

U. S. DEPARTMENT OF LABOR

Employees' Compensation Appeals Board

In the Matter of JOSPEH A. GORDON and DEPARTMENT OF THE NAVY,
NAVAL TELECOMMUNICATIONS CENTER, Treasure Island, Calif.

*Docket No. 96-530; Submitted on the Record;
Issued March 6, 1998*

DECISION and ORDER

Before MICHAEL J. WALSH, GEORGE E. RIVERS,
WILLIE T.C. THOMAS

The issue is whether appellant has established that his coronary artery disease and angina were causally related to employment factors.

The Board has reviewed the case record and finds that the medical evidence is insufficient to meet appellant's burden of proof in establishing that his heart condition was caused by work factors.

An employee seeking benefits under the Federal Employees' Compensation Act¹ has the burden of establishing 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 the Act, that the claim was filed within the applicable time limitation of the Act, that an injury² was sustained 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.³ These are the essential elements of each and every compensation claim regardless of whether the claim is predicated upon a traumatic injury or occupational disease.⁴

In an occupational disease claim such as this, claimant must submit: (1) medical evidence establishing the existence of the disease or condition for which compensation is

¹ 5 U.S.C. § 8101 *et seq.* (1974).

² Section 8101(5) of the Act defines "injury" in relevant part as follows: "'injury' includes, in addition to injury by accident, disease proximately caused by employment...." Section 10.5(a)(14) of Title 20 of the Code of Federal Regulations further defines "injury" in relevant part as follows: "'Injury' means a wound or condition of the body induced by accident or trauma, and includes a disease or illness proximately caused by the employment for which benefits are provided under the Act."

³ *Elaine Pendleton*, 40 ECAB 1143, 1145 (1989).

⁴ *Daniel J. Overfield*, 42 ECAB 718, 721 (1991).

claimed, (2) a factual statement identifying employment factors alleged to have caused or contributed to the disease, and (3) medical evidence establishing that the employment factors were the proximate cause of the disease or, stated differently, medical evidence establishing that the diagnosed condition is causally related to the employment factors identified by claimant.⁵

Section 10.5(a)(16)⁶ defines an occupational disease or illness as “a condition produced in the work environment over a period longer than a single workday or work shift by such factors as systemic infection; continued or repeated stress or strain; or exposure to hazardous elements...” In claims not based on a specific incident, appellant must submit sufficient evidence to identify fully the particular work factors alleged to have caused the disease or condition and to show that he or she was exposed to the factors claimed; thus, appellant bears the burden of proving that work was performed under the specific factors at the time, in the manner, and to the extent alleged.⁷ While appellant’s condition need not be caused by a specific injury or incident, or an unusual amount of stress or exertion,⁸ appellant must submit medical evidence diagnosing a specific disease or condition and explaining how identified employment factors have inflicted injury.⁹

The medical evidence required is generally rationalized medical opinion evidence which includes a physician’s opinion of reasonable medical certainty based on a complete factual and medical background of the claimant and supported by medical rationale explaining the nature of the relationship between the diagnosed condition and the specific employment factors identified by claimant.¹⁰ Neither the fact that appellant’s condition became apparent during a period of employment nor appellant’s belief that the condition was caused by his employment is sufficient to establish a causal relationship.¹¹

In this case, appellant, then a 62-year-old communications operator, filed a notice of occupational disease on March 22, 1994, claiming that his heart condition and high blood pressure were aggravated by the atmosphere in the windowless office in which he worked, and that each time the air conditioner was turned off, he experienced dizziness and had trouble breathing.

On May 4, 1994 the Office of Workers’ Compensation Programs informed appellant that the evidence was insufficient to establish his claim, and on May 23, 1994 the Office asked appellant to furnish additional factual and medical information, including a detailed statement of work factors he believed caused his cardiac condition and a rationalized medical opinion.

⁵ *Jerry D. Osterman*, 46 ECAB 500 (1995); *Victor J. Woodhams*, 41 ECAB 345, 352 (1989).

⁶ 20 C.F.R. § 10.5(a)(16).

⁷ Federal (FECA) Procedure Manual, Part 2 -- Claims, *Development of Claims*, Chapter 2.800.3 (April 1993).

⁸ *George A. Johnson*, 43 ECAB 712, 716 (1992).

⁹ *Judith A. Peot*, 46 ECAB 1036 (1995).

¹⁰ *Victor J. Woodhams*, *supra* note 5.

¹¹ *Kathryn Haggerty*, 45 ECAB 383, 389 (1994).

Appellant responded by elaborating on the air conditioning problem at work and stating that he was at work on December 3, 1990 when his heart attack occurred. He submitted hospital records of his quadruple coronary bypass operation on January 10, 1991.

In a letter dated November 29, 1993, Dr. Remo L. Morelli, Board-certified in internal medicine, who had treated appellant for a cardiac problem for six months, stated that appellant had been bothered recently by chest pains and palpitations, including dizziness, and that all these symptoms had occurred at work. Dr. Morelli added that appellant related his symptoms to the emotional stress brought on by his relocation to Treasure Island on October 3, 1993.

On June 28, 1994 the Office denied the claim on the grounds that appellant did not develop a cardiac condition in the performance of duty. The Office noted that the medical evidence failed to establish that appellant's heart condition was related to any work factors.

Appellant requested an oral hearing, which was held on February 28, 1995. Appellant testified that he had retired when the base was closed and was now drawing social security benefits. He added that he had complained many times about the air conditioning unit being turned off when he was the only person working. Appellant stated that the harassment and aggravation contributed to his heart condition.

In a decision dated November 13, 1995, the hearing representative denied the claim on the grounds that appellant had failed to establish that his cardiac condition was causally related to employment factors. The hearing representative noted that appellant had not submitted any medical evidence supporting a causal connection between his diagnosed heart disease and specific work factors.

The Board finds that the medical evidence fails to establish the required causal nexus between appellant's cardiac condition and work factors. While appellant believed that his work environment contributed to his heart problems and Dr. Morelli's report reiterated appellant's belief, the record contains no medical opinion explaining how specific work factors aggravated appellant's condition.¹² Dr. Morelli failed to mention any specific work factors that caused any cardiac disease.¹³

The Office explained to appellant that the fact that his myocardial infarction in 1990 began at work did not mean that work factors caused the attack. Further, the physician who performed the bypass surgery stated that factors contributing to appellant's coronary disease included smoking, high cholesterol, hypertension, and family history of cardiac problems. While appellant may have been bothered by the air conditioning problem at work, a personal reaction to working in a particular environment is not a compensable work factor under the Act.¹⁴

¹² See *Jean Culliton*, 47 ECAB ____ (Docket No. 94-1326, issued August 26, 1996) (finding that a physician's opinion on causal relationship is not dispositive simply because it is rendered by a physician).

¹³ See *Robert J. Krstyen*, 44 ECAB 227, 230 (1992) (finding that appellant failed to submit sufficient medical evidence to establish that specific work factors caused or aggravated his back condition).

¹⁴ See *Thomas S. Miceli*, 40 ECAB 1322, 1331 (1989) (finding that appellant's personal reaction to the lack of air

The November 13, 1995 decision of the Office of Workers' Compensation Programs is affirmed.

Dated, Washington, D.C.
March 6, 1998

Michael J. Walsh
Chairman

George E. Rivers
Member

Willie T.C. Thomas
Alternate Member

conditioning in his office was insufficient, absent medical evidence, to establish that his skin problems were related to his employment).