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U.S. DEPARTMENT OF LABOR

OFFICE OF WORKERS' COMP PROGRAMS
PO BOX 8300 DISTRICT 6 JAC
LONDON, KY 40742-8300
Phone: (904) 366-0100

February 29, 2016

Date of Injury: _____
Employee: _____

Dear Ms.

This concerns your compensation case and your request for reconsideration received on 12/11/2015.

We have evaluated the evidence submitted and have reviewed the merits of your case under 5 U.S.C. 8128. You have provided sufficient evidence to warrant modification of the decision dated 12/11/2014. Based on the information received, the decision is now vacated.

The reasons for this decision are outlined in the enclosed Notice of Decision.

Please see the enclosed acceptance letter for a discussion of your rights and responsibilities.

Sincerely,

Christina Steven
Senior Claims Examiner

PAUL FELSER
QUEENSBOROUGH BANK BUILDING
7393 HODGSON MEMOIRAL DR STE 102
SAVANNAH, GA 31406

If you have a disability (a substantially limiting physical or mental impairment), please contact our office/claims examiner for information about the kinds of help available, such as communication assistance (alternate formats or sign language interpretation), accommodations and modifications.

NOTICE OF DECISION
Claimant Name: NANCY L. CAMPBELL
Case Number: 062344503

ISSUE:

The issue for determination is whether the evidence presented is of sufficient probative value to vacate the decision dated 12/11/2014.

REQUIREMENTS FOR ENTITLEMENT:

In accordance with the regulations set forth in 20 CFR § 10.609, if an application for reconsideration is accompanied by new and relevant evidence or by an arguable case for error, OWCP will conduct a merit review of the case to determine whether the prior decision should be modified. If sufficient evidence exists to overturn the prior decision, it should be vacated.

BACKGROUND:

On 10/20/2014 you filed a claim for Traumatic Injury indicating you sustained an injury or medical condition on _____ as a result of your employment. On the date of injury, you twisted your left ankle when you walked over a sticky surface on the floor at your workplace. This was witnessed by an Officer _____ of _____ on the date of injury who said you did not fall but sat on a chair for a few moments afterwards. Another witness, Jacqueline Williams stated that she witnessed this happen and that although you did not fall she saw that you were in pain.

On 12/11/2014 a formal decision was issued in your case finding that the facts regarding your injury did not support that you sustained an injury as alleged. The documentation upon which the decision was based included factual and medical evidence. The reason for the decision was it was unclear both factually and medically how your work injury caused a left ankle condition as alleged.

You disagreed with the 12/11/2014 decision and requested reconsideration by letter/appeal request form received on 12/11/2015.

DISCUSSION OF EVIDENCE:

The evidence reviewed in support of your reconsideration request includes new factual evidence and argument from your attorney of record and new medical evidence from Drs. _____ and _____.

There is no factual evidence to support that something did not happen as alleged on _____ in view of the current factual evidence on file. There are two witness statements but no contradictory information to refute that you did not twist your foot when walking at work on a sticky floor patch at your workplace as alleged.

You were seen or treated by the physicians at the Atlanta Orthopedic Institute, namely Drs. _____ and _____. A merit review of your case supports that there are numerous medical reports since prior to your date of injury of _____ and they recount you had both a preexisting back condition and left ankle conditions along with

diabetes. However, Dr. _____ states in the medical report of _____ that you sustained a left ankle strain due to your work injury where you twisted your ankle at work on _____ and that this sufficient to cause you to have repeat surgery on your left ankle.

BASIS FOR DECISION:

The evidence is sufficient to vacate the decision dated 12/11/2014 because the medical and factual evidence supports that you sustained a left ankle sprain due to a one-time work incident as alleged.

CONCLUSION:

Therefore, the decision dated 12/11/2014 is vacated and your case is now approved for left ankle strain.

Christina Steven
Senior Claims Examiner