THAT** the January 23, 2026 decision of the Office of Workers' Compensation Programs is affirmed.

Issued: September 9, 2026
Washington, DC

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

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

Valerie D. Evans-Harrell, Alternate Judge
Employees' Compensation Appeals Board