

U. S. DEPARTMENT OF LABOR

Employees' Compensation Appeals Board

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In the Matter of WALTER E. KELVEMANN and U.S. POSTAL SERVICE,  
FREMONT POST OFFICE, Fremont, Nebr.

*Docket No. 97-2607; Submitted on the Record;  
Issued May 21, 1999*

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DECISION and ORDER

Before GEORGE E. RIVERS, WILLIE T.C. THOMAS,  
BRADLEY T. KNOTT

The issue is whether appellant has established that he sustained supraventricular tachycardia, a myocardial infarction or other cardiovascular injury on January 23, 1997 causally related to factors of his federal employment.

On January 30, 1997 appellant, then a 67-year-old letter carrier, filed a notice of traumatic injury (Form CA-1) alleging that he sustained a heart attack on January 23, 1997 while delivering his mail route. He alleged that his heart attack was caused by overtime work, that his route took more than eight hours to deliver, and that a route check he had requested was not performed. Appellant was released to full duty as of January 28, 1997 by Dr. Lissa A. Woodruff, an attending internist.

In a February 24, 1997 letter, the Office advised appellant of the type of additional evidence needed to establish his claim, including a detailed explanation of how the alleged injury occurred, a history of his activities preceding the cardiac episode, and a narrative medical report explaining how the alleged work factors would cause the claimed condition.

By decision dated March 31, 1997, the Office denied appellant's claim on the grounds that fact of injury was not established. The Office found that the medical evidence did not contain a definitive diagnosis, and was insufficient to establish causal relationship. Appellant disagreed with this decision, requested reconsideration on April 7, 1997 and submitted additional medical evidence.<sup>1</sup>

In a January 23, 1997 hospital admissions report, Dr. Woodruff noted appellant's account of a "racing heart" from 1:00 to 2:00 p.m. that day, followed by a chest ache subsiding by 4:00 p.m. Dr. Woodruff noted that appellant had been in remission "for years" from multiple

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<sup>1</sup> Appellant also submitted hospital chart notes and laboratory tests results.

sclerosis, and had quit smoking 13 years ago. Dr. Woodruff stated an impression of unstable angina and supraventricular tachycardia. She did not mention any work factors in this report.

In a January 25, 1997 report, Dr. Woodruff noted that a myocardial infarction test profile was negative, and that a January 23, 1997 echocardiogram showed supraventricular tachycardia “most likely secondary to AV nodal e-entry,” and a fascicular block with premature ventricular contractions. Dr. Woodruff did not mention work factors in this report.

A January 28, 1997 stress test was negative for coronary artery disease, but showed “[I]ncreased ectopy,” which Dr. Woodruff classified as a possible angina equivalent, and prescribed Atenolol, a beta blocker.

In a February 27, 1997 report, Dr. Woodruff noted that appellant had no further symptoms while on Atenolol, and did not have coronary artery disease based on the stress test. She recommended that appellant continue on the beta blocker to treat the supraventricular tachycardia. Dr. Woodruff stated final diagnoses of chest pain and a history of supraventricular tachycardia.

In an April 7, 1997 factual statement, appellant noted that while delivering mail at Fremont Mall on January 23, 1997, he experienced a “very rapid heart beat,” then returned to his postal vehicle to have lunch. The rapid heart beat continued during lunch and when he resumed his deliveries. At 1:45 p.m. while delivering mail in an office building, he experienced “intense” chest pain, and called the employing establishment. A supervisor and substitute carrier met him, whereupon appellant returned to the employing establishment, “cleaned accountables,” and clocked out at 3:45 p.m., whereas his normal tour ended at 5:00 p.m.<sup>2</sup> Appellant returned home, experienced additional symptoms, and his wife took him to the emergency room. Appellant asserted that his mail route was overburdened, taking in excess of eight hours to deliver. He claimed that a route check in April 1995 confirmed that the route took nine hours and 20 minutes to deliver, and that new deliveries were since added. Appellant noted that he had requested another route check in August 1995 but none was performed.

By decision dated July 9, 1997, the Office denied modification on the grounds that fact of injury was still not established. The Office found that working on January 23, 1997 was in the performance of duty, and that appellant did often work overtime, but that the medical evidence did not support a causal relationship between those factors and a medical condition. The Office further found that “chest pain and supraventricular tachycardia are not diagnoses of a medical condition but a symptom.”

The Board finds that appellant has not established that he sustained supraventricular tachycardia or other cardiovascular conditions on January 23, 1997 causally related to work factors.

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<sup>2</sup> The employing establishment submitted a January 23, 1997 incident report corroborating appellant’s account of events. However, in a February 5, 1997 letter, the employing establishment controverted a causal relationship between the claimed conditions and work factors.

To determine whether a federal employee has sustained a traumatic injury in the performance of duty, it must first be determined whether a “fact of injury” has been established. First, the employee must submit sufficient evidence to establish that he or she actually experienced the employment incident at the time, place and in the manner alleged.<sup>3</sup> Second, the employee must submit sufficient evidence, generally only in the form of medical evidence, to establish that the employment incident caused a personal injury.<sup>4</sup>

Regarding the first element of this burden of proof, the Board finds that the diagnosis of supraventricular tachycardia, requiring treatment with beta blockers, is a medical condition, and not merely a symptom as the Office found in its July 9, 1997 decision. Therefore, the Board finds that appellant has established that he sustained a medical condition while in the performance of duty on January 23, 1997. However, the Board has held that the mere fact that a condition manifests itself during a period of employment does not raise an inference that there is causal relationship between the two.<sup>5</sup> Thus, it remains appellant’s burden of proof to meet the second element of the test by submitting rationalized medical evidence establishing a causal relationship between the supraventricular tachycardia condition and the alleged work factors. However, appellant did not submit such evidence.

Dr. Woodruff’s reports make no mention of appellant’s job duties, the accepted overtime work, or even that appellant was on duty on January 23, 1997 when the cardiac episode occurred. Without medical rationale explaining how and why specific work factors would cause the diagnosed supraventricular tachycardia, Dr. Woodruff’s reports are of very little probative value in establishing causal relationship in this case.<sup>6</sup> The Board notes that the Office advised appellant by February 24, 1997 letter of the type of additional evidence needed to establish his claim, including a rationalized medical narrative explaining how the alleged work factors would cause the claimed condition.

Consequently, appellant has failed to meet his burden of proof as he submitted insufficient medical and factual evidence to establish that he sustained a cardiovascular injury causally related to factors of his federal employment as alleged.

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<sup>3</sup> *John J. Carlone*, 41 ECAB 354 (1989).

<sup>4</sup> *Id.* For a definition of the term “injury,” see 20 C.F.R. § 10.5(a)(14).

<sup>5</sup> *Norman E. Underwood*, 43 ECAB 719 (1992); *Edward E. Olsen*, 35 ECAB 1099 (1984).

<sup>6</sup> *Lucrecia M. Nielsen*, 42 ECAB 583 (1981).

The decision of the Office of Workers' Compensation Programs dated July 9, 1997 is affirmed as modified and the March 31, 1997 decision is affirmed.

Dated, Washington, D.C.  
May 21, 1999

George E. Rivers  
Member

Willie T.C. Thomas  
Alternate Member

Bradley T. Knott  
Alternate Member