

**United States Department of Labor
Employees' Compensation Appeals Board**

A.B., Appellant)	
)	
and)	Docket No. 25-0057
)	Issued: November 26, 2024
U.S. POSTAL SERVICE, SOUTHERN)	
MARYLAND PROCESSING & DISTRIBUTION)	
CENTER, Capitol Heights, MD, Employer)	
)	

Appearances:
Appellant, pro se
Office of Solicitor, for the Director

Case Submitted on the Record

DECISION AND ORDER

Before:
PATRICIA H. FITZGERALD, Deputy Chief Judge
JANICE B. ASKIN, Judge
VALERIE D. EVANS-HARRELL, Alternate Judge

JURISDICTION

On October 23, 2024 appellant filed a timely appeal from an August 28, 2024 merit decision of the Office of Workers' Compensation Programs (OWCP). Pursuant to the Federal Employees' Compensation Act¹ (FECA) and 20 C.F.R. §§ 501.2(c) and 501.3, the Board has jurisdiction over the merits of this case.

ISSUE

The issue is whether appellant has met his burden of proof to establish a medical condition causally related to the accepted October 20, 2021 employment incident.

¹ 5 U.S.C. § 8101 *et seq.*

FACTUAL HISTORY

This case has previously been before the Board.² The facts and circumstances of the case as set forth in the Board's prior decision are incorporated herein by reference. The relevant facts are as follows.

On May 5, 2022 appellant, then a 40-year-old mail handler, filed a traumatic injury claim (Form CA-1) alleging that on October 20, 2021 he sustained a bilateral eye injury when dust went in both eyes as he was stacking pallets while in the performance of duty. He did not stop work.

In support of his claim, appellant submitted unsigned records indicating that he had been seen in October, November, and December 2021 for chalazion of the left upper eye and right lower eye, and bilateral meibomian gland dysfunction.

By decision dated June 27, 2022, OWCP accepted that appellant had established the occurrence of the October 20, 2021 employment incident, as alleged. However, it denied his claim, finding that the medical evidence of record was insufficient to establish a diagnosed medical condition in connection with the accepted October 20, 2021 employment incident. OWCP concluded, therefore, that the requirements had not been met to establish an injury as defined by FECA.

On August 1, 2022 OWCP received a July 29, 2022 report wherein Dr. Howard I. Savage, a Board-certified ophthalmologist, indicated, "[Appellant] is a 40[-year-]old male who had exposure to dust at the workplace in October 2021. Subsequently [appellant] developed chronic meibomian gland eyelid disease with multiple styes/chalazia of both eyes' eyelids."

On August 29, 2022 appellant requested reconsideration of the June 27, 2022 decision. By decision dated November 22, 2022, OWCP modified its June 27, 2022 decision and denied his traumatic injury claim on the basis that he had not established the occurrence of the October 20, 2021 employment incident, as alleged.

On July 24, 2023 appellant requested reconsideration of the November 22, 2022 decision. He submitted several statements in support of his request. On August 22, 2023 OWCP received an August 21, 2023 statement wherein, J.C., appellant's supervisor maintained that appellant did not advise her of his eye problems until January 19, 2022. Appellant submitted additional evidence, including multiple photographs of the eye region, some of which bore the date stamp of October 27, 2021.

By decision dated October 17, 2023, OWCP modified the November 22, 2022 decision to find that appellant had established the occurrence of the October 20, 2021 employment incident, as alleged. However, the claim remained denied, as the medical evidence of record was insufficient to establish a diagnosed medical condition in connection with the accepted October 20, 2021 employment incident.

² Docket No. 24-0224 (issued April 1, 2024).

Appellant appealed to the Board and, by decision dated April 1, 2024,³ the Board reversed OWCP's October 17, 2023 decision. The Board found that Dr. Savage's July 29, 2022 report, containing a diagnosis of "chronic meibomian gland eyelid disease with multiple styes/chalazia of both eyes' eyelids," was sufficient to establish a diagnosed medical condition in connection with the accepted October 20, 2021 employment incident. The Board remanded the case to OWCP for further development, including consideration of the medical evidence with regard to the issue of causal relationship, to be followed by issuance of a *de novo* decision.

On July 18, 2024 OWCP referred appellant, along with the medical record, a statement of accepted facts (SOAF), and a series of questions, to Dr. Laurie J. Wenger, a Board-certified ophthalmologist, for a second opinion examination and evaluation regarding whether he sustained an eye injury causally related to the accepted October 20, 2021 employment incident.

In an August 19, 2024 report, Dr. Wenger discussed the October 20, 2021 employment incident and the treatment appellant received for his eye problems. She reported physical examination findings, noting that the pupil examination was normal, and that appellant had meibomian gland inspissation of both eyelid margins, trace 1+ nuclear sclerosis in the right eye, and trace 1+ nuclear sclerosis with central opacities in the left eye. Dr. Wenger diagnosed meibomian gland dysfunction, age-related bilateral nuclear sclerotic cataracts, and bilateral ocular hypertension. She opined that the October 20, 2021 employment incident did not cause, aggravate, accelerate, or precipitate the diagnosed conditions. Dr. Wenger noted, "[t]he current subjective complaints correspond with the objective findings of meibomian gland dysfunction, but are unrelated to the statement of 'dust in the eyes.' There is no evidence of injury or causation from the work[-]related incident." She advised that appellant could return to his date-of-injury job without restrictions. In an August 19, 2024 work capacity evaluation (Form OWCP-5c), Dr. Wenger indicated that appellant could return to his date-of-injury job without restrictions.

By *de novo* decision dated August 28, 2024, OWCP denied appellant's claim, finding that the medical evidence of record was insufficient to establish an injury causally related to the accepted October 20, 2021 employment incident. It determined that the weight of the medical opinion evidence was accorded to the rationalized opinion of Dr. Wenger, the second opinion physician.

LEGAL PRECEDENT

An employee seeking benefits under FECA has the burden of proof to establish the essential elements of his or her claim, including that the individual is an employee of the United States within the meaning of FECA, that the claim was timely filed within the applicable time limitation of FECA,⁴ that an injury was sustained in the performance of duty as alleged, and that any disability or medical condition for which compensation is claimed is causally related to the

³ *Id.*

⁴ *F.H.*, Docket No. 18-0869 (issued January 29, 2020); *J.P.*, Docket No. 19-0129 (issued April 26, 2019); *Joe D. Cameron*, 41 ECAB 153 (1989).

employment injury.⁵ These are the essential elements of each and every compensation claim, regardless of whether the claim is predicated upon a traumatic injury or an occupational disease.⁶

To determine if an employee has sustained a traumatic injury in the performance of duty, OWCP begins with an analysis of whether fact of injury has been established. Fact of injury consists of two components that must be considered in conjunction with one another. The first component is whether the employee actually experienced the employment incident at the time and place, and in the manner alleged.⁷ The second component is whether the employment incident caused an injury.⁸

Causal relationship is a medical question that requires rationalized medical opinion evidence to resolve the issue. The opinion of the physician must be based on a complete factual and medical background, must be one of reasonable medical certainty, and must be supported by medical rationale explaining the nature of the relationship between the diagnosed condition and the specific employment incident.⁹ Neither the mere fact that a disease or condition manifests itself during a period of employment, nor the belief that the disease or condition was caused or aggravated by employment factors or incidents is sufficient to establish causal relationship.¹⁰

ANALYSIS

The Board finds that appellant has not met his burden of proof to establish a medical condition causally related to the accepted October 20, 2021 employment incident.

In an August 19, 2024 report, Dr. Wenger, the OWCP referral physician, discussed the accepted October 20, 2021 employment incident and reported physical examination findings. She diagnosed meibomian gland dysfunction, age-related bilateral nuclear sclerotic cataracts, and bilateral ocular hypertension. Dr. Wenger opined that the October 20, 2021 employment incident did not cause, aggravate, accelerate, or precipitate the diagnosed conditions. She noted, “[t]he current subjective complaints correspond with the objective findings of meibomian gland dysfunction, but are unrelated to the statement of ‘dust in the eyes.’ There is no evidence of injury or causation from the work[-]related incident.”

The Board finds that the weight of the medical opinion evidence with respect to appellant’s traumatic injury claim is represented by the well-rationalized opinion of Dr. Wenger, OWCP’s referral physician. Accordingly, OWCP properly relied on Dr. Wenger’s opinion in finding that

⁵ *J.M.*, Docket No. 17-0284 (issued February 7, 2018); *R.C.*, 59 ECAB 427 (2008); *James E. Chadden, Sr.*, 40 ECAB 312 (1988).

⁶ *K.M.*, Docket No. 15-1660 (issued September 16, 2016); *L.M.*, Docket No. 13-1402 (issued February 7, 2014); *Delores C. Ellyett*, 41 ECAB 992 (1990).

⁷ *B.P.*, Docket No. 16-1549 (issued January 18, 2017); *Elaine Pendleton*, 40 ECAB 1143 (1989).

⁸ *M.H.*, Docket No. 18-1737 (issued March 13, 2019); *John J. Carlone*, 41 ECAB 354 (1989).

⁹ *S.S.*, Docket No. 18-1488 (issued March 11, 2019).

¹⁰ *J.L.*, Docket No. 18-1804 (issued April 12, 2019).

appellant did not meet his burden of proof to establish an injury causally related to the accepted October 20, 2021 employment incident.¹¹

Appellant submitted a July 29, 2022 report, wherein Dr. Savage, an attending physician, indicated, “[Appellant] is a 40[-year-]old male who had exposure to dust at the workplace in October 2021. Subsequently [appellant] developed chronic meibomian gland eyelid disease with multiple styes/chalazia of both eyes’ eyelids.” Although the Board had determined in its April 1, 2024 decision that this report was sufficient to establish a diagnosed medical condition in connection with the accepted October 20, 2021 employment incident, it is of limited probative value on causal relationship as it does not contain adequate medical rationale in support of the issue of whether appellant sustained an injury causally related to the accepted October 20, 2021 employment incident. The Board has held that a report is of limited probative value regarding causal relationship if it does not contain medical rationale explaining how an employment activity could have caused or aggravated a medical condition.¹² Accordingly, this report is insufficient to overcome the weight of the medical opinion evidence accorded to Dr. Wenger, or to create a conflict in medical opinion evidence as to whether appellant sustained a work-related traumatic injury.¹³

Additionally, appellant submitted unsigned records indicating that he had been seen in October, November, and December 2021 for chalazion of the left upper eye and right lower eye, and bilateral meibomian gland dysfunction. The Board has held that reports that are unsigned or bear an illegible signature lack proper identification and cannot be considered probative medical evidence as the author cannot be identified as a physician.¹⁴

As the medical evidence of record is insufficient to establish causal relationship between the diagnosed medical condition and the accepted October 20, 2021 employment incident, the Board finds that appellant has not met his burden of proof.

Appellant may submit new evidence or argument with a written request for reconsideration to OWCP within one year of this merit decision, pursuant to 5 U.S.C. § 8128(a) and 20 C.F.R. §§ 10.605 through 10.607.

CONCLUSION

The Board finds that appellant did not meet his burden of proof to establish a medical condition causally related to the accepted October 20, 2021 employment incident.

¹¹ *P.G.*, Docket No. 24-0437 (issued June 26, 2024); *S.V.*, Docket No. 23-0474 (issued August 1, 2023).

¹² *See Y.D.*, Docket No. 16-1896 (issued February 10, 2017).

¹³ *D.L.*, Docket No. 22-0161 (issued March 10, 2023).

¹⁴ *See D.F.*, Docket No. 22-0904 (issued October 31, 2022); *see also R.C.*, Docket No. 19-0376 (issued July 15, 2019); *Merton J. Sills*, 39 ECAB 572, 575 (1988).

ORDER

IT IS HEREBY ORDERED THAT the August 28, 2024 decision of the Office of Workers' Compensation Programs is affirmed.

Issued: November 26, 2024
Washington, DC

Patricia H. Fitzgerald, Deputy Chief Judge
Employees' Compensation Appeals Board

Janice B. Askin, Judge
Employees' Compensation Appeals Board

Valerie D. Evans-Harrell, Alternate Judge
Employees' Compensation Appeals Board