

injury.¹ She indicated that her modified duties required walking, standing, reaching and repetitive motion while operating a mail cancellation machine. Appellant stated that she experienced constant neck and bilateral shoulder and arm pain and numbness, tingling and weakness in both wrists and hands. Her neck pain was aggravated by repetitive bending, lifting or carrying or repetitive hand movements. She stopped work on October 9, 2000.

In a July 12, 2001 report, Dr. Razia Y. Forte, an attending physiatrist, provided a history of appellant's July 1, 1999 work-related traumatic injury and the results of a nerve conduction study. He stated that appellant had constant neck and bilateral shoulder and arm pain and numbness, tingling and weakness in both wrists and hands. Her neck pain was aggravated by repetitive bending, lifting or carrying or repetitive hand movements. Dr. Forte diagnosed bilateral upper extremity neuropathy, a probable disc protrusion at C4-5, a probable disc bulge at C6-7, chronic cervical sprain/strain and myofascial pain disorder.

By decision dated October 9, 2003, the Office denied appellant's claim on the grounds that she failed to establish that her neck, back and bilateral shoulder and arm conditions were causally related to factors of her employment.

On October 23, 2003 appellant requested an oral hearing which was subsequently changed to a request for a review of the written record.

By decision dated March 25, 2005, an Office hearing representative affirmed the October 9, 2003 decision.

On July 15, 2005 appellant requested reconsideration and submitted additional evidence. In reports dated October 19 to November 30, 2000, Dr. Joe T. Hartzog, an attending physiatrist, diagnosed work-related degenerative disc disease of the cervical spine, nonwork-related low back pain and psychogenic pain syndrome.

In reports dated September 3 to October 28, 2003, Dr. Forte provided a history of appellant's July 1, 1999 employment injury, test results and findings on physical examination. He diagnosed multiple disc bulging of the cervical spine, facet arthropathy with foraminal stenosis of the lumbosacral spine, left hip arthropathy and carpal tunnel syndrome. Dr. Forte indicated that appellant's conditions were aggravated by her modified employment duties following the July 1, 1999 employment injury but he did not describe the modified duties. Appellant requested that Dr. Forte provide work restrictions of no repetitive lifting, bending, stooping, pushing, pulling or prolonged sitting or standing.

In a January 13, 2005 note, Dr. Victor A. Kyaw, an attending family practitioner, indicated that appellant had been treated for fibromyalgia, depression and insomnia since October 13, 2003.

¹ Appellant filed a claim for a traumatic injury on July 1, 1999 when her mechanized cart was struck from behind. Her claim was accepted by the Office for neck, right shoulder and arm strains. By decision dated October 23, 2000, the Office terminated appellant's compensation and medical benefits on the grounds that she had no residual disability or medical condition causally related to her July 1, 1999 employment injury. By decision dated April 17, 2003, the Board found that the Office properly denied appellant's request for reconsideration. *See* Docket No. 03-493 (issued April 17, 2003).

Appellant also submitted an April 23, 2001 report from a chiropractor who diagnosed cervical and lumbar sprain/strains and a November 21, 2002 Social Security Administration decision granting disability benefits under the Social Security Act beginning October 9, 2000.

By decision dated September 23, 2005, the Office denied modification of its March 25, 2005 decision.

LEGAL PRECEDENT

To establish a causal relationship between appellant's neck, back and bilateral shoulder and arm conditions and her employment, she must submit rationalized medical opinion evidence based on a complete factual and medical background supporting such a causal relationship.² Rationalized medical opinion evidence is medical evidence which includes a physician's opinion on the issue of whether there is a causal relationship between the claimant's condition and the implicated employment factors. 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 diagnosed condition and the specific employment factors identified by the claimant.³ Neither the mere fact that a disease or condition manifests itself during a period of employment nor the belief that the disease or condition was caused or aggravated by employment factors or incidents is sufficient to establish causal relationship.⁴

ANALYSIS

The Board finds that appellant failed to establish that her neck, back and bilateral shoulder and arm conditions are causally related to her federal employment.

In reports dated October 19 to November 30, 2000, Dr. Hartzog diagnosed work-related degenerative disc disease of the cervical spine. However, he did not explain how this condition was causally related to factors of appellant's employment or her July 1, 1999 employment injury. Such explanation is particularly important in light of the fact that appellant stopped work as of October 9, 2000 and, consequently, was not exposed to factors of her federal employment after that date. As noted, the Office determined in an October 23, 2000 decision that appellant's 1999 employment injury had resolved. Due to these deficiencies, Dr. Hartzog's reports are not sufficient to establish that appellant sustained a work-related medical condition.

In 2001, Dr. Forte stated that appellant had neck and bilateral shoulder and arm pain and numbness, tingling and weakness in both wrists and hands and neck pain that was aggravated by repetitive bending, lifting or carrying or repetitive hand movements. He diagnosed bilateral upper extremity neuropathy, cervical disc bulging, chronic cervical sprain/strain and myofascial pain disorder. However, Dr. Forte did not provide a rationalized opinion as how the diagnosed

² *Michael S. Mina*, 57 ECAB ___ (Docket No. 05-1763, issued February 7, 2006).

³ *Gary J. Watling*, 52 ECAB 278 (2001); *Gloria J. McPherson*, 51 ECAB 441 (2000).

⁴ *Michael S. Mina*, *supra* note 2.

conditions were caused or aggravated by appellant's employment. As noted, appellant stopped work as of October 9, 2000. In 2003, Dr. Forte diagnosed multiple disc bulging of the cervical spine, facet arthropathy of the lumbosacral spine, left hip arthropathy and carpal tunnel syndrome. He indicated that appellant's conditions were aggravated by her modified employment duties following the July 1, 1999 employment injury but he did not describe the modified duties. Dr. Forte did not provide sufficient medical rationale to explain his opinion on causal relationship. Medical reports not containing adequate rationale on causal relationship are of diminished probative value and are generally insufficient to meet an employee's burden of proof.⁵ Dr. Forte did not explain how appellant's diagnosed conditions in 2003, multiple disc bulging of the cervical spine, facet arthropathy of the lumbosacral spine, left hip arthropathy and carpal tunnel syndrome, were causally related to her 1999 accepted neck, right shoulder and arm strains or her modified duties following the 1999 employment injury. Such explanation is critical since appellant stopped work on October 9, 2000 and thus was not exposed to factors of her federal employment between October 2000 and July 2003 when she filed her occupational disease claim. Also, as noted, the Office determined in an October 23, 2000 decision that appellant's 1999 employment injury had resolved. Due to these deficiencies, Dr. Forte's reports are not sufficient to establish that appellant's diagnosed conditions are causally related to factors of her federal employment or to her 1999 employment injury.

Dr. Kyaw indicated that appellant had been treated for fibromyalgia, depression and insomnia since October 13, 2003. However, he did not opine that these conditions were causally related to factors of her employment. Therefore, his report is not sufficient to discharge appellant's burden of proof to establish a work-related medical condition.

Appellant submitted a report from a chiropractor who diagnosed cervical and lumbar sprain/strains. However, under section 8101(2) of the Federal Employees' Compensation Act, chiropractors are only considered physicians and their reports considered medical evidence, to the extent that they treat spinal subluxations as demonstrated by x-ray to exist. As the chiropractor did not diagnose a spinal subluxation as shown on x-ray, he is not considered a physician under the Act in this case and his reports are of no probative value on the issue of whether appellant's claimed conditions were causally related to her employment.

Appellant submitted a November 21, 2002 Social Security Administration decision granting disability benefits under the Social Security Act beginning October 9, 2000. However, the Social Security Administration decision is not dispositive of appellant's entitlement to benefits under the Federal Employees' Compensation Act. The Board has held that entitlement to benefits under one Federal Act does not establish entitlement to benefits under the Federal Employees' Compensation Act.⁶ In determining whether an employee is disabled under the Act, the findings of the Social Security Administration are not determinative of disability under the Act because the Social Security Act and the Federal Employees' Compensation Act have different standards of medical proof on the question of disability. Under the Federal Employees' Compensation Act, appellant's injury or occupational disease must be shown to be causally related to an accepted injury or factors of his or her federal employment. Under the Social

⁵ *Ceferino L. Gonzales*, 32 ECAB 1591 (1981).

⁶ *See Daniel Deparini*, 44 ECAB 657 (1991); *Hazelee K. Anderson*, 37 ECAB 277 (1986).

Security Act, conditions which are not employment related may be taken into consideration in rendering a disability determination.⁷ For this reason, the Social Security Administration decision submitted does not establish appellant's claim.

CONCLUSION

The Board finds that appellant did not meet her burden of proof to establish that her neck, back and bilateral shoulder and arm conditions are causally related to factors of her employment.

ORDER

IT IS HEREBY ORDERED THAT the decisions of the Office of Workers' Compensation Programs dated September 23 and March 25, 2005 are affirmed.

Issued: April 21, 2006
Washington, DC

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

David S. Gerson, Judge
Employees' Compensation Appeals Board

Michael E. Groom, Alternate Judge
Employees' Compensation Appeals Board

⁷ *Id.*