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SC Court of Appeals

THE STATE OF SOUTH CAROLINA
In the Court of Appeals

APPEAL FROM THE SOUTH CAROLINA
WORKERS' COMPENSATION COMMISSION

Appellate Case No. 2022-000963

Helen Brown,	Claimant, Appellant,
v.	
Wal-Mart Inc.,	Employer,
and	
New Hampshire Insurance Company,	Carrier, Respondents.

FINAL BRIEF OF RESPONDENTS

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STATEMENT OF THE CASE

This is an admitted claim arising out of an accident on May 30, 2019, when Claimant was cleaning a fryer and slipped on some of the tools used to open the drain, resulting in an injury to her left knee. Defendants only admitted an injury to the left knee as a result of the work accident.

Claimant asserted that she had also sustained compensable injuries to her left shoulder, left arm, and neck. It was the Defendants' position that Claimant could not carry her burden of proof with regard to the left shoulder and left arm. Defendants asserted that medical causation could not be established by any medical report or deposition proffered. Additionally, Defendants asserted that Claimant was not entitled to temporary total disability, that Claimant was not entitled to a cervical MRI, and that Claimant did not need additional medical treatment on her left knee, but none of these issues is under appeal.

The Hearing Commissioner considered the evidence submitted and found that Claimant had failed to prove compensable injuries to the left shoulder and left arm related to this work accident and denied all claims for benefits arising out of those asserted injuries. Claimant appealed the denial of the left shoulder and left arm injuries to the Appellate Panel of the South Carolina Workers' Compensation Commission. After consideration of the evidence, the Appellate Panel held that Claimant failed to prove compensable injuries to her left shoulder and left arm by accident arising out of and in course and scope of her

employment on May 30, 2019, and her claim for benefits under the South Carolina Workers' Compensation Act as relates to her left shoulder and left arm was denied and dismissed with prejudice. This denial of the left shoulder and left arm claims has now been appealed to this Court.

STANDARD OF REVIEW

The South Carolina Administrative Procedures Act (APA) governs the standard of judicial review in workers' compensation cases. Lark v. Bi-Lo, Inc., 276 S.C. 130, 135, 276 S.E.2d 304, 306 (1981); Hargrove v. Titan Textile Co., 360 S.C. 276, 288, 599 S.E.2d 604, 610 (Ct. App. 2004). Under the APA, an appellate court's review is limited to deciding whether the Appellate Panel's decision is unsupported by substantial evidence or is controlled by an error of law. Hargrove v. Titan Textile Co., 360 S.C. 276, 289, 599 S.E.2d 604, 610–11 (Ct. App. 2004). "Substantial evidence is not a mere scintilla of evidence nor evidence viewed from one side, but such evidence, when the whole record is considered, as would allow reasonable minds to reach the conclusion the [Appellate Panel] reached." Shealy v. Aiken Cty., 341 S.C. 448, 455, 535 S.E.2d 438, 442 (2000); Pratt v. Morris Roofing, Inc., 357 S.C. 619, 622, 594 S.E.2d 272, 274 (2004). An appellate court may not substitute its judgment for that of the agency as to the weight of the evidence on questions of fact. Bentley v. Spartanburg County, 398 S.C. 418, 421, 730 S.E.2d 296, 297 (S.C. 2012) (citing S.C. Code Ann. § 1-23-380(5)). Specifically, "[i]n workers' compensation cases, the Appellate Panel is the ultimate fact finder." Shealy v. Aiken County, 341 S.C. 448, 455, 535 S.E.2d 4381 442 (S.C. 2000) (citing Hunter v. Patrick Constr. Co., 289 S.C. 46, 344 S.E.2d 613 (1986)). "The final determination of witness credibility and the weight to be accorded evidence is reserved to the Full Commission." Id. (citing Ford v. Allied

Chem. Co., 252 S.C. 561, 167 S.E.2d 564 (1969)). It is not the task of the appellate court to weigh the evidence as found by the Full Commission. Id. (citing Ellis v. Spartan Mills, 276 S.C. 216, 277 S.E.2d 590 (1981)). This Court must affirm the findings of fact made by the Full Commission if they are supported by substantial evidence. Jordan v. Kelly Co., 381 S.C. 483, 486, 674 S.E.2d 166, 168 (2009).

Further, an appellate court may not substitute its judgment for that of the agency as to the weight of the evidence on questions of fact. Bentley, 398 S.C. at 41, 730 S.E.2d at 298 (citing S.C. Code Ann. § 1-23-380(5)). It has long been held by our courts that the Commission is empowered to adjudicate credibility of witnesses and weight of evidence, and the courts will not disturb those judgments. "It is not for this court to balance objective against subjective findings of medical witnesses, or to weigh the testimony of one witness against that of another. That function belongs to the Appellate Panel alone." Potter v. Spartanburg Sch. Dist. 7, 395 S.C. 17, 24, 716 S.E.2d 123, 127 (Ct. App. 2011) (quoting Roper v. Kimbrell's of Greenville, 231 S.C. 453, 461, 99 S.E.2d 52, 57 (1957)).

ARGUMENT

I. SUBSTANTIAL EVIDENCE SUPPORTS THE SOUTH CAROLINA WORKERS' COMPENSATION COMMISSION'S FINDING THAT THE LEFT SHOULDER AND LEFT ARM INJURIES WERE NOT COMPENSABLE.

a. The South Carolina Workers' Compensation Commission correctly reviewed the record as a whole and in its discretion determined Claimant did not meet her burden of proving the left shoulder and left arm injuries compensable.

To be compensable under the South Carolina Workers' Compensation Act, an injury by accident must be one "arising out of and in the course of employment." S.C. Code Ann. § 42-1-160(A) (2015). "In general, whether an accident arises out of and is in

the course and scope of employment is a question of fact for the [Appellate Panel]." Whigham v. Jackson Dawson Commc'ns, 410 S.C. 131, 135, 763 S.E.2d 420, 422 (2014); Hartzell v. Palmetto Collision, 406 S.C. 233, 796 S.E.2d 145 (Ct. App. 2016).

It is the function of the Commission to determine the weight of the evidence, and, in reading the Commission's Order, it is clear that the Commission fulfilled its obligation to consider and weigh all of the evidence presented in order to reach a determination as to whether the Claimant's legal burden, the preponderance of the evidence, had been met. The clear language of the Order indicates that all evidence was considered and which evidence was given more or less weight and the reasons therefore.

As demonstrated in its Order, the Commission carefully considered and weighed the evidence in this matter. The Commission carefully reviewed the reports and deposition testimony of Dr. Rush and Dr. Palutsis (R. pp. 413-415), considered the competing evidence in the case, and weighed the testimony of Claimant in order to reach the decision that Claimant did not prove the left shoulder and left arm injuries compensable by a preponderance of the evidence.

The South Carolina Supreme Court has held, "...the possibility of drawing two inconsistent conclusions from the evidence does not prevent an administrative agency's finding from being supported by substantial evidence." Palmetto All., Inc. v. S.C. Pub. Serv. Com., 282 S.C. 430, 432, 319 S.E.2d 695, 696 (1984). Further, when there is a conflict in the evidence, the Appellate Panel's findings of facts are conclusive. Steed v. Mount Pleasant Seafood Co., 236 S.C. 253, 256, 113 S.E.2d 827, 828 (1960). This Court's role is not to weigh the evidence, but to simply consider whether there is substantial

evidence to support the Commission's decision. In this case, there is substantial evidence to support the Commission's denial of the left shoulder and left arm injuries.

Claimant argues in her brief that the Commission omitted, ignored, or misrepresented medical records and medical opinions in this claim. These claims are factually incorrect; this argument is actually a classic straw man argument. Claimant has taken what the Commission actually did, distorted that, and then attacks the extreme distortion as if that is really what they did on this claim. For example, Claimant argues that the opinions of Dr. Geier, Dr. Rush, and Dr. Palutsis were omitted, ignored, or misrepresented by the Commission. However, the actual order of the Commission summarizes each of those opinions on pages 13-15 of the order and addresses each of those opinions and the weight given to each of those opinions in the Findings of Fact (Finding of Fact 8 addresses Dr. Geier, Findings of Fact 7 & 9 address Dr. Rush, and Findings of Fact 6 & 10 address Dr. Palutsis). (R. pp. 413-414). The weight given to these medical opinions by the Commission and the basis for the weight given is specifically addressed in Finding of Fact 15. (R. p. 415). The Commission did not omit, ignore, or misrepresent any of the medical evidence or medical testimony; to the contrary, the Commission considered all of the evidence, weighed that evidence, and issued detailed findings. Claimant asserts that she complained about her left forearm on the day of the accident. The Commission summarized and considered that evidence, but weighed that evidence against 10 visits with no mention of the left shoulder or left arm or where those body parts were specifically denied by Claimant. (R. pp. 414-415). The South Carolina Worker's Compensation Commission carefully summarized and weighed the conflicting evidence in this matter and then issued findings accordingly. That is the function and purpose of the Commission as

the arbiter of facts. Claimant has mistakenly characterized the weighing of evidence against her interest as omission, ignorance, and misrepresentation.

b. Claimant did not complain about a shoulder injury for almost seven months after her work accident.

Claimant suffered an injury by accident on May 30, 2019, when she was cleaning the fryer and slipped on some of the tools used to open the drain, resulting in an injury to her left knee. Initially, Claimant treated with McLeod Health Cheraw on the day of the accident. (R. p. 16). The report from that visit states that there was "no injury except to her left knee". (R. p. 16). Claimant testified she did not realize her shoulder and arm was hurting until she tried to take her blouse off at the hospital on the date of the accident. (R. p. 296, lines 4-8). She testified that she needed help from the nurse to take off her blouse. (R. p. 296, lines 13-23). She further testified that she felt pain from her shoulder all the way down to her wrist. (R. p. 296, line 22 – p. 297, line5; R. p. 322). This testimony is not supported by the medical record.

Claimant then presented to Palmetto Family Medicine on May 31, 2019. (R. p. 38). Claimant had tenderness over the area under the patella in the upper lower leg over the bone. (Id.) Additionally, Claimant had some tenderness in the left forearm and upper arm but had no swelling and she specifically denied any shoulder pain. (Id.) When asked whether the Palmetto Family Medicine report was incorrect about her denying shoulder pain, Claimant testified the report was incorrect. (R. p. 324, lines 7-12). Claimant testified when the doctor asked her what was wrong, she pointed to the body parts that were affecting her. (R. p. 324, line 17 – p. 325, line 3). She testified that she touched the top of her shoulder and pointed all the way down to her elbow. (Id.). Again, that testimony is not supported by the medical records.

In a follow-up appointment with Palmetto Family Medicine, on June 3, 2019, Claimant only reported pain in her left knee and right wrist according to the notes. (R. p. 40). Claimant testified that she saw Dr. Kinzie at Palmetto Family Medicine on June 3, 2019. (R. p. 325, lines 4-6). When asked whether the medical report was wrong about Claimant only complaining of left knee and right wrist pain, Claimant testified that she never mentioned her wrist and she showed the doctor that she felt pain in her shoulder down to her elbow. (R. p. 325, line 10 – p. 327, line 5). She testified the pain starts at the top of her shoulder and goes down to her elbow through her bicep. (Id). She testified that this is the way she described it to Dr. Kinzie. (Id). Again, that testimony is not supported by the medical records.

Claimant returned to Palmetto Family Medicine on June 10, 2019. (R. p. 42). Claimant reported pain in her left knee and mentioned she was unable to stand for long periods of time. Claimant did not mention her left shoulder or arm according to the note. (R. pp. 42-43). Claimant testified that the June 10, 2019 medical report was not accurate when it stated she only complained about her left knee. (R. p. 327, lines 6-12). Again, this testimony is not supported by the medical records.

Claimant presented to MUSC Florence, on June 12, 2019, complaining only of left knee pain. X-rays of the left knee indicated arthritic changes and degenerative joint disease. Claimant was prescribed Hydrocodone and a knee brace. (R. pp. 51-52). Claimant testified that she remembers going to the emergency room in Florence two weeks after her accident. (R. p. 327, lines 15-20). Claimant testified that the part of the medical report that states Claimant presented with chief complaint of left knee pain is accurate. (R. p. 327, line 21 – p. 328, line 4). Claimant admitted that she did not mention her left arm or shoulder to that

doctor two weeks after the accident. (R. p. 328, lines 5-11). However, she testified that she did mention her left arm and shoulder the day of the accident. (R. p. 328, lines 12-19). Claimant testified that she only mentioned her knee at the emergency room two weeks after accident because she only wanted help for her knee at that time. (R. p. 328, line 20 – p. 329, line 5). She testified she was still experiencing pain in her shoulder at that time though. (R. p. 329, lines 6-10). Claimant could not offer an explanation as to why she went to an emergency room but did not report her alleged severe left shoulder symptoms that she was still having.

In a follow-up appointment on June 17, 2019 at Palmetto Family Medicine, Claimant denied shoulder pain but continued to complain about her left knee pain. (R. p. 44). An MRI of the left knee was ordered. Claimant testified that on her June 17, 2019, visit to Palmetto Family Practice, she did not deny shoulder pain even though the medical report indicated she did. (R. p. 329, lines 11-23). Again, this testimony is not supported by the medical records.

On June 24, 2019, the report of Palmetto Family Medicine indicates that Claimant was still having pain the knee but, again, there is no mention in the report about any shoulder problems. (R. p. 46). Claimant testified that she complained about her left shoulder pain at her June 24, 2019, visit to Palmetto Family Practice. (R. p. 330, lines 1-10). Again, this testimony is not supported by the medical records.

On July 25, 2019, Claimant presented to OrthoCarolina for left knee pain. The note mentions that she landed on the anterior aspect of the left arm, but the report contains no mention of arm/shoulder complaints or problems. Dr. Smid recommended treatment for the left knee which eventually culminated in a surgery on November 12, 2019. (R. p. 94).

Claimant testified that she went to Dr. Donato at MUSC to establish primary care on July 9, 2019. (R. pp. 253-255). She admitted that she did not mention her left knee, left shoulder, or left arm pain to Dr. Donato. (R. p. 330, line 23 – p. 331, line 25). She testified that she saw Dr. Donato again in October 2019, and did not mention her left knee, left shoulder, or left arm problems because Dr. Smid was handling those issues. (R. p. 332, lines 1-8).

On December 26, 2019, for the very first time, Claimant presented to MUSC Health complaining of left shoulder pain. (R. pp. 98, 100). Claimant reported she was not able to maintain her shoulder in the upwards position. Dr. Donato prescribed her medications and referred her to Dr. Refvem. (R. pp. 101-102). When asked why she waited until the third visit with Dr. Donato to mention shoulder problems she was purportedly having since the work-accident, Claimant testified she had no reason to tell him of her shoulder because he was not going to treat it. (R. p. 333, line 2 – p. 334, line 5).

On a visit to MUSC Florence Orthopaedics on January 16, 2020, Claimant reported she was experiencing pain and weakness in her left shoulder pain but reported there was no injury to the left shoulder. (R. p. 103). Claimant denied telling Dr. Palutsis that there was no injury to her left shoulder at that visit. (R. p. 336, lines 14-21). Again, her testimony is not consistent with the medical records.

Claimant returned to Palmetto Family Medicine on February 5, 2020, reporting left shoulder and left arm pain. (R. p. 48). X-rays of her shoulder came back unremarkable, and she was referred to physical therapy. (Id).

On April 13, 2020, Claimant presented to OrthoCarolina with left shoulder pain. (R. p. 69). X-rays of the left shoulder revealed degenerative changes over the AC joint. Dr.

Rush referred Claimant for an MRI of her left shoulder and an EMG/NCS of the left upper extremity. (R. pp. 106-107). The MRI of Claimant's left shoulder revealed moderate to severe supraspinatus and infraspinatus tendinosis with partial articular surface tearing of the supraspinatus tendon, moderate degenerative changes of the AC joint, small joint effusion, synovitis, subacromial subdeltoid bursitis, and degeneration and fraying of the labrum and interarticular long head of the bicep tendinosis. (Id).

The record is absent of any shoulder complaints from the date of the accident until December 26, 2019. However, the shoulder is specifically mentioned at every visit after that date, although Claimant denied any injury to the shoulder when she saw the orthopedic. The preponderance of evidence supports the Commissioner's finding that Claimant specifically denied shoulder pain or symptoms for months after her work accident. The first medical note to contain a specific mention of the shoulder was December 26, 2019. Based upon her testimony, Claimant stated that her shoulder and arm were injured from the date of accident forward, that she knew where those body parts were located, and that she reported to the medical providers through both words and indication that she was having problems specifically with her shoulder; however, the medical records simply do not support that testimony. Further, the medical records do not support that Claimant ever complained of, or treated for, an alleged left shoulder or left arm injury for seven months after her accident at work. The testimony of Claimant constitutes substantial evidence to support the Commission's denial of the left shoulder and left arm injuries.

c. There is no evidence in the record to support Claimant's argument that she does not know where her shoulder is located.

Claimant argues in her Brief that she does not know precise medical terms, that she is fragile, and that she is not a medical expert in order to justify the lack of shoulder

complaints for seven months after this accident. In order to believe this argument, the Appellate Panel would have to suspend logical thought.

First, Claimant understands where her shoulder is located. When asked at the hearing about her shoulder and where it is located, she touched the top of her shoulder. (Hrg. Tr. pp. 57-58). Claimant may not understand medical anatomy, but she knows where her shoulder is located.

Second, Claimant testified that she showed every doctor where her shoulder/arm was hurting. At the hearing, when asked to touch the area where she was having pain that has been present since the day she fell, she touched and indicated the top of the shoulder down past her elbow. (R. p. 322, line 5 – p. 323, line 10; R. p. 296, line 24 – p. 298, line 3). She testified that the pain has been present since the fall, that the pain has not changed locations, and that she pointed to this area to all of her physicians. (R. p. 323, line 24 – p. 324, line 2). To believe Claimant's argument about imprecise anatomical terms, the Appellate Panel would also have to believe that all of her doctors could not correctly describe and record the location of her pain when she was pointing to the affected area.

The simple fact is that Claimant's testimony is not supported by the medical records of four medical practitioners over a period of almost seven months. The preponderance of the evidence shows that Claimant did not complain about her shoulder until seven months after the accident, yet then complained about the shoulder at every single visit thereafter. Claimant stated that her shoulder and arm were injured from the date of accident forward, that she knew where those body parts were located, and that she reported to the medical providers through both words and indication that she was having problems specifically with her shoulder; however, the medical records simply do not support that testimony.

d. There is substantial medical evidence to support the Commission's finding that Claimant did not prove compensable left shoulder or left arm injury related to her accident at work.

Where one relies upon expert medical testimony to show a causal connection between an injury and a subsequent condition, the testimony must meet the "most probably" rule and it is not sufficient under our case law to establish the condition in question "possibly", "could have", or "might have" resulted from the injury. Gambrell v. Burleson, 252 S.C. 98, 101, 165 S.E.2d 622, 623 (S.C. 1969) (citing Cross v. Concrete Materials, 236 S.C. 440, 114 S.E.2d 828 (S.C. 1960)).

On November 11, 2020, in his medical notes, Dr. Paul F. Rush of OrthoCarolina opined: "Persistent left shoulder pain with abnormal MRI as noted above. Most of these findings probably chronic which certainly could have been aggravated by her injury." (R. p. 48). The deposition of Dr. Paul Rush was taken on March 23, 2021. Dr. Rush testified Claimant's work-related injury could have possibly aggravated her pre-existing left shoulder problems (R. p. 440, lines 6-20), that he would have expected the symptoms for her left shoulder to have presented by the time of her June 17, 2019 appointment, that he would expect the symptoms of an aggravation of an underlying condition to manifest themselves much sooner than approximately seven months.

Dr. Rush testified that the MRI findings showed degenerative changes that would not have been caused by an accident at work but could have been aggravated by an accident at work. (R. p. 427, lines 6-10). Dr. Rush testified that if the fall at work aggravated those underlying conditions, he would have expected symptoms to occur, maybe not immediately, but certainly within a few weeks. (R. p. 428, line 13 – p. 430, line 4). Dr. Rush was then presented with the medical records immediately following Claimant's

accident. When asked about the first report to mention shoulder pain, dated December 26, 2019, Dr. Rush testified that he would have expected symptoms from an accident to appear much sooner. (R. p. 429, lines 8-15). He further testified that if her symptoms were related to the accident, they would have manifested sooner. (R. p. 429, line 22 – p. 430, line 4). Dr. Rush testified that the type of chronic findings that Claimant has in her shoulder most often do not present following an injury but occur as more of a gradual onset with symptoms that are progressive. (R. p. 430, lines 15-25). Dr. Rush testified that these types of symptoms are not at all uncommon for a 79-year-old individual. (R. p. 431, lines 2-7). Dr. Rush further testified that, if it was true that Claimant went six or seven months without any specific complaints of shoulder pain, it really calls into question whether her complaints were stemming from the work accident. (R. p. 443, line 22 – p. 444, line 3).

The testimony of Dr. Rush does not support a finding of compensability. His statements that her work accident "could have" aggravated her preexisting conditions is insufficient to meet the medical standard for expert testimony. Further, when Dr. Rush was presented with the overwhelming evidence that Claimant had no complaints and treatment for her left shoulder and left arm for seven months after the work accident, he stated that this really put into question the causal connection between this injury and work. (R. p. 443, line 22 – p. 444, line 3). That testimony, in combination with the fact that Claimant has a condition which is common for 79-year-olds, is substantial evidence to support denial of the left shoulder and left arm injuries.

The deposition of Dr. Palutsis was taken on May 7, 2021. Dr. Palutsis testified that he would not think that claimant's left shoulder complaints are related to her work accident if the first time she complained to a physician about her shoulder was about seven months

later. (R. p. 469, lines 5-25). Dr. Palutsis also testified he had a hard time saying that Claimant's upper arm complaints were related to her left shoulder because he was not the one examining her and did not have confirmation there actually was an injury to the shoulder. (R. p. 475, lines 4-12).

Dr. Palutsis testified that he took a history from the patient and entered into his initial report that "there was no injury to the left shoulder" based upon what Claimant told him in the initial visit. (R. p. 462, lines 9-23). Dr. Palutsis then authored an amended statement dated January 24, 2020, which indicated that Claimant gave a history of a work accident, but Dr. Palutsis admitted that he had no recollection of that but was simply going along with Claimant telling him that she got hurt at work and that his note to the contrary was incorrect. (R. p. 463, line 22 – p. 466, line 13). He simply created that report at Claimant's request after the fact. (R. p. 466). He further testified that if she hurt her shoulder at work in a traumatic injury, there would have been pain reasonably soon, usually within a few days. (R. p. 466, line 22 – p. 467, line 1). He indicated that he would normally expect symptoms to appear within a week or two of the accident, that it was certainly possible for symptoms to appear within one month after the accident, but two months would be too long, and any period longer would be less likely to be related to the trauma. (R. p. 467, line 2 – p. 468, line 7). Dr. Palutsis testified that his opinion as to causation of the left shoulder was based solely on Claimant's statement that she had an injury at work and immediately had symptoms thereafter. (R. p. 468, line 8 – p. 469, line 4). He was then shown a number of medical notes, which are specifically detailed above, which do not mention left shoulder complaints until December 26, 2019. Dr. Palutsis then gave the following testimony:

> Q Okay. If, in fact, it is true that the first time she complained to a physician about her shoulder was December 26, 2019, from an accident on May 30, 2019, which is about seven months, if that is true and that's accurate, would you think that her left shoulder complaints related to the work accident?
> A No.
> Q If on the other hand she had symptoms in her left shoulder within a week or two of the fall, it would be your opinion that that very well could be related?
> A Yes.
> Q Okay. Doctor, have your answers to my questions today been stated to a reasonable degree of medical certainty?
> A Yes. (R. p. 469, line 13 – p. 470, line 4).

Upon being presented with the full fact pattern in this matter, Dr. Palutsis testified that he would not think that Claimant's left shoulder complaints are related to her work accident if the first time she complained to a physician about her shoulder was approximately seven months later. Dr. Palutsis also testified that he had a hard time saying that Claimant's upper arm complaints were related to her left shoulder because he was not the one examining her and did not have confirmation that there was actually an injury to the shoulder. Again, this is substantial evidence to support the denial of the left shoulder and left arm injuries.

Based on the evidence presented, and in its discretion, the Commission did not place great weight on the opinion of Dr. Geier given Claimant saw only saw him for a one-time evaluation to obtain a report in anticipation of litigation. Both of Claimant's treating physicians, Dr. Rush and Dr. Palutsis, testified that it was unlikely that Claimant's problems with her left shoulder and left arm were related to the work accident if her symptoms did not surface for months after the accident. Neither doctor was able to state to a reasonable degree of medical certainty that Claimant's left shoulder or left arm problems were causally related to a work accident based upon the specific circumstances presented

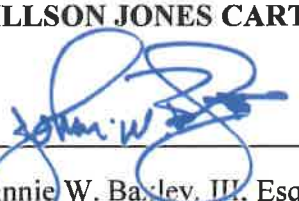
to them (namely that Claimant did not complain about shoulder problems until December 2019). The substantial medical evidence also supports that Claimant's left shoulder and left arm problems are not causally related to her work accident.

CONCLUSION

Based on the foregoing, this Court should affirm the Appellate Panel Decision and Order of the SC Workers' Compensation Commission dated June 24, 2022.

Respectfully submitted,

WILLSON JONES CARTER & BAXLEY, P.A.



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CERTIFICATE OF COUNSEL

The undersigned certifies that this Final Brief of Respondents complies with Rule 211(b), SCACR.

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