U. S. DEPARTMENT OF LABOR

Employees' Compensation Appeals Board

In the Matter of WILLA M. FRAZIER and DEPARTMENT OF VETERANS AFFAIRS, VETERANS ADMINISTRATION MEDICAL CENTER, Brecksville, OH

Docket No. 00-368; Submitted on the Record;
Issued January 12, 2001

DECISION and ORDER

Before DAVID S. GERSON, WILLIE T.C. THOMAS,
A. PETER KANJORSKI

The issue is whether appellant sustained an injury while in the performance of her duties.

On August 11, 1998 appellant, an office automation assistant, filed a claim asserting that her bilateral retrocalcaneal bursitis, Achilles tendinitis and tenosynovitis conditions were the result of her federal employment. She stated that she was working in the supply department at the time and there was an awful lot of walking, going back and forth on the floors, standing, cleaning surgical instruments, taking inventory, filling orders, taking them back to the floor and putting supplies up when they came in.[1]

On her claim form, appellant stated that it was on July 31, 1997 that she first realized that the disease or illness was caused or aggravated by her employment. She explained that she did not file her claim within 30 days of July 31, 1997 because she had hurt her knees in 1993 and the doctors wanted to concentrate on treating that part of her body. In the meantime, she stated, her feet got worse. She stopped work on September 16, 1997.

Appellant supported her claim with an opinion from her attending orthopedic surgeon, Dr. James J. Sferra, who completed a form report indicating with an affirmative mark that appellant's diagnosed conditions were caused or aggravated by employment activity.

The employing establishment advised that appellant had been in a mostly sedentary position since 1993, when she fell to her knees and required knee surgery. A position

[1] The record shows that appellant previously implicated her duties as a medical supply technician in a claim filed on April 1, 1989. She asserted in that claim that she was constantly on her feet all day and that her feet became so sore while stocking the floors with medical supplies that she had to seek medical attention. In a decision dated August 31, 1989, the Office of Workers' Compensation Programs denied this claim because appellant failed to submit a reasoned medical opinion attributing her condition to her federal employment.

description for office automation assistant stated that the work is mostly sedentary "however some walking, bending and stooping are needed."

On September 11, 1998 the Office requested that appellant clarify the apparent discrepancy between her account of excessive walking and the employing establishment's description of a mostly sedentary position. The Office advised that, if her doctor felt that exposure of incidents in her federal employment contributed to her condition, he should provide an explanation of how such exposure contributed.

The Office received an October 16, 1998 form report from Dr. Robert Dushin, a podiatrist, who noted that appellant began to have recurrent bilateral heel pain about May 1997. He indicated that this was an old injury. After diagnosing residual posterior heel pain and Achilles tendinitis, Dr. Dushin indicated with an affirmative mark that this condition was caused or aggravated by employment activity.

In a decision dated November 16, 1998, the Office denied appellant's claim on the grounds that the medical evidence was insufficient to establish that her condition was caused by her employment.

Appellant requested a hearing before an Office hearing representative. She submitted a June 2, 1999 report from Dr. Sferra. In relating appellant's history, Dr. Sferra explained that it was evident that appellant had a chronic overuse syndrome many years in development. He noted that after surgical intervention in 1997 appellant developed increased symptoms over time. When he last saw her on April 17, 1999 she was continuing to have significant bilateral posterior heel pain at the Achilles sites with increased heterotopic ossification and calcification in the distal Achilles regions despite her being minimally active on her feet. Dr. Sferra reported that appellant was a "spur former" and, therefore, further surgical debridement would merely result in a recurrence of her problem. He offered the following opinion:

> "I have certainly seen this condition in many individuals. The majority of them seem to work on hard floors in a job which requires them to sit and stand repetitively throughout the day. [Appellant's] job description certainly seems to fit this criteria. As a result, I do feel that there is a causal relationship between her medical condition and her job activities. Most likely, she had a chronic underlying condition which was exacerbated/aggravated by her work activities."

Appellant submitted an August 1, 1989 memorandum from Geary Hughes, Chief, S.P.D. Section, who stated as follows:

> "The statement signed by [appellant] (no date) is factual to the best of my knowledge. Work in S.P.D. does require standing and walking on hard floors. Lifting (possibly up to twenty-five pounds) is also part of a Medical Supply Technician's normal duties as indicated in the position description (attached)."

At the hearing, which was held on June 6, 1999, appellant appeared and testified.

In a decision dated August 18, 1999, the hearing representative found that appellant failed to establish that she sustained an injury in the performance of duty as claimed. Noting that appellant claimed that walking on the job from 1994 to 1996 aggravated her foot condition, the hearing representative found that the evidence of record established that appellant performed sedentary duties beginning in 1993. The hearing representative further found that the evidence failed to demonstrate that appellant was required to stand repetitively.

The Board finds that the evidence of record is insufficient to establish that appellant sustained an injury while in the performance of her duties.

An employee seeking benefits under the Federal Employees' Compensation Act[2] has the burden of proof to establish the essential elements of her claim. When an employee claims that she sustained an injury in the performance of duty, she must submit sufficient evidence to establish that she experienced a specific event, incident or exposure occurring at the time, place and in the manner alleged. She must also establish that such event, incident or exposure caused an injury.[3]

In this case, appellant asserts that her condition started in 1979 when she worked in the supply department. She stated that her job at that time entailed a lot of walking, going up to the floors, conducting inventories and coming back down. She stated that she worked on concrete floors. This is a repetition of her previous claim, filed on April 1, 1989. In that claim appellant implicated her duties as a medical supply technician. She asserted that she was constantly on her feet all day and that her feet became so sore while stocking the floors with medical supplies that she had to seek medical attention. In a decision dated August 31, 1989, the Office denied the claim because appellant failed to submit a reasoned medical opinion.

Appellant claims, nonetheless, that after she hurt her knees and started light duty she continued to do a lot of walking until 1997. The employing establishment advised, however, that appellant had been in a mostly sedentary position since 1993, when she fell onto her knees and required knee surgery. Further, the position description for office automation assistant states that the work is mostly sedentary "however some walking, bending and stooping are needed." Accordingly, to establish her present claim she must establish that her bilateral retrocalcaneal bursitis, Achilles tendinitis and tenosynovitis conditions were caused or aggravated by the mostly sedentary duties she performed since 1993.

Causal relationship is a medical issue,[4] and the medical evidence generally required to establish causal relationship is rationalized medical opinion evidence. Rationalized medical opinion evidence is medical evidence that includes a physician's rationalized opinion on whether there is a causal relationship between the claimant's diagnosed condition and the established

[2] 5 U.S.C. §§ 8101-8193.

[3] *See generally John J. Carlone*, 41 ECAB 354 (1989); *Abe E. Scott*, 45 ECAB 164 (1993); *see also* 5 U.S.C. § 8101(5) ("injury" defined); 20 C.F.R. §§ 10.5(a)(15)-.5(a)(16) ("traumatic injury" and "occupational disease or illness" defined).

[4] *Mary J. Briggs*, 37 ECAB 578 (1986).

incident or factor of employment. The opinion of the physician must be based on a complete factual and medical background of the claimant,[5] must be one of reasonable medical certainty[6] and must be supported by medical rationale explaining the nature of the relationship between the diagnosed condition and the established incident or factor of employment.[7]

Appellant has submitted medical opinion evidence to support her claim, but this evidence is insufficient to establish the element of causal relationship. The form reports completed by Drs. Sferra and Dushin are of little probative value. The Board has held that when a physician's opinion on causal relationship consists only of checking "yes" to a form question, that opinion has little probative value and is insufficient to establish causal relationship.[8] Appellant's burden includes the necessity of furnishing an affirmative opinion from a physician who supports his conclusion with sound medical reasoning.

In his narrative medical opinion of June 2, 1999, Dr. Sferra noted that appellant had developed increased symptoms after surgical intervention in 1997 and in April 1999 was continuing to have significant bilateral posterior heel pain despite her being minimally active on her feet. He explained that, because her job description seemed to require her to sit and stand repetitively throughout the day, most likely her work activities exacerbated or aggravated her chronic underlying condition.

The Board finds that Dr. Sferra's opinion, while supportive of appellant's claim, is of diminished probative value. He did not make clear to which job description he referred when he reported that appellant's job seemed to require her to sit and stand repetitively throughout the day. The job description for office automation assistant does not express such a requirement and the employing establishment advised that appellant was in a mostly sedentary position since 1993. Dr. Sferra has, therefore, based his opinion on facts that are not established by the record.[9]

Dr. Sferra also provided no medical explanation, to a reasonable degree of medical certainty, of how sitting and standing repetitively caused or aggravated appellant's diagnosed medical condition. He observed only that he had seen this condition in many individuals and the majority of them seemed to work on hard floors in a job that required them to sit and stand repetitively throughout the day. Dr. Sferra did not discuss, from a medical point of view, how such physical activities affected appellant's condition. The Board has held that medical conclusions unsupported by rationale are of little probative value.[10]

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[5] *William Nimitz, Jr.*, 30 ECAB 567, 570 (1979).

[6] *See Morris Scanlon*, 11 ECAB 384-85 (1960).

[7] *See William E. Enright*, 31 ECAB 426, 430 (1980).

[8] *E.g., Lillian M. Jones*, 34 ECAB 379 (1982).

[9] *See James A. Wyrick*, 31 ECAB 1805 (1980) (physician's report was entitled to little probative value because the history was both inaccurate and incomplete). *See generally Melvina Jackson*, 38 ECAB 443, 450 (1987) (addressing factors that bear on the probative value of medical opinions).

[10] *Ceferino L. Gonzales*, 32 ECAB 1591 (1981); *George Randolph Taylor*, 6 ECAB 968 (1954).

Because the medical evidence of record is insufficient to establish that appellant's mostly sedentary duties caused or aggravated her diagnosed medical condition, appellant has not met her burden of proof to establish the essential element of causal relationship.

The August 18, 1999 decision of the Office of Workers' Compensation Programs is hereby affirmed.

Dated, Washington, DC
January 12, 2001

David S. Gerson
Member

Willie T.C. Thomas
Member

A. Peter Kanjorski
Alternate Member