

U. S. DEPARTMENT OF LABOR

Employees' Compensation Appeals Board

In the Matter of DONALD J. PROCTOR and DEPARTMENT OF COMMERCE,
OFFICE OF EMPLOYEE RELATIONS, Washington, D.C.

*Docket No. 96-982; Submitted on the Record;
Issued January 28, 1998*

DECISION and ORDER

Before MICHAEL J. WALSH, GEORGE E. RIVERS,
DAVID S. GERSON

The issue is whether appellant has established that his bilateral foot condition is causally related to factors of his federal employment.

The Board has duly reviewed the case record and concludes that appellant has not met his burden of proof in this case.

In the present case, appellant, a peripheral equipment operator, filed an occupational disease claim form on July 20, 1995 stating that he became aware in January 1982 that standing and walking constantly at work aggravated his pes plantar bilateral foot condition, for which he received Veterans Administration (VA) disability benefits. The record indicates that as of February 1, 1994 appellant's foot condition was rated as a 50 percent disability by the VA. Appellant accepted an employing establishment retirement buyout in October 1994. The record substantiates that appellant sought regular treatment from the VA for his foot condition. Although requested by the Office of Workers' Compensation Programs to submit rationalized medical evidence from his treating physician, discussing the causal relationship of his condition to his federal employment, the only medical report of record which addresses the issue of causal relationship is a report dated October 6, 1995 from Dr. Charles Shuman, Chief of Podiatry at the Department of Veterans Affairs. The Office denied appellant's claim by decision dated December 19, 1995.

In his report dated October 6, 1995, Dr. Shuman related that appellant had a service-related disability of 50 percent for chronic *pes planus* bilaterally with hyperkeratosis and metatarsalgia. He noted "this has been made worse by episodes of prolonged standing and walking." Dr. Shuman further indicated that appellant had hammertoes of both feet. Regarding appellant's work, Dr. Shuman stated that appellant was required to work on his feet, however, his *pes planus* prevented him from prolonged walking or standing, and appellant was unable to continue in his job as long as he was required to stand for hours. Dr. Shuman noted that appellant had related that he was unable to stand or walk for more than 10 minutes without

sitting. Dr. Shuman concluded: “His disability is permanent. ‘You have requested that a statement be made as to whether aggravation is temporary or permanent.’ I do not know how I can more clearly state that appellant’s disability is permanent. The pain he experiences is temporary, as if he sits the pain is relieved. The Department of Veterans Affairs has rated appellant to have a permanent disability. If this does not answer your questions adequately I suggest you obtain an independent medical opinion.”

The evidence required to establish causal relationship, generally, is rationalized medical opinion evidence. Rationalized medical opinion evidence is medical evidence which includes a physician’s rationalized opinion on the issue of whether there is a causal relationship between the claimant’s diagnosed 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.¹ While Dr. Shuman noted that appellant’s preexisting foot condition had been “made worse” by prolonged periods of walking and standing, he did not indicate an awareness of appellant’s employment duties and how much walking and standing was required by such, nor did Dr. Shuman address with medical rationale how physiologically walking and standing would aggravate the preexisting condition.

The Board has held that a physician’s opinion is not dispositive simply because it is offered by a physician.² To be of probative value to appellant’s claim, the physician must provide a proper factual background and must provide medical rationale which explains the medical issue at hand, be that whether the current condition is disabling or whether the current condition is causally related to the accepted employment injury. Where no such rationale is present, the medical opinion is of diminished probative value.

Furthermore, while Dr. Shuman was requested to address whether any employment aggravation of appellant’s condition would be permanent or temporary, he only noted that while appellant’s preexisting condition was permanent, his pain caused by walking or standing was temporary in nature and would be relieved by sitting. Dr. Shuman offered no medical explanation as to how appellant’s federal employment permanently or temporarily aggravated the preexisting condition. In order to determine whether appellant’s employment temporarily or permanently aggravated his underlying conditions, and the extent and degree of any disability which may have resulted from such aggravation, a rationalized medical opinion must include a discussion of: the nature of the underlying conditions, their natural or traditional course; how the underlying conditions may have been affected by appellant’s employment as determined by medical records covering the period of employment; whether such affects, if any, caused material changes in the underlying conditions; or, if no material changes occurred, would the symptoms or changes indicative of a temporary aggravation have subsided or resolved immediately upon appellant’s removal from the stressful employment environment and, if not, at what point would such symptoms or changes have resolved; and whether any aggravation of

¹ Gary L. Fowler, 45 ECAB 365 (1994).

² See Michael Stockert, 39 ECAB 1186 (1988).

appellant's underlying conditions caused by factors of his employment caused disability during or subsequent to appellant's employment.³ As Dr. Shuman failed to address these issues, his report is of limited probative medical value.

The decision of the Office of Workers' Compensation Programs dated December 19, 1995 is hereby affirmed.

Dated, Washington, D.C.
January 28, 1998

Michael J. Walsh
Chairman

George E. Rivers
Member

David S. Gerson
Member

³ *Newton Ky Chung*, 39 ECAB 919 (1988).