

U. S. DEPARTMENT OF LABOR

Employees' Compensation Appeals Board

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In the Matter of DAVID A. SIRACUSA and U.S. POSTAL SERVICE,  
POST OFFICE, Auburn, NY

*Docket No. 98-2026; Submitted on the Record;  
Issued February 23, 2000*

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DECISION and ORDER

Before MICHAEL J. WALSH, MICHAEL E. GROOM,  
BRADLEY T. KNOTT

The issue is whether the Office of Workers' Compensation Programs properly terminated appellant's medical benefits effective April 22, 1998.

On February 28, 1981 appellant, then a 37-year-old letter carrier, filed a notice of traumatic injury and claim, alleging that he sustained an injury to his right knee. He stopped work on March 4, 1981 and returned to work on March 7, 1981. The Office accepted appellant's claim for right knee strain and a tear of the posterior horn of the medial meniscus. Appellant filed several claims for recurrence of disability beginning between December 15, 1987 and December 28, 1990. On May 25, 1995 he filed a claim for recurrence of disability beginning April 6, 1995. On September 20, 1995 appellant filed another claim for recurrence of disability beginning August 10, 1995. He returned to work on August 11, 1995 working four hours a day. However, by September 26, 1996, appellant was working eight hours a day casing mail, delivering mail on mounted routes, filing work, performing express delivery and answering phones. On February 12, 1996 he requested authorization for arthroscopic surgery. On March 11, 1996 the Office authorized arthroscopic surgery to repair the torn medial meniscus in appellant's right knee. On May 1, 1996 the Office authorized arthroscopic surgery and a subtotal menisectomy of appellant's left knee. On October 9, 1996 appellant returned to limited-duty work. By decision dated March 26, 1998 and reissued April 22, 1998, the Office terminated appellant's medical benefits on the grounds that he was no longer being treated for injuries related to his February 28, 1981 employment injury.

The Board has duly reviewed the entire case record on appeal and finds that the Office properly terminated appellant's medical benefits.

Once the Office accepts a claim, it has the burden of justifying termination or modification of compensation.<sup>1</sup> After it has been determined that an employee has disability

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<sup>1</sup> *Mohamed Yanis*, 42 ECAB 325 (1991).

causally related to his or her federal employment, the Office may not terminate compensation without establishing that the disability has ceased or that it is no longer related to the employment. To terminate authorization for medical treatment, the Office must establish that the treatment cannot cure appellant's condition, provide relief or reduce the degree of disability as provided for under section 8103 of the Federal Employees' Compensation Act.<sup>2</sup>

Section 8103(a) of the Act provides for furnishing to an injured employee "the services, appliances and supplies prescribed by a qualified physician" which the Office "considers likely to cure, give relief, reduce the degree or the period of disability, or aid in lessening the amount of monthly compensation."<sup>3</sup> The Board has found that the Office has great discretion in determining whether a particular type of treatment is likely to cure or give relief.<sup>4</sup>

In the present case, the Office terminated appellant's medical benefits on the grounds that he was no longer receiving medical treatment in relation to residuals of his accepted February 28, 1981 employment injury. In a letter dated February 13, 1997, the Office requested additional information from Dr. R.C. Traver, Jr., an orthopedist and appellant's treating physician, including objective evidence that demonstrated that appellant was incapable of performing his regular duties as a carrier, information concerning whether his medical restrictions should be made permanent, and when appellant would reach his maximum medical improvement. Dr. Traver responded that appellant was recovering at a slow rate and would eventually return to his usual employment. He noted arthroscopic surgery in both knees and significant degenerative osteoarthritis along with appellant's meniscal tears. In an office note dated November 24, 1997, Dr. Traver noted that appellant was having significant problems at work due to occasional back spasms and that his work indoors had produced more back symptoms. He indicated that he would like to see appellant on a periodic basis and, depending on how appellant was being treated at work, he would reassess the need for more forms to be filled out. On the insurance form of the same date, Dr. Traver provided a diagnosis of degenerative joint disease in both knees. Thus, Dr. Traver essentially found that appellant's need for restrictions and continuing problems were related to his back problems and degenerative joint disease nonaccepted conditions in this case, and did not relate appellant's condition to his accepted knee conditions or residuals therefrom. In addition, he indicated that he would see appellant on an as needed basis and did not prescribe ongoing medical treatment for appellant's work-related conditions. The Office referred appellant to Dr. Anthony J. Nastasi, a Board-certified orthopedic surgeon for a second opinion examination and report. By report dated May 22, 1997, Dr. Nastasi indicated that examinations of appellant's knees were negative bilaterally with the abnormal findings being a limited range of motion that was believed to be due to osteoarthritic changes. Dr. Nastasi reported that appellant did not exhibit any evidence of knee sprain or medial meniscus tear and could work in relation to his accepted knee conditions. However, due to nonrelated arthritis involving all three compartments of his right and left knees, appellant might have some difficulty in the future carrying out his regular duties. The report by

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<sup>2</sup> 5 U.S.C. § 8103(a).

<sup>3</sup> *Id.*

<sup>4</sup> *James F. Archie*, 42 ECAB 180 (1991); *William E. Gay*, 38 ECAB 599 (1987).

Dr. Nastasi is a well-reasoned and rationalized report which clearly indicates that appellant does not have any continuing disability that is causally related to his accepted employment injuries. Therefore, the medical evidence from both Drs. Traver and Nastasi established that appellant no longer required medical treatment for his accepted employment injuries, and the Office properly terminated medical treatment.

The decision of the Office of Workers' Compensation Programs dated March 26, 1998 and reissued April 22, 1998 is hereby affirmed.

Dated, Washington, D.C.  
February 23, 2000

Michael J. Walsh  
Chairman

Michael E. Groom  
Alternate Member

Bradley T. Knott  
Alternate Member