U.S. Department of Labor

Benefits Review Board
200 Constitution Ave. NW
Washington, DC 20210-0001

BRB No. 17-0566 BLA

CHARLES R. CUMBERLIDGE	)	
	)	
Claimant-Respondent	)	
	)	
v.	)	
	)	
VALLEY CAMP COAL COMPANY	)	DATE ISSUED: 09/10/2018
	)	
Employer-Petitioner	)	
	)	
DIRECTOR, OFFICE OF WORKERS' COMPENSATION PROGRAMS, UNITED STATES DEPARTMENT OF LABOR	)	
	)	
Party-in-Interest	)	DECISION and ORDER

Appeal of the Decision and Order Awarding Benefits of Natalie A. Appetta, Administrative Law Judge, United States Department of Labor.

Heath M. Long (Pawlowski, Bilonick & Long), Ebensburg, Pennsylvania, for claimant.

George E. Roeder, III (Jackson Kelly PLLC), Morgantown, West Virginia, for employer.

Before: HALL, Chief Administrative Appeals Judge, GILLIGAN and ROLFE, Administrative Appeals Judges.

PER CURIAM:

Employer appeals the Decision and Order Awarding Benefits (2016-BLA-5626) of Administrative Law Judge Natalie A. Appetta, rendered on a claim filed on March 28, 2014, pursuant to the provisions of the Black Lung Benefits Act, as amended, 30 U.S.C. §§901-944 (2012) (the Act).

After granting the parties' request for a decision on the record, the administrative law judge credited claimant with twelve years of coal mine employment.[1] Because claimant had less than fifteen years of coal mine employment, the administrative law judge found that he could not invoke the rebuttable presumption of total disability due to pneumoconiosis at Section 411(c)(4) of the Act, 30 U.S.C. §921(c)(4) (2012).[2] She therefore considered whether claimant could establish entitlement pursuant to 20 C.F.R. Part 718 without the benefit of the Section 411(c)(4) presumption.

The administrative law judge found that the x-ray and medical opinion evidence did not establish the existence of clinical pneumoconiosis[3] pursuant to 20 C.F.R. §718.202(a)(1),(4). She found that the medical opinion evidence established the existence of legal pneumoconiosis,[4] however, in the form of chronic obstructive pulmonary disease (COPD) due to coal mine dust exposure under 20 C.F.R. §718.202(a)(4). In addition, the administrative law judge found that claimant is totally disabled by a respiratory or pulmonary impairment pursuant to 20 C.F.R. §718.204(b)(2), and that legal pneumoconiosis is a substantially contributing cause of claimant's total disability pursuant to 20 C.F.R. §718.204(c). Accordingly, the administrative law judge awarded benefits.

On appeal, employer argues that the administrative law judge erred in finding that claimant established the existence of legal pneumoconiosis pursuant to 20 C.F.R.

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[1] Claimant's coal mine employment was in West Virginia. Director's Exhibit 4. Accordingly, this case arises within the jurisdiction of the United States Court of Appeals for the Fourth Circuit. *See Shupe v. Director*, 12 BLR 1-200, 1-202 (1989) (en banc).

[2] Under Section 411(c)(4), claimant is entitled to a rebuttable presumption that he is totally disabled due to pneumoconiosis if he establishes at least fifteen years of underground coal mine employment, or coal mine employment in conditions substantially similar to those in an underground mine, and a totally disabling respiratory or pulmonary impairment. 30 U.S.C. §921(c)(4) (2012), as implemented by 20 C.F.R. §718.305.

[3] "Clinical pneumoconiosis" consists of "those diseases recognized by the medical community as pneumoconioses, *i.e.*, the conditions characterized by permanent deposition of substantial amounts of particulate matter in the lungs and the fibrotic reaction of the lung tissue to that deposition caused by dust exposure in coal mine employment." 20 C.F.R. §718.201(a)(1).

[4] "Legal pneumoconiosis" includes any chronic lung disease or impairment and its sequelae arising out of coal mine employment. 20 C.F.R. §718.201(a)(2). A disease "arising out of coal mine employment" includes "any chronic pulmonary disease or respiratory or pulmonary impairment significantly related to, or substantially aggravated by, dust exposure in coal mine employment." 20 C.F.R. §718.201(b).

§718.202(a), and total disability pursuant to 20 C.F.R. §718.204(b)(2). Claimant responds in support of the award of benefits. The Director, Office of Workers' Compensation Programs, has declined to file a substantive response unless specifically requested to do so by the Board.

The Board's scope of review is defined by statute. The administrative law judge's Decision and Order must be affirmed if it is rational, supported by substantial evidence, and in accordance with applicable law. 33 U.S.C. §921(b)(3), as incorporated by 30 U.S.C. §932(a); *O'Keeffe v. Smith, Hinchman & Grylls Associates, Inc.*, 380 U.S. 359 (1965).

I. Legal Pneumoconiosis

To prove that he has legal pneumoconiosis, claimant must establish that he has a chronic lung disease or impairment that is "significantly related to, or substantially aggravated by, dust exposure in coal mine employment." 20 C.F.R. §718.201(b). Pursuant to 20 C.F.R. §718.202(a)(4), the administrative law judge weighed the medical opinions of Drs. Saludes, Basheda, and Spagnolo. Decision and Order at 9-12, 16-18. Based on the results of an August 20, 2014 pulmonary function study, Dr. Saludes diagnosed claimant with moderate airflow obstruction consistent with COPD. Director's Exhibit 10. He noted that claimant's clinical history reflects that he was "diagnosed with COPD several years ago . . . ." *Id.* He further noted that claimant has no medical history of asthma and no history of cigarette smoking. *Id.* Noting that claimant had no other risk factors for the development of COPD, he opined that claimant's COPD was due to coal mine dust exposure. *Id.* In a supplemental report, Dr. Saludes noted that claimant's obesity may have played a role in his dyspnea, but opined that the obesity is not a contributing factor in claimant's COPD. *Id.* at 2.

In contrast, Drs. Basheda and Spagnolo opined that claimant does not have legal pneumoconiosis. Director's Exhibit 11; Employer's Exhibit 8. Dr. Basheda determined that claimant does not have COPD because his November 11, 2015 pulmonary function study administered by Dr. Basheda evidenced bronchoreversibility. Director's Exhibit 11. He explained that COPD is characterized by a permanent reduction in the FEV_1/FVC ratio below 0.7, whereas claimant's November 11, 2015 pulmonary function study went from an FEV_1/FVC ratio of 0.63 pre-bronchodilator to a ratio of 0.72 post-bronchodilator. *Id.* Dr. Basheda concluded that claimant's pulmonary function testing and medical history were consistent with a diagnosis of asthma, which he opined is a condition that is not caused by coal mine dust exposure. *Id.* He further concluded that claimant's asthma was under control through medication and, therefore, was intermittent rather than persistent. *Id.*

Dr. Spagnolo also opined that claimant's pulmonary function testing was consistent with asthma. Employer's Exhibit 8. He concluded that coal mine dust exposure played no role in any impairment that claimant may have. *Id*.

The administrative law judge found that Dr. Saludes's opinion diagnosing claimant with legal pneumoconiosis was well-reasoned and documented and entitled to the most weight. Decision and Order at 16-17. She found that Dr. Basheda's opinion was not adequately reasoned or documented and, therefore, was entitled to less weight. *Id*. at 17. Moreover, she found that Dr. Spagnolo's opinion was poorly reasoned and documented, and entitled to the least weight. *Id*.

Employer argues that the administrative law judge erred in crediting Dr. Saludes's diagnosis of legal pneumoconiosis. Employer's Brief at 17-23. Specifically, employer asserts that the administrative law judge erred in finding that Dr. Saludes provided a reasoned medical opinion. *Id*. Employer contends that Dr. Saludes failed to address the post-bronchodilator pulmonary function testing obtained by Dr. Basheda, which employer argues supports the conclusion that claimant does not have a chronic obstructive impairment. *Id*. at 21-22. We disagree.

The administrative law judge noted that Dr. Saludes considered claimant's "work history, lack of smoking history, and [pulmonary function study] consistent with moderate COPD." Decision and Order at 16. She further noted that claimant's treatment records are consistent with Dr. Saludes's diagnosis of COPD. *Id*. Moreover, she recognized that Dr. Saludes addressed the effect of claimant's obesity on his pulmonary condition. *Id*. Specifically, she highlighted his opinion that while "claimant's dyspnea may be multifactorial and could be due to his weight, [his] weight should not be a contributing factor in the development of COPD." *Id*.

Contrary to employer's argument, the administrative law judge permissibly found that Dr. Saludes's opinion was well-documented because he "considered the histories, symptoms, and objective testing," and well-reasoned because he "adequately explained why he considered legal pneumoconiosis to be the most likely diagnosis . . . ." Decision and Order at 16; *see Milburn Colliery Co. v. Hicks*, 138 F.3d 524, 528 (4th Cir. 1998); *Sterling Smokeless Coal Co. v. Akers*, 131 F.3d 438, 441 (4th Cir. 1997); *Clark v. Karst-Robbins Coal Co*., 12 BLR 1-149, 1-155 (1989) (en banc). Substantial evidence supports the administrative law judge's determination that Dr. Saludes reached a reasoned medical opinion. *See Island Creek Coal Co. v. Compton*, 211 F.3d 203, 212 (4th Cir. 2000). We therefore reject employer's allegation of error.

Employer next argues that the administrative law judge erred in discounting the opinions of Drs. Basheda and Spagnolo. Employer's Brief at 24-29. Specifically, employer argues that the administrative law judge substituted her opinion for that of the

medical experts when finding that the opinions of Drs. Basheda and Spagnolo were not adequately documented and reasoned. *Id*. We disagree.

The administrative law judge summarized claimant's medical treatment records. Decision and Order at 18-19. She found that the "treatment records, which span from 2013 to 2016 (with no records from 2015) diagnose and treat COPD and COPD exacerbations . . . ." *Id*. at 17. Contrary to employer's argument, the administrative law judge's finding that claimant's medical records reflect a history of treatment for COPD is supported by substantial evidence.[5] *See Lane v. Union Carbide Corp*., 105 F.2d 166, 174 (4th Cir 1997); Decision and Order at 17-19. The administrative law judge is empowered to weigh the medical evidence and to draw her own inferences therefrom. *See Mingo Logan Coal Co. v. Owens*, 724 F.3d 550, 557 (4th Cir. 2013); *Grizzle v. Pickands Mather & Co*., 994 F.2d 1093, 1096 (4th Cir. 1993). In view of claimant's treatment records, the administrative law judge permissibly found the opinions of Drs. Basheda and Spagnolo that claimant does not have COPD to be poorly documented. *See Hicks*, 138 F.3d at 528; *Akers*, 131 F.3d at 441.

Moreover, even accepting a diagnosis of asthma, the administrative law judge permissibly found that neither Dr. Basheda nor Dr. Spagnolo adequately explained why claimant's years of coal mine dust exposure would not have aggravated or contributed to the asthma. Decision and Order at 17; *see* 20 C.F.R. §718.201(b); *Hicks*, 138 F.3d at 533; *Akers*, 131 F.3d at 441. Further, the administrative law judge noted that Dr. Spagnolo opined that "heart disease resulting in left heart impairment can cause many of the [respiratory] symptoms [claimant] described." Decision and Order at 17. The administrative law judge found, however, that claimant's "treatment records did not document heart disease resulting in left heart impairment and no other opining physician addressed this potential diagnosis." *Id*. For this additional reason the administrative law

[5] The administrative law judge noted that medical treatment records from Wheeling Hospital, dated July 5, 2013, "describe complaints of chest pain and tightness and shortness of breath for 3 days," and include a diagnosis of acute chronic bronchitis. Decision and Order at 18; Employer's Exhibit 3. She further noted that records from Wheeling Hospital "dated April 14 and 15, 2014 describe complaints of shortness of breath, wheezing, . . . [and] diagnoses [of] COPD exacerbation, dyslipidemia, benign essential hypertension, and community acquired pneumonia." Decision and Order at 18; Employer's Exhibit 4. Additional treatment records from the same hospital "dated February 7 and 9, 2016 and March 11, 2016 note complaints of shortness of breath worsening for a few days, a reported history of COPD and black lung, and a diagnosis of chronic COPD exacerbation." Decision and Order at 18; Employer's Exhibit 6.

judge permissibly found that Dr. Spagnolo's opinion was "poorly reasoned." *Id*.; *see Hicks*, 138 F.3d at 528; *Akers*, 131 F.3d at 441.

As the trier-of-fact, the administrative law judge has the authority to assess the credibility of the medical opinions, based on the explanations given by the experts for their diagnoses, and to assign those opinions appropriate weight. *See Westmoreland Coal Co. v. Cochran*, 718 F.3d 319, 324 (4th Cir. 2013) (Traxler, C.J., dissenting); *Hicks*, 138 F.3d at 533; *Akers*, 131 F.3d at 441. Employer's arguments are essentially a request for a reweighing of the evidence, which the Board is not empowered to do. *Anderson v. Valley Camp of Utah, Inc.*, 12 BLR 1-111, 1-113 (1989). Because it is supported by substantial evidence, we affirm the administrative law judge's finding that claimant established the existence of legal pneumoconiosis through the medical opinion of Dr. Saludes, pursuant to 20 C.F.R. §718.202(a)(4).[6] We also affirm the administrative law judge's determination that all the relevant evidence weighed together established legal pneumoconiosis by a preponderance of the evidence. *See Compton*, 211 F.3d at 210-11; Decision and Order at 19.

II. Total Disability

A miner is considered totally disabled if his pulmonary or respiratory impairment, standing alone, prevents him from performing his usual coal mine work. *See* 20 C.F.R. §718.204(b)(1). A claimant may establish total disability based on pulmonary function studies, arterial blood gas studies, evidence of cor pulmonale with right-sided congestive heart failure, or medical opinions. 20 C.F.R. §718.204(b)(2)(i)-(iv). The administrative law judge must consider all of the relevant evidence and weigh the evidence supporting a finding of total disability against the contrary evidence. *See Rafferty v. Jones & Laughlin Steel Corp.*, 9 BLR 1-231, 1-232 (1987); *Shedlock v. Bethlehem Mines Corp.*, 9 BLR 1-195, 1-198 (1986), *aff'd on recon.*, 9 BLR 1-236 (1987) (en banc).

The administrative law judge found that claimant failed to establish total disability based on the arterial blood gas study evidence pursuant to 20 C.F.R. §718.204(b)(2)(ii), but established total disability based on the pulmonary function study and medical opinion evidence at 20 C.F.R. §718.204(b)(2)(i), (iv).[7] Decision and Order at 6-13. Employer

[6] Because the administrative law judge provided valid bases for discrediting the opinions of Drs. Basheda and Spagnolo on the issue of legal pneumoconiosis, we need not address employer's remaining arguments regarding the weight she accorded their opinions. *See Kozele v. Rochester & Pittsburgh Coal Co.*, 6 BLR 1-378, 1-382-83 n.4 (1983).

[7] The administrative law judge also found that claimant failed to establish total disability pursuant to 20 C.F.R. §718.204(b)(2)(iii). Decision and Order at 6 n.6.

contends that the administrative law judge erred in weighing the pulmonary function study and medical opinion evidence.

Pursuant to 20 C.F.R. §718.204(b)(2)(i), the administrative law judge considered the results of two pulmonary function studies, dated August 20, 2014 and November 11, 2015. Decision and Order at 6-8; Director's Exhibits 10-11. Before determining whether the pulmonary function studies were qualifying[8] for total disability, she noted a discrepancy in the measurements of claimant's height, which was measured as 70.5 inches on the August 20, 2014 study and as 70 inches on the November 11, 2015 study. Decision and Order at 7. The administrative law judge resolved the evidentiary conflict by relying on the most recent height measurement of 70 inches.[9] *Id.* The administrative law judge then applied the closest height listed in the table at 20 C.F.R. Part 718, Appendix B, which she noted was 70.1 inches. Decision and Order at 7 n.9.

Based on claimant's age and height, the administrative law judge correctly found that the August 20, 2014 pulmonary function study produced qualifying results before the administration of a bronchodilator and non-qualifying results after the administration of a bronchodilator, while the November 11, 2015 pulmonary function study produced non-qualifying results both pre-bronchodilator and post-bronchodilator.[10] Decision and Order

[8] A "qualifying" pulmonary function study yields values for claimant's applicable height and age that are equal to or less than the values specified in the table at 20 C.F.R. Part 718, Appendix B. A non-qualifying study exceeds these values. *See* 20 C.F.R. §718.204(b)(2)(i).

[9] Employer does not challenge the administrative law judge's finding regarding claimant's height. The finding is therefore affirmed. *See Skrack v. Island Creek Coal Co.*, 6 BLR 1-710, 1-711 (1983).

[10] The administrative law judge accurately determined the qualifying and non-qualifying status of the values obtained in both studies, using claimant's age at the time each study was conducted (67 and 68, respectively), in a table set forth in her decision. Decision and Order at 7. As employer notes, however, when the administrative law judge discussed the studies in the text of her decision, she also referenced qualifying values for claimant's age at the time of the hearing (70). *Id.* The regulations require the administrative law judge to assess whether the pulmonary function studies are qualifying based on claimant's age when the studies were conducted. *See* 20 C.F.R. §718.204(b)(2)(i). Any error by the administrative law judge in referring to claimant's age at the time of the hearing is harmless, because she correctly determined that the August 20, 2014 study was qualifying in its pre-bronchodilator value only, and that the November 11,

at 7. She then concluded that "[c]laimant's pulmonary function studies support a finding of total disability." *Id*. at 8.

Employer argues that the administrative law judge did not adequately set forth her rationale for resolving the conflicting evidence. Employer's Brief at 8-10. We agree. The administrative law judge did not explain how she determined that the two pulmonary function studies supported a finding of total disability. As the administrative law judge found, the August 20, 2014 pulmonary function study was qualifying pre-bronchodilator and non-qualifying post-bronchodilator, while the November 11, 2015 pulmonary function study was non-qualifying both pre-bronchodilator and post-bronchodilator. Where the record contains mixed pre-bronchodilator and post-bronchodilator results such as these, the administrative law judge must weigh all of the pulmonary function study values and explain which results she credits and why she credits them. *See Morrison v. Tenn. Consol. Coal Co.*, 644 F.3d 473, 480-81 (6th Cir. 2011); *Keen v. Jewell Ridge Coal Corp.*, 6 BLR 1-454, 1-459 (1983). The administrative law judge set forth no such analysis at 20 C.F.R. §718.204(b)(2)(i). Later in her decision, when weighing the medical opinions, she explained that she did not find the non-qualifying, post-bronchodilator pulmonary function study results to be "persuasive."[11] Decision and Order at 12. However, even if that later finding meant that the administrative law judge accorded the non-qualifying, post-bronchodilator results less weight than the pre-bronchodilator results at 20 C.F.R. §718.204(b)(2)(i), it would not explain how she resolved the conflict between the qualifying and non-qualifying pre-bronchodilator results of the two studies. Decision and Order at 7-8.

Therefore, the administrative law judge's decision does not comply with the Administrative Procedure Act (APA), which requires that every adjudicatory decision be accompanied by a statement of "findings and conclusions, and the reasons or basis therefor, on all the material issues of fact, law, or discretion presented. . . ." 5 U.S.C. §557(c)(3)(A), as incorporated into the Act by 30 U.S.C. §932(a); *see Wojtowicz v. Duquesne Light Co.*, 12 BLR 1-162, 1-165 (1989). We must therefore vacate the administrative law judge's finding of total disability pursuant to 20 C.F.R. §718.204(b)(2)(i). On remand, the

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2015 study was non-qualifying in both its pre-bronchodilator and post-bronchodilator values. *See Larioni v. Director, OWCP*, 6 BLR 1-1276, 1-1278 (1984).

[11] When weighing Dr. Basheda's opinion that claimant is not totally disabled at 20 C.F.R. §718.204(b)(2)(iv), the administrative law judge found that Dr. Basheda's reliance on post-bronchodilator pulmonary function study results to reach that conclusion was not persuasive, because the Department of Labor has recognized that the use of a bronchodilator does not provide an adequate assessment of disability. Decision and Order at 12, *citing* 45 Fed. Reg. 13,678, 13,682 (Feb. 29, 1980).

administrative law judge must reconsider whether the pulmonary function study evidence establishes total disability pursuant to 20 C.F.R. §718.204(b)(2)(i), and fully explain her basis for resolving the conflict in this evidence. *See Wojtowicz*, 12 BLR at 1-165.

Employer next argues that the administrative law judge erred in her consideration of the medical opinion evidence pursuant to 20 C.F.R. §718.204(b)(2)(iv). The administrative law judge initially found that claimant's usual coal mine employment "was that of a roof bolter" and that this job required "heavy labor."[12] Decision and Order at 4. The administrative law judge then considered the medical opinion of Dr. Saludes that claimant is totally disabled by a respiratory or pulmonary impairment and the medical opinion of Dr. Basheda that claimant is not totally disabled.[13] Decision and Order at 9-13.

The administrative law judge found that Dr. Basheda's opinion was unpersuasive because he relied on post-bronchodilator testing to opine that claimant is not totally disabled. Decision and Order at 12. Therefore, she assigned his opinion "less weight." *Id*. She found that Dr. Saludes's opinion was entitled to "no more than average weight," but more weight than Dr. Basheda's opinion, because it was based on a qualifying pulmonary function study, along with claimant's symptoms and history, and because Dr. Saludes set forth "which factors brought him to the conclusion of total disability." *Id*. at 12-13.

Employer challenges the administrative law judge's decision to credit Dr. Saludes's opinion. Employer's Brief at 12-13. Because the administrative law judge relied on her erroneous weighing of the pulmonary function study evidence to conclude that Dr. Saludes's opinion established total respiratory or pulmonary disability at 20 C.F.R. §718.204(b)(2)(iv), we must vacate her finding that this medical opinion was sufficiently credible to establish total disability, and remand the case to the administrative law judge for further consideration of this evidence.

We reject, however, employer's argument that the administrative law judge failed to provide a valid reason for according less weight to Dr. Basheda's opinion. Employer's Brief at 13-14. Dr. Basheda opined that claimant's August 20, 2014 pulmonary function

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[12] Specifically, the administrative law judge noted that claimant was required to carry rock dust, stand for eight hours, and lift and carry five to fifty pounds "various times per day" as a roof bolter. Decision and Order at 4. Because employer does not challenge the finding that claimant's usual coal mine employment required "heavy labor," it is affirmed. *See Skrack*, 6 BLR at 1-711.

[13] The administrative law judge found that Dr. Spagnolo did not address whether claimant is totally disabled and, therefore, accorded his opinion no weight. Decision and Order at 12. Because this finding is unchallenged, it is affirmed. *See Skrack*, 6 BLR at 1-711.

study demonstrated a moderate airway obstruction without an acute bronchodilator response. Director's Exhibit 11 at 12. He further noted that the November 11, 2015 pulmonary function study evidenced a reduced FEV1/FVC ratio of 0.63 pre-bronchodilator. *Id*. at 5-6. However, because the FEV1/FVC ratio on this more recent study "normalized" to a ratio of 0.72 after the administration of a bronchodilator, he opined that claimant has no significant pulmonary impairment. *Id*. at 12-13. In his deposition, Dr. Basheda stated that if claimant is "appropriately and aggressively treated, he has normal pulmonary function" and is not totally disabled. Employer's Exhibit 12 at 31.

The administrative law judge noted that Dr. Basheda did not address whether claimant is, in fact, being "appropriately and aggressively treated such that he is unimpaired, despite the qualifying pre-bronchodilator results with Dr. Saludes and the low pre-bronchodilator results with Dr. Basheda." Decision and Order at 12. The administrative law judge also recognized that the Department of Labor has cautioned against reliance on post-bronchodilator results in determining total disability because "the use of a bronchodilator does not provide an adequate assessment of the miner's disability, [although] it may aid in determining the presence or absence of pneumoconiosis." 45 Fed. Reg. 13,678, 13,682 (Feb. 29, 1980); Decision and Order at 12. Contrary to employer's argument, because Dr. Basheda relied on post-bronchodilator testing, the administrative law judge permissibly found his opinion unpersuasive. *See Hicks*, 138 F.3d at 533; *Akers*, 131 F.3d at 441; Decision and Order at 12.

On remand, the administrative law judge should reconsider Dr. Saludes's opinion at 20 C.F.R. §718.204(b)(2)(iv), after she has explained her resolution of the conflict in the pulmonary function study evidence. Moreover, the administrative law judge should address whether Dr. Saludes's opinion establishes that claimant is unable to perform his usual coal mine employment, regardless of whether she finds that the pulmonary function study evidence standing alone establishes total disability. Even if total disability cannot be established at 20 C.F.R. §718.204(b)(2)(i), "total disability may nevertheless be found if a physician exercising reasoned medical judgment, based on medically acceptable clinical and laboratory diagnostic techniques, concludes that a miner's respiratory or pulmonary condition prevents" him from performing his usual coal mine employment. 20 C.F.R. §718.204(b)(2)(iv). Further, a medical opinion may support a finding of total disability if it provides sufficient information from which the administrative law judge can reasonably infer that a miner is unable to do his last coal mine job. *See Scott v. Mason Coal Co*., 60 F.3d 1138, 1142 (4th Cir. 1995); *see also Poole v. Freeman United Coal Mining Co.*, 897 F.2d 888, 894 (7th Cir. 1990); *McMath v. Director, OWCP*, 12 BLR 1-6, 1-9 (1988). As discussed above, the administrative law judge found that claimant established that his usual coal mine employment was that of a roof bolter, and that this position required "heavy labor." Decision and Order at 4.

In weighing Dr. Saludes's opinion, the administrative law judge should address the physician's credentials, the explanations for his conclusion, the documentation underlying his medical judgment, and the sophistication of, and bases for, his opinion. *See Hicks*, 138 F.3d at 533; *Akers*, 131 F.3d at 441. The administrative law judge is instructed to set forth her credibility findings on remand in detail, including the underlying rationale for her decision, as required by the APA. *See Wojtowicz*, 12 BLR at 1-165.

III. Conclusion

In light of our decision to vacate the administrative law judge's finding that the evidence established total disability at 20 C.F.R. §718.204(b)(2), we also vacate the administrative law judge's finding that claimant established total disability due to pneumoconiosis at 20 C.F.R. §718.204(c). Thus, we also vacate the award of benefits. If, on remand, the administrative law judge finds that claimant has established total disability due to pneumoconiosis at 20 C.F.R. §718.204(b)(2), (c), she may reinstate the award of benefits. If the administrative law judge finds that total disability or total disability due to pneumoconiosis is not established, she must deny benefits, as claimant will have failed to establish an essential element of entitlement. *See Anderson*, 12 BLR at 1-112.

Accordingly, the administrative law judge's Decision and Order Awarding Benefits is affirmed in part and vacated in part, and the case is remanded to the administrative law judge for further consideration consistent with this opinion.

SO ORDERED.

BETTY JEAN HALL, Chief
Administrative Appeals Judge

RYAN GILLIGAN
Administrative Appeals Judge

JONATHAN ROLFE
Administrative Appeals Judge