Understanding the cause of your worker’s injury or illness: How WCB determines work relatedness

The workers’ compensation system

The workers’ compensation system provides disability coverage and rehabilitation support for injuries or illnesses caused or made symptomatic (aggravated) by work. In most cases, causation is straightforward and WCB adjudicators are able to quickly confirm an injury’s relationship to work. In some cases the relationship is not as clear.

Although your worker may experience pain at work, the work itself may not be the source of their condition; therefore, it is important for you and your worker to understand how WCB determines work-relatedness and workers’ compensation coverage.

Cause and effect: causation

Causation is defined as a situation in which one event leads to the occurrence of another event. For example, a crane swings out of control and hits scaffolding, causing a worker to fall and be injured. This is an example of causation.

Why is causation important?

Evaluating causation is important in determining whether injuries or diseases are work related (arise out of and occur in the course of employment). Workers’ compensation is fully funded by Alberta’s employers and only is intended to cover the costs of occupational related injury and illness.

Some cases are more complex and WCB adjudicators seek help from experienced consultant physicians, who consider how the injury happened, any exposure to tasks or substances, published research to support work relatedness, along with any other relevant information that may help paint a complete picture of how an injury or illness may be related to work. All of this information provides insight into the cause of an injury and helps WCB physicians in developing a medical opinion around whether the injury could have been caused by work.

The medical consultant does not need to complete a physical exam — they rely on the worker’s physician for that information. They are there to draw the link between work and injury based on medical evidence.

What information is currently used to determine causation?

For a fair and impartial assessment of causation, WCB physicians use the AMA Guides to the Evaluation of Disease and Injury Causation as their primary reference.

This resource is a comprehensive summary of existing causation research we have found and contains a standard approach to be considered by a physician when providing an opinion on whether an injury is work related or not.

How is new medical information considered?

Medical research can change what we know about a condition or about the work factors that could lead to the development of a work-related injury or illness.

WCB has an approach to evaluating new research papers to determine if new research changes the existing referenced medical evidence and can discuss this approach with your
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worker’s doctor. Using a standard approach, and having it open to their physician for questions or review, ensures transparency and clarity around the scientific evidence used when considering causation.

More information

For more information on the new research papers evaluation process, please refer to the occupational injury causation fact sheet.

Causation scenarios can vary from very straightforward to complex

Scenario 1(A)

Abby is a warehouse worker sorting heavy pipes on a shelf. One of the pipes falls and lands on her foot breaking a bone in her foot. Abby’s foot injury was caused by her work.

Scenario 2(A)

Albert has recently been diagnosed with mesothelioma, a cancer of the lining of the lung. He had worked for many years in the 1960s and 70s demolishing old buildings during which time he was exposed to asbestos. In those days they had little in the way of personal protective equipment.

A detailed review was done of Albert’s asbestos exposure during his working life in Alberta. Scientific research shows a direct link between asbestos exposure and the development of Mesothelioma.

It was found that Albert’s mesothelioma was more than likely caused by his work exposure to asbestos while demolishing buildings. Albert’s mesothelioma is a work-related condition.

Scenario 3(A)

John is a long-haul trucker. While driving his rig he comes upon a motor vehicle collision. He provides first aid for a severely-injured passenger from one of the vehicles. After he gets home, John becomes anxious, nervous about driving, and hyper vigilant at intersections. John is diagnosed and treated for an acute stress reaction.

John’s stress reaction is a traumatic psychological injury and has a direct relationship to the motor vehicle accident he witnessed while performing his regular work duties as a truck driver.

Scenario (B)

Abby was gardening in her yard. She dropped a large rock on her foot, breaking a bone in her foot. When she returned to work her employer was able to provide her with work in the office, sitting at a desk. Abby found that her foot was too painful to focus on work and went home. Abby missing time from work is caused by her broken foot and not due to her work.

Scenario (B)

Albert was diagnosed with thyroid cancer. He wonders if the cancer is related to his work doing building demolition which exposed him to asbestos. A detailed review of the scientific research does not show a relationship between asbestos exposure and an increased risk for thyroid cancer. Albert’s thyroid cancer is not related to his work.

Scenario (B)

John is driving while on vacation and comes upon a motor vehicle collision and provides first aid to a severely-injured passenger.

After he gets home, John is diagnosed and treated for an acute stress reaction related to the motor vehicle collision.

Since John was not working at the time of the motor vehicle collision, his acute stress reaction was not caused by work.