U. S. DEPARTMENT OF LABOR

Employees' Compensation Appeals Board

In the Matter of BENNY F. SPRAYBERRY and DEPARTMENT OF THE ARMY, ANNISTON ARMY DEPOT, AL

Docket No. 01-1647; Submitted on the Record;
Issued February 26, 2002

DECISION and ORDER

Before MICHAEL J. WALSH, MICHAEL E. GROOM,
A. PETER KANJORSKI

The issue is whether appellant's retinal tear and retinal detachment are causally related to his May 4, 2000 employment injury.

On May 8, 2000 appellant, then a 57-year-old metal forming machine operator, filed a claim for a traumatic injury on May 4, 2000 when trash blew into his right eye. Appellant listed the nature of the injury as "horseshoe tear in retina, hemorrhaging and fluid build-up."

By decision dated June 5, 2000, the Office of Workers' Compensation Programs found that as a result of the May 4, 2000 incident appellant sustained a foreign body and conjunctivitis of the right eye, but that the medical evidence failed to establish that appellant's detached retina of the right eye was causally related to his May 4, 2000 injury.

By letter dated March 4, 2001, appellant requested reconsideration and submitted additional evidence.

By decision dated May 21, 2001, the Office found that the medical evidence failed to establish a causal relationship between appellant's May 4, 2000 injury and any subsequent tear or detachment of the retina.

The Board finds that appellant has not established that his retinal tear and retinal detachment are causally related to his May 4, 2000 employment injury.

Appellant has the burden of establishing by the weight of the reliable, probative and substantial evidence that his condition was caused or adversely affected by his employment. As part of this burden he must present rationalized medical opinion evidence, based on a complete factual and medical background, showing causal relation. The mere fact that a disease manifests itself during a period of employment does not raise an inference that there is a causal relationship between the two. Neither the fact that the disease became apparent during a period of employment, nor the belief of appellant that the disease was caused or aggravated by

employment conditions, is sufficient to establish causal relation.[1] Causal relation is a medical question that can only be resolved by the submission of medical opinion evidence.[2]

Appellant has not submitted medical evidence establishing that his retinal tear and retinal detachment are causally related to his May 4, 2000 employment injury. Dr. Charles Pederson, the medical director of the employing establishment's occupational health clinic, stated that "a corneal foreign body is not a recognized cause of a retinal tear." In a report dated May 11, 2000, Dr. George M. Gibbins, a Board-certified ophthalmologist, checked a box on an Office form to indicate that appellant's retinal detachment was not causally related to the foreign body sensation of the right eye on May 4, 2000. In a report dated May 19, 2000, Dr. C. Douglas Witherspoon, a Board-certified ophthalmologist, stated that it was unlikely that appellant's retinal tear was related to the incident where trash got in his eye at work. He noted performing laser surgery on May 5, 2000 with a May 17, 2000 vitrectomy for repair of the detached retina. Although Dr. Witherspoon stated in an August 21, 2000 report that there was a possibility that appellant's retinal detachment was associated with an injury at work, this statement is too speculative to support a claim for compensation.[3]

In a report dated September 25, 2000, Dr. Greer Lauren Geiger, a Board-certified ophthalmologist, diagnosed retrobulbar optic neuropathy of the right eye and indicated this condition may be associated with a retrobulbar injection done at the time of the laser surgery for appellant's retinal tear on May 5, 2000. However, this opinion is also speculative on causal relation. Moreover, appellant has not established that the laser surgery performed in May 2000 was for an employment-related condition and any injury consequential to that procedure is not compensable under the Federal Employees' Compensation Act.[4]

[1] *Froilan Negron Marrero*, 33 ECAB 796 (1982).

[2] *Ronald M. Cokes*, 46 ECAB 967 (1995).

[3] *Charles A. Massenzo*, 30 ECAB 844 (1979).

[4] When surgery performed as a result of an employment injury causes further impairments, this constitutes a consequential injury. *Harry D. Nelson*, 33 ECAB 1122 (1982). However, where the primary injury is not established as work related, the consequences of such an injury are not compensable. *Artice Dotson*, 41 ECAB 754 (1990).

The May 21, 2001 and June 5, 2000 decisions of the Office of Workers' Compensation Programs are affirmed.

Dated, Washington, DC
February 26, 2002

Michael J. Walsh
Chairman

Michael E. Groom
Alternate Member

A. Peter Kanjorski
Alternate Member