

accepted for cervical strain, left shoulder strain and left shoulder impingement syndrome.¹ On February 24, 1994 appellant filed a Form CA-2 for bilateral carpal tunnel syndrome. The Office accepted the claim for bilateral carpal tunnel syndrome.² On June 4, 1997 appellant filed a traumatic injury claim (Form CA-1) alleging a neck injury on February 26, 1997. The Office accepted cervical and thoracic strains. These claims have been administratively combined under OWCP File No. 160298481.³

Pursuant to the carpal tunnel claim, the Office issued a schedule award on January 17, 1997 for a 10 percent left arm permanent impairment. On January 22, 2001 appellant received a schedule award for an additional four percent permanent impairment to the left arm. The award was issued pursuant to the June 11, 1992 occupational neck and shoulder claim. By decision dated January 23, 2001, the Office, pursuant to the carpal tunnel claim, issued a schedule award for a 12 percent permanent impairment to the right arm.

On September 7, 2007 appellant submitted a claim for compensation (Form CA-7) indicating she was claiming a schedule award. She identified the OWCP File No. as 160298481. In a letter dated September 11, 2007, the Office requested appellant to submit current medical evidence as to the degree of permanent impairment to her arms. On September 14, 2007 appellant submitted a duty status report (Form CA-17) dated August 30, 2007, from Dr. John Sazy, an orthopedic surgeon, diagnosing cervical disc disease.

By decision dated October 17, 2007, the Office denied appellant's claim for a schedule award. The Office found that the medical evidence was insufficient to establish entitlement to a schedule award.

LEGAL PRECEDENT

Section 8107 of the Federal Employees' Compensation Act provides that, if there is permanent disability involving the loss or loss of use of a member or function of the body, the claimant is entitled to a schedule award for the permanent impairment of the scheduled member or function.⁴ For consistent results and to ensure equal justice for all claimants, the Office has adopted the American Medical Association, *Guides to the Evaluation of Permanent Impairment* as the uniform standard applicable to all claimants.⁵

¹ OWCP File No. 160209440.

² OWCP File No. 160271858.

³ In addition, there is another Office file associated with the 160298481 master file. Appellant filed an occupational claim on August 28, 1996, which was accepted for bilateral shoulder impingement syndrome under OWCP File No. 160284405. A separate appeal was filed as to a permanent impairment under this claim and is the subject of a separate decision under Docket No. 08-760. All of the claims under master File No. 160298481 should be recombined on return of the case record.

⁴ 5 U.S.C. § 8107. This section enumerates specific members or functions of the body for which a schedule award is payable and the maximum number of weeks of compensation to be paid; additional members of the body are found at 20 C.F.R. § 10.404(a).

⁵ A. George Lampo, 45 ECAB 441 (1994).

A claimant seeking compensation under the Act has the burden to establish the essential elements of her claim.⁶ With respect to a schedule award, it is appellant's burden of proof to establish an increased schedule award.⁷ A claimant may seek an increased schedule award if the evidence establishes that she sustained an increased impairment causally related to an employment injury.⁸ The medical evidence must include a detailed description of the permanent impairment.⁹

ANALYSIS

In this case, appellant submitted a CA-7 on September 4, 2007 requesting a schedule award. On appeal, she states that her employment injuries have worsened. Appellant's claim for an increased schedule award, however, must be supported by probative medical evidence on the issue. It is her burden of proof to submit current medical evidence with a detailed description of the impairment, so that the A.M.A., *Guides* may be properly applied.

Appellant did not submit any current medical evidence with regard to a permanent impairment to a scheduled member or function of the body, caused by an accepted employment injury. The August 30, 2007 duty status report, for example, does not provide any relevant evidence on the issue. Dr. Sazy did not describe a permanent impairment to the arms. There are no probative medical reports of record providing a detailed description of an employment-related increased permanent impairment to the upper extremities. In the absence of such evidence, the Office properly denied the claim for a schedule award.

CONCLUSION

Appellant did not meet her burden of proof to establish more than a 14 percent left arm permanent impairment or 12 percent right arm permanent impairment.

⁶ *John W. Montoya*, 54 ECAB 306 (2003).

⁷ *Edward W. Spohr*, 54 ECAB 806, 810 (2003).

⁸ *See Rose V. Ford*, 55 ECAB 449 (2004).

⁹ *See Vanessa Young*, 55 ECAB 575 (2004); Federal (FECA) Procedure Manual, Part 2 -- Claims, *Schedule Awards and Permanent Disability Claims*, Chapter 2.80.8.6(c)(1) (August 2002).

ORDER

IT IS HEREBY ORDERED THAT the decision of the Office of Workers' Compensation Programs dated October 17, 2007 is affirmed.

Issued: August 1, 2008
Washington, DC

Alec J. Koromilas, Chief Judge
Employees' Compensation Appeals Board

David S. Gerson, Judge
Employees' Compensation Appeals Board

Colleen Duffy Kiko, Judge
Employees' Compensation Appeals Board