

State of South Carolina
Workers' Compensation Commission

APPELLATE PANEL DECISION AND ORDER

COMMISSION PANEL: The Honorable Melody L. James; The Honorable Gabe Coggiola; and
The Honorable Michael Campbell.

SCWCC File No.: 2202565

Rusty Young,

Claimant,

v.

Confluence Outdoor, Inc.,

Employer,

and

Great American Alliance Insurance Co.,

Carrier,

Defendants.

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SC Court of Appeals

AFFIRMED

Hearing Held in Richland County, South Carolina,
on June 16, 2025

Per notice timely and properly served upon all Parties of Interest.

Appearances: Richard Charles Alexander, Esq., of Shelly Leeke Law Firm,
LLC., represents Claimant/Appellant.

Benjamin M. Renfrow, Esq., of Wilson Jones Carter & Baxley,
P.A., represents Defendants/Respondents.

Court Reporter: Amber Scarborough, 1230 Richland St, Columbia, SC 29201,
803-252-3445, contact@creelreporting.com.

Filed: August 26, 2025

I. STATEMENT OF THE CASE

Single Commissioner

A hearing was held before a Single Commissioner on June 19, 2024, pursuant to the parties' Forms 50 and 51. Claimant alleged he sustained neck and right shoulder injuries from a work accident on March 8, 2022. In addition to Claimant's alleged neck and right shoulder injuries, he also previously asserted injuries to his right arm, right hand, and right fingers in the same accident. Following a Pre-Hearing Conference between the parties, Claimant amended his claim to exclude the alleged right arm, right hand and right finger injuries. (Tr. p. 6). Claimant asserted he was not at maximum medical improvement for his injuries. Claimant sought a finding of compensability and additional medical treatment for the same. Claimant further sought Temporary Total Disability from March 11, 2022, to the present and continuing. In the alternative, Claimant sought a permanency determination.

Defendants denied Claimant's claim in its entirety on a number of grounds: (1) fraud in the application, (2) Claimant's credibility, (3) no accident occurred, (4) Claimant's current condition is not related to his employment, and (5) Claimant cannot satisfy his burden of proof that he sustained a compensable injury by accident. (Tr. p.7).

The Single Commissioner determined, *inter alia*: "[C]laimant (1) failed to meet [his] burden of proof that he sustained a compensable injury, and (2) is not entitled to medical benefits, temporary or permanent disability compensation, or any other ancillary costs associated with this claim." (Single Commissioner's Decision and Order filed on February 27, 2025, p. 48.)

Appellate Panel

This matter is now before the South Carolina Workers' Compensation Commission's Appellate Panel pursuant to issues raised on appeal by Claimant. Within the statutory period, Claimant filed a Form 30, Request for Commission Review. Accordingly, the parties presented before the

Appellate Panel on June 16, 2025.

II. SINGLE COMMISSIONER FINDINGS OF FACT AND CONCLUSIONS OF LAW

FINDINGS OF FACT

1. Employee/Claimant, Employer, and Carrier are subject to and bound by the terms and provisions of the South Carolina Workers' Compensation Act, as amended, with Rusty Young as Claimant, Confluence Outdoor, Inc. as Defendant Employer, and Great American Alliance Insurance Company as Defendant Carrier.

2. Claimant's average weekly wage at the time of the accident was \$636.08, and his compensation rate was \$424.07. This finding of fact is based on the stipulation of the parties.

3. Claimant initially alleged that he sustained work-related injuries on March 8, 2022, to his right shoulder, right arm, right hand, right fingers, and cervical spine while removing a kayak from its mold.

4. After the Pre-Hearing Conference between the parties, Claimant amended his alleged injuries to exclude his right hand and right fingers. (Tr. p.6)

5. Defendants denied that Claimant sustained compensable injuries or that the alleged work-related accident even occurred on March 8, 2022.

6. Claimant previously filed a workers' compensation claim with the Commission: WCC File No. 1806973. While working for Employer DAA Draexlmaier Automotive of America on January 31, 2018, Claimant allegedly sustained injuries to his left ankle, foot, and leg when he landed wrong after jumping up to reach a part. This matter concluded with a Settlement Agreement that was filed with the Commission on September 25, 2019.

7. Prior to settling that case (WCC File No. 1806973), Claimant testified in deposition that his MRIs showed a large amount of cartilage missing from the side of his knee and that his back

had an annular bulge, which caused back pain. (Commission File and Defendants' APA #1 1)

8. Claimant testified he believed that he had 60% function in his back in the January 31, 2018 claim. (Commission File and Defendants' APA #11)

9. Claimant presented to Live Well Chiropractic between October 21, 2019 through November 22, 2019 to address lumbo-sacral and upper to mid cervical pain and tenderness. He also sought treatment for moderate muscle spasms in his lumbar and posterior cervical neck during the January 31, 2018 claim. (Defendants' APA #15)

10. Claimant filed a second workers' compensation claim with the Commission (WCC File No. 2007031). While working for Employer FITESA USA, LLC, on June 8, 2020, Claimant sustained injuries to his back and right hip when he fell down seven stairs. This matter concluded with a Settlement Agreement that was filed with the Commission on February 24, 2021. (Commission File and Defendants' APAs #8, 10)

11. Prior to settling that case (WCC File No. 2007031), Claimant testified in deposition that the accident resulted in him landing on his back. (Commission File and Defendants' APAs #8, 10)

12. Claimant testified as a result of the June 8, 2020 claim he experienced pain radiating from his mid to low back following the accident. (Commission File and Defendants' APAs #8, 10)

13. Claimant testified as a result of the June 8, 2020 accident he had ongoing hip pain, which bothered his back and ankle. (Commission File and Defendants' APAs #8, 10)

14. Claimant was involved in a motor vehicle accident (MVA) on April 3, 2021, unrelated to his employment. (Defendants' APAs #15, 19)

15. On the date of the MVA, Claimant presented to an Emergency Room in Greenville, South Carolina. Claimant reported left foot, ankle, and neck pain. (Defendants' APAs 868, 926, 931)

16. The Emergency Room diagnosed Claimant with a sprain of the left ankle, unspecified ligament, and an acute cervical strain. (Defendants' APAs #15, 19)

17. Claimant presented to Live Well Chiropractic between April 6, 2021, through July 12, 2021, to address injuries sustained in his MVA on April 8, 2021. (Defendants' APAs # 15, 19)

18. Live Well diagnosed Claimant with a sprain of the thoracic spine, segmental somatic dysfunction of the thoracic region, pain in the thoracic spine, pain in the left ankle and joints and left foot, sprain of ligaments of cervical spine, segmental somatic dysfunction of the cervical region, and cervicgia. (Defendants' APAs #15, 19)

19. Claimant testified he injured his ankle and neck during his MVA on April 3, 2021. (Defendants' Ex. E, p. 30)

20. Claimant testified during his deposition in this matter (WCC File No. 2202565) that on August 23, 2022, he worked for Vermeer for about two months prior to starting work with Confluence Outdoor, Inc. (Defendants' Ex. E, p. 17)

21. Claimant testified Vermeer, a previous employer, terminated his employment for the stated reason of him being hostile in the workplace. However, he testified that he was not the hostile party. (Defendants' Ex. E, p.18-19, Tr. 28)

22. Claimant testified Confluence hired him for a molding position. (Tr. 11)

23. Claimant testified he told Confluence about his prior ankle surgery, but not his other injuries or conditions because Confluence only specifically asked if he had any previous surgeries. (Defendants' Ex. E, p.32)

24. Claimant informed Confluence about his previous ankle surgery on a post-job offer medical questionnaire, which was signed and dated by Claimant and witnessed by another party on January 5, 2022. (Defendants' APA #12, p.510)

25. Though not specifically numbered the first question on the questionnaire asked: "Have you ever been treated for any of the following conditions or diseases?" Among the listed "conditions or diseases" was "back pain or injury." Claimant did not select this option or any of the other "conditions or diseases" listed. (Defendants' APAs #12, p.518)

26. Though not specifically numbered the second question on the questionnaire asked: "Please list any condition, injury, or disease for which you have been treated in the past three (3) years. If no treatment has been provided, state 'none.' Please list any medical providers and dates when applicable." Claimant answered: "none". (Defendants' APA # 12, p.518)

27. Though not specifically numbered the third question on the questionnaire asked: "Have you ever been hospitalized? If so, for what condition? If you have not been hospitalized, state 'no.' Please list any physicians or hospitals and dates when applicable." Claimant answered: "no". (Defendants' APA #12, p.518).

28. Though not specifically numbered the fourth question on the questionnaire asked: "Have you ever been treated for any mental or psychological condition? If no such treatment has been received, state 'none'. Please list any physicians and dates when applicable." Claimant answered: "For depression over four years ago." (Defendants' APA #12, p.518)

29. Though not specifically numbered the fifth question on the questionnaire asked: "Is there any health-related reason you may not be able to perform the job you have been offered? If yes, please explain." Claimant answered: "none." (Defendants' APA #12, p.518)

30. Though not specifically numbered the sixth question on the questionnaire asked: "Have you had a major illness or injury in the last five (5) years? If none, state 'none.' Please list any physicians and dates when applicable." Claimant answered: "none". (Defendants' APA #12, p.510)

31. Though not specifically numbered the seventh question on the questionnaire asked: "Do you have any physical defects or impairments which preclude you from performing certain kinds of work? If yes, describe such defects and specific work limitations. If these limitations have been prescribed by a medical provider, please provide the name of said medical provider." Claimant answered: "I have a metal screw in left ankle, but the doctor cleared me over three years ago." (Defendants' APA #12, p.510).

32. Though not specifically numbered the eighth question on the questionnaire asked: "Are you taking any prescribed drugs that can inhibit or impair your ability to perform the job that you have been offered? If yes, state the medication and the reason for taking it, as well as the prescribing medical provider." Claimant answered: "no". (Defendants' APA #12, p.510)

33. Though not specifically numbered the final question on the form asked: "Have you ever been treated for drug addiction or alcoholism? If yes, identify the medical provider and dates of treatment." Claimant answered: " no". (Defendants' APA #12, p.510)

34. I find Defendants placed (or at least the formatting of the document indicates) the second page of the post-job-offer medical questionnaire behind Claimant's employment application, a document which has not been submitted in its entirety. (Defendants' APA #12, p.510, 518-519) *See McDevitt & Street* defense, *infra* in Conclusions of Law.

35. Claimant presented to an Emergency Room in Greenville, South Carolina, on two occasions between May 10, 2016, through July 7, 2017, due to suicidal ideations, hallucinations, and in involuntary psychiatric evaluation. (Defendants' APA #14)

36. The Emergency Room diagnosed Claimant with suicidal ideations and cocaine and alcohol abuse during former visits. He was diagnosed with an unspecified psychosis and nicotine dependence during the latter visit. The medical records from that visit also indicated Claimant had

a history of schizophrenia. (Defendants' APA 607-659)

37. On August 23, 2022, Claimant testified Confluence terminated his employment after he and another employee had an altercation. He testified that he could not remember the name of the person with whom he got into an altercation, though he insinuated that the person "used to mess with [him] all the time." (Claimant's deposition p.36)

38. Claimant testified he was "sweeping the whole building" for Confluence prior to the altercation. Although his [deposition] testimony did not indicate whether he used machinery to complete this task, his testimony at [the] hearing indicated that this task was performed manually. (Claimant's deposition p.35, Tr. p.19, 52)

39. Claimant testified he had neck pain prior to his alleged work-related accident, but his prior pain was not as bad. (Defendants' Ex. E, p.44, Tr. 55-57, 81-82)

40. Claimant testified he received treatment for his prior neck pain from Live Well Chiropractic. (Tr. 93-94, Defendants' APAs 679-686, 694, 702-03, 710-16, 738, 767, 771, 814, 833)

41. Claimant testified his alleged work-related accident occurred when he attempted to remove a kayak stuck in its mold. (Tr. 12-13, Defendants' Ex. E 53-54)

42. Claimant testified 2-3 people were supposed to assist with this process, but the other person (the one with whom he later had an altercation) went home early that day. (Tr. 12-13, Defendants' Ex. E 53-54)

43. Claimant testified he told a supervisor about the work-related accident the same day that it occurred. (Tr. 12-13)

44. Claimant testified he would like to see video footage of his work-related accident, but he did not believe Confluence's surveillance cameras were operational. Defendants provided Claimant with video surveillance of the location where Claimant's work-related accident allegedly

occurred. I find that the video footage in evidence does not show Claimant's alleged work-related accident on March 8, 2022. (Defendants' APA #16)

45. Claimant also testified at his deposition in this matter that a provider told him that his current shoulder pain was related to his work-related accident with Confluence, rather than his MVA or another event. I find the greater weight of the evidence indicates Claimant failed to inform his medical providers about his prior accidents while undergoing treatment for injuries allegedly sustained while working for Confluence on March 8, 2022. Dr. Walter Grady's testimony, *infra*, further stretches the credulity of Claimant's testimony. (Claimant's deposition, Defendants' Ex. E p.58) *See also* Finding of Fact No. 117.

46. Claimant testified the injection he received to alleviate his shoulder pain did not work. (Claimant's deposition p.20)

47. Claimant testified he had never been treated for any type of mental or psychological problem other than depression. The evidence in the record indicates Claimant's testimony is inaccurate. *See* Finding of Fact No. 28.

48. Claimant testified his job with Cintas, the employer immediately prior to Confluence, entailed packing scrubs and uniforms worn by medical professionals. I find Claimant testified to his "packing" responsibilities with Cintas more than seven months before his cervical fusion with Dr. Van Pelt on April 11, 2023. (Claimant's APA #3)

49. Claimant testified during his deposition in this matter on January 11, 2024, that he learned the reason for the pain in his hand and arm was due to carpal tunnel syndrome. (Claimant's deposition, Defendants' Ex. E p.20)

50. Claimant testified his providers determined that his current symptoms originated from his neck. (APA 38, Defendants' Ex. E p.50-51, 58)

51. Claimant testified the cervical fusion performed by Dr. Van Pelt helped him, but he still had good and bad days. (Tr. 22, APA 190, 211)

52. Claimant testified he did not inform Cintas about his alleged work-related injury with Confluence until after he was hired. He did not want to give Cintas "any reason to do what they was doing." (Claimant's deposition, Defendants' Ex. E p.23)

53. Claimant testified he did not want subsequent employers to perceive him as a liability and modify his job duties accordingly. So he did not tell them about his workers' compensation claim with Confluence. (Tr. 44, 64)

54. Claimant began his employment with Cintas on April 4, 2022, a month after his alleged injury with Confluence. He separated from employment with Cintas after filing and settling an EEOC claim. (Defendants' APA #20)

55. Claimant next began working for Allied University as a security guard. He began employment on or around June 6, 2023. Claimant selected the following option on his Voluntary Self-Identification or Disability form: "No. I do not have a disability and have not had one in the past." (Defendants' APA #23)

56. On January 11, 2024, Claimant testified prior to starting work with Allied, he underwent a physical that required him to up "70 flights of stairs" under timed conditions. (Claimant's deposition p.26)

57. Claimant testified his job with Allied required him to apprehend people and could be physically demanding is not handled correctly. (Claimant's deposition p.12, 18)

58. Claimant testified a patient kicked him in the groin while attempting to apprehend her. He and a coworker had to "manhandle" the patient that kicked him. He testified that he did not

need to go to the doctor after that incident but instead chose to "walk [the pain] off." (Claimant's deposition p. 12, 18, 19)

59. Claimant testified during the hearing on June 19, 2024, that he could not remember the name of the supervisor that he allegedly reported his work-related accident to on March 8, 2022 (Tr. p.13)

60. Claimant testified he was uncertain about the time his work-related accident occurred but guessed "around 11:00" when asked by his supervisor. (Tr. p.15)

61. Claimant testified he did not see his alleged incident on the window of surveillance footage from 10:52-11:07 a.m. provided by Defendants. (Tr. p.14-15)

62. Claimant testified he applied to work for Confluence four months after his treatment for his MVA-related neck injury from Live Well Chiropractic came to an end. (Tr. p.40)

63. Claimant testified he was not forthcoming on his post-job-offer medical questionnaire for Confluence about his health history because he did not believe it was relevant to his job duties. Claimant further testified he did not recall being diagnosed with schizophrenia. (Tr. p.41, 50)

64. Claimant testified he observed his potential job duties with Confluence before he accepted the position. (Tr. p.49)

65. Claimant testified he read the post-job-offer questionnaire in full before signing it on January 5, 2022. (Tr. p.45)

66. Claimant testified he understood that the purpose of the questionnaire was not necessarily to rescind his offer of employment if he were honest in his responses, but do Confluence could attempt to place him in a suitable position. (Tr. p.45-46)

67. Claimant testified he was afraid to be honest on the questionnaire. Claimant further testified that he already felt like he was sometimes judged on his appearance alone. (Tr. p.44)

68. Claimant testified he "wasn't planning on going to [Confluence] and getting hurt. It was from something that wasn't fixed. It was just bandaged up." (Tr. p.47)

69. Claimant attempted to walk back this testimony by reiterating that he believed that disclosing his health history to Confluence *was* not relevant to his job duties. (Tr. p.48)

70. Claimant testified he never knew anyone to be dishonest or had a problem with anyone at Confluence prior to his alleged work-related accident on March 8, 2022. (Tr. p.51)

71. I find Claimant's hearing testimony does not align with his prior deposition testimony on August 23, 2022, where he indirectly asserted that he was consistently harassed by the unnamed employee.

72. Claimant testified he saw a chiropractor for pain in his cervical and lumbar spine in 2019, two years before the MVA. (Tr. p.56)

73. Claimant testified he saw a doctor to treat his headaches prior to his alleged work-related accident on March 8, 2022. (Tr. p.57)

74. I find that Claimant's hearing testimony does not align with his prior deposition testimony on January 11, 2024, where he testified his headaches were the result of his work-related accident on March 8, 2022. (Claimant's deposition p.36)

75. Claimant testified there were no witnesses to testify to his alleged work-related accident on March 8, 2022, present at the hearing. (Tr. p.58)

76. After being terminated by Confluence, Claimant testified he was dishonest on his Cintas application because he thought it would help him get the job. (Tr. p.64)

77. Claimant testified it appeared he had a pattern of victimization in the work place.
(Tr.p.68)

78. Claimant testified that he did not tell Dr. Christopher Van Pelt, the provider treating him for his present neck injury about his *prior* neck injury sustained in the MVA because he did not know he "was supposed to." (Tr. p.81)

79. Claimant testified that he did not tell Dr. Grady about his prior neck injury sustained in the MVA because the doctor did not ask. (Tr. p.84)

80. I find Claimant's hearing testimony does not align with Dr. Grady's testimony, *infra*, where the doctor stated his notations from Claimant's visit reflected Claimant answered "no" when asked if he had "received prior treatment for the same problem for which he was being evaluated." (Dr. Walter Grady deposition p.38)

81. Claimant testified Dr. James Behr assigned 0% impairment to Claimant on February 25, 2021, following his second workers' compensation claim with the Commission, *supra* (WCC File No. 2007031). (Tr. p.93)

82. I find following Dr. Behr's impairment rating, Claimant was involved in an MVA on April 3, 2021, where he sustained a neck injury. I further find that Claimant presented to Live Well Chiropractic through July 2021 to treat this neck injury and other conditions. (Defendants' APAs #15, 19)

83. Claimant testified he quit working for Allied because he wanted to spend more time with family and did not want to risk injury. (Tr. p.87-88)

84. Claimant testified that he is now employed by Cook Out Restaurant. (Tr. p.24)

85. The substantial weight of the evidence shows Claimant has provided untruthful, evasive, and inconsistent testimony throughout the course of this claim. Accordingly, I find

Claimant's testimony lacks credibility and have afforded it the weight I deemed it deserved.

86. In accordance with *Crane*, my findings on this matter do not conclude here. *Crane v. Raber 's Discount Tire Rack*, 429 S.C. 636, 842 S.E.2d 349 (2020). In *Crane*, the claimant was a mechanic who sought workers' compensation benefits for hearing loss and brain injuries he allegedly suffered in a work-related accident. *Id.* at 350. A single commissioner determined the claimant lacked credibility and, primarily on this basis, denied his claim. *Id.* at 352. On appeal, the court held: "[The] Commission erred in denying claimant's claims based on Commission's finding that claimant's testimony was not credible without explaining any basis on which claimant's credibility could justify ignoring objective medical evidence." *Id.* at 355. The court remanded the case back to the Commission for a new hearing. *Id.*

87. In this case, Claimant presented to AFC Urgent Care on March 9, 2022, the day after his alleged work-related accident. He reported shoulder pain. The provider took an X-ray of Claimant's right shoulder. Impression: "No acute osseous abnormality." (Claimant's APA #2)

88. Claimant presented to Piedmont Orthopaedics between March 30, 2022, through July 20, 2023. During this time span, Claimant reported shoulder and neck pain. Nurse Practitioner Duncan primarily attended to his reported shoulder symptoms. (Claimant's APA #3)

89. Claimant had an MRI of his right shoulder on April 4, 2022. Impression: "Edema-like marrow signal in the distal acromion and distal clavicle with trace fluid in the acromioclavicular interval. No rotator cuff or labral pathology." (Claimant's APA #3)

90. NP Duncan noted Claimant's shoulder pain was improving but may be exacerbated by cervical spine pain and radiculopathy. He diagnosed arthralgia of the right acromioclavicular joint and cervical radiculopathy. (Claimant's APA #3)

91. Claimant had an MRI of his cervical spine on July 19, 2022. Impression: "Multilevel

cervical spondylosis as detailed level by level. ... Evidence of marrow reconversion. Annular fissure at C5-6.” (Claimant's APA #3 and Defendants' APA #12)

92. Dr. Van Pelt primarily attended to Claimant's cervical spine injury from September 1, 2022, through July 20, 2023. He noted, Claimant's ..clinical history and physical exam is a bit of a diagnostic dilemma. Claimant does not have neuropathic pain in the right upper extremity. Interestingly, his cervical MRI shows predominantly left-sided disc pathology. I would recommend an EMG and nerve conduction study of this right upper extremity for further delineation.” (Claimant's APA #3)

93. Dr. Van Pelt diagnosed cervical spine stenosis, cervical degenerative disc disease, and herniation of cervical intervertebral disc radiculopathy. (Claimant's APA #3)

94. Dr. Van Pelt opined to a reasonable degree of medical certainty that Claimant's work-related accident on March 8, 2022, most probably caused his cervical and right arm symptoms. (Claimant's APA #3)

95. Dr. Van Pelt performed Claimant's cervical spine fusion surgery on April 11, 2023. (Claimant's APA #3)

96. Dr. Grady performed Claimant's IME on November 17, 2023, to address Claimant's ongoing neck and shoulder pain allegedly sustained in a work-related accident on March 8, 2022. (Claimant's APA #6)

97. Dr. Grady opined to a reasonable degree of medical certainty that Claimant has “a 51% [cervical] spine impairment, a 5% right upper extremity impairment, an 8% right shoulder impairment, and a 21% total whole person impairment.” (Claimant's APA #6)

98. Dr. Phillip Hodge, a board certified neurosurgeon, reviewed Claimant's medical records on May 24, 2024, and opined:

[Claimant] claims he was injured on March 8, 2022, lifting a boat from a mold. [Claimant] complained of right sided neck pain and right arm pain with numbness and tingling to the 3-5 digits. An evaluation of the shoulder was done that showed acromioclavicular arthritis and had some exam findings consistent with this. Injections to this region did not seem to help.

MRI shows multilevel spondylitic changes. C4-5 spondylitic disc protrusion with moderate central canal stenosis. C5-6 annular tear with left C5-6 disc protrusion with severe stenosis. C6-7 left sided spondylitic disc protrusion with moderate stenosis. These findings are degenerative in nature except for an annular fissure. An annular fissure can be acute but can also be a chronic finding. It can be symptomatic or asymptomatic. Also, the neural compression is more pronounced on the left, but the patient's symptoms are only on the right side.

He had an EMG/NCS [that] showed right C7 radiculopathy and mild carpal tunnel syndrome.

Ultimately, I cannot say beyond a reasonable doubt that the imaging findings are related to the injury. His symptoms may have been related to the imaging findings, but do not exactly fit. You must depend on the patient's subjective report of symptoms and timing to determine causality. Given the information I have reviewed, there are reasons to believe that he may not have reported the injury/condition accurately.

(Defendants' APA #21, p.1221)

99. Dr. Van Pelt testified during his deposition in this matter on September 28, 2023, that he is a board certified orthopedic surgeon. He testified that his records do not indicate that Claimant had prior neck problems and it was generally his practice to ask patients about prior neck problems. (Claimant's Ex. B p.264).

100. He testified that he was not aware of Claimant's prior workers' compensation claims or his MVA on April 3, 2021. He had never seen or reviewed Claimant's prior chiropractic records, including those from his April 2021 MVA. (Claimant's Ex. B, p. 265-66)

101. Dr. Van Pelt testified him knowing about Claimant's previous cervical injury sustained in April 2021 would not have changed his opinion that Claimant's subsequent neck injury was caused by his work-related accident on March 8, 2022. (Claimant's Ex.B p.269)

102. He opined the AC joint injection administered by NP Duncan did not provide Claimant great pain relief. (Claimant's Ex.B p.274)

103. He opined that annular fissures, tears in the outer lining of a spinal disc, will present on MRIs for maybe six to eight months after an injury. (Claimant's Ex.B p.277)

104. He opined the annular fissures present on Claimant's cervical MRI indicated Claimant's neck injury was acute. (Claimant's Ex.B p.277)

105. He opined Claimant's April 2021 MVA was too remote intime for it to have caused the annular fissures on Claimant's cervical MRI. He opined Claimant's annular fissures were relatively recent. He opined the "diagnostic dilemma" that he noted on Claimant's medical records was due to decussating (intersecting to form an X) fibers in the spinal cord that crossed left or right. He further opined the cross action could cause symptoms on either side of the patient. He opined the side of Claimant's body impacted in the MVA would have little bearing on which side of his neck would be in pain. (Claimant's Ex.B p.278)

106. He opined Claimant's EMO was suggestive of very right-sided C7 radiculopathy and mild carpal tunnel syndrome. He opined the EMO confirmed Claimant's symptoms originated in the cervical spine. (Claimant's Ex.B p.283)

107. Dr. Grady testified during his deposition on January 31, 2024, that he is a board certified orthopedic surgeon. He performed Claimant's IME on November 17, 2023. (Claimant's Ex. C, APA 306, p.7, 307, p.10)

108. Dr. Grady opined annular fissures were not always acute problems. He opined annular fissures could be present for many years. (Claimant's Ex.C p.308)

109. Dr. Grady testified he was not aware of Claimant's prior workers' compensation claims or his MVA on April 3, 2021. Nor was he aware that Claimant had sought treatment for an extensive period from Live Well Chiropractic following the April 2021 MVA. (Claimant's Ex.C p.309)

110. He opined the multilevel cervical spondylosis present on Claimant's cervical MRI could be degenerative in nature and did not have to come from a traumatic event. (Claimant's Ex.C p.311)

111. He opined the marrow reconversion present on Claimant's MRI could be associated with trauma, but could also be associated with a person who smokes. He further opined that this condition could also be degenerative. He opined people who have cervical spondylosis and marrow reconversion oftentimes have annular fissures. (Claimant's Ex.C p.311)

112. He opined there was no "way to look at this MRI report, or anything, and tell or give an opinion to a reasonable degree of medical certainty as to whether any of these problems were the result of trauma [or] just the wear and tear of life." (Claimant's Ex.C p.311)

113. He opined the severe stenosis present on Claimant's cervical MRI was degenerative pathology that resulted from an aggravation to a preexisting condition. (Claimant's Ex.C p.312)

114. He testified for him to opine to a reasonable degree of medical certainty about a patient aggravating a preexisting condition, he would need to have a baseline from a prior MRI to compare against a post-injury MRI. Without a baseline, he could not determine from an MRI or report whether Claimant's aggravation occurred before or after his work-related accident on March 8, 2022. (Claimant's Ex.C p.312)

115. He testified Claimant's chief complaints during the IME were right-side dominant shoulder and neck pain. (Claimant's Ex.C p.312)

116. He opined it was peculiar that Claimant's spinal stenosis and foraminal narrowing presented more on the left side of his spine, while his radicular symptoms presented more on the right side of his spine. (Claimant's Ex.C p.312)

117. He testified Claimant responded "no" when asked during his IME if he had received prior treatment for the same problems for which he was being evaluated. (Claimant's Ex.C p.314)

118. He testified he could not opine to a reasonable degree of medical certainty that any of Claimant's conditions were aggravated by a work-related injury on March 8, 2022. (Claimant's Ex.C p.314)

119. Dr. Grady testified since Dr. Van Pelt was Claimant's treating physician he saw more of and knew more about Claimant. Therefore, he agreed with his opinion that Claimant's cervical and right arm symptoms were probably caused by a work-related accident on March 8, 2022. (Claimant's Ex.C p.315)

120. He testified he did not know if Dr. Van Pelt knew about the injuries Claimant sustained before his work-related accident on March 8, 2022. He testified he took Claimant at his word that "something happened" to him on March 8, 2022. (Claimant's Ex.C p.317)

121. Dr. Van Pelt opined the cause of Claimant's injuries were a work-related accident on March 8, 2022. (Claimant's APA #3)

122. I find the crux of Dr. Van Pelt's opinion was the appearance of annular fissures on Claimant's MRI. (APA 277-78)

123. Dr. Van Pelt further opined the appearance of annular fissures on Claimant's MRI indicated Claimant's injury was acute and thus most likely caused by Claimant's most recent at-work

accident and not by something more remote in time. (APA 277-78)

124. Dr. Grady examined Claimant and reviewed the medical records made available to him. Similarly, Dr. Hodge reviewed Claimant's medical records. Both doctors independently formed the same opinion regarding annular fissures: they can be acute or chronic. Dr. Grady also opined that without a baseline, a provider could not accurately determine from an MRI or report whether Claimant's injuries were caused or aggravated by an event other than Claimant's alleged work-related accident on March 8, 2022. (APA 311-12, 1221)

125. I find the opinion of Dr. Van Pelt, as Claimant's treating physician, would generally be afforded great weight. However, his foremost basis for assigning causation to Claimant's alleged work-related accident on March 8, 2022, was unilaterally contradicted by two other providers. Further, Dr. Van Pelt did not know about Claimant's prior neck injury, but testified that knowing about Claimant's prior cervical spine injury sustained in April 2021 would not have changed his opinion that Claimant's neck injury was caused by his work-related accident on March 8, 2022. Dr. Van Pelt failed to admit knowing about Claimant's prior injuries to a body part, especially those relatively recent in time, which could have some bearing on the present condition of that body part. (Claimant's Ex.2 p.269)

126. Dr. Van Pelt's findings are not supported by the greater weight of the evidence. I find his opinion lacks credibility and have afforded it the weight I deemed it deserved.

127. Though he testified to findings significantly different than those of Dr. Van Pelt, Dr. Grady ultimately deferred to Dr. Van Pelt's opinion as to causation since he was Claimant's treating physician. Accordingly, I too find his opinion as to causation lacks credibility and have afforded it the weight I deemed it deserved.

128. I find Dr. Hodge's opinion aligns with the preponderance of the medical evidence

that the cause of Claimant's present symptoms are idiopathic in nature, as he suffered a series of accidents from 2018 to 2021 that affected his back to varying degrees. The last of these accidents occurred only nine months before Claimant began working for Confluence. Further, the preponderance of non-medical evidence does not support a finding that Claimant was involved in a work-related accident on March 8, 2022. Accordingly, I find the opinion of Dr. Hodge to be credible and have afforded it the weight I deemed it deserved.

129. The *Linen* court held that the Commission, may not rest its determinations on surmise, conjecture or speculation. *Linen v. Ruscon Constr. Co.*, 332 S.E.2d 211, 212 (1985).

130. I can only consider the evidence before me, which includes: the medical records; the providers' testimony; Claimant's untruthful, evasive and inconsistent testimony; no footage of the incident from the available video surveillance or eye witnesses testimony; Claimant's MVA where he sustained a neck injury less than a year before his work-related accident on March 8, 2022, which allegedly caused or aggravated an injury to the same body part; Claimant's prior workers' compensation accidents where he sustained injuries to and received treatment for his back; and Claimant's less than stellar work history where he was terminated from a spate of employment for cause (ex. hostility), or separated from employment under less than ideal circumstances.

131. I find the substantial weight of the evidence shows Claimant has not met his burden of proof that his claim is causally related to an alleged work-related accident on March 8, 2022.

132. Defendants raised a Fraud in the Application (McDevitt & Street) defense.

133. The *Cooper* court addressed Fraud in the Application after the defendants appealed the Commission's award of benefits to the claimant. *Cooper v. McDevitt & St. Co.*, 196 S.E.2d 833, 834 (1973). The defendants argued the claimant should not be entitled to recover workers' compensation benefits for his injury when he knowingly and intentionally falsified his pre-employment questionnaire as to his back injury. *Id.* at 835. The court held "[T]here was nothing in

[the claimant's] application to alert his employer ...that he had a previous back injury. The employer, in the absence of notice to the contrary, had the right to assume the truthfulness of the statements contained in the appellant's application." *Id.* at 836. **McDevitt & Street Defense:** The Cooper court established three factors that "must be present before a false statement in an employment application will bar benefits: 1.) The employee must have knowingly and willfully made a false representation as to his physical condition. 2.) The employer must have relied upon the false representation and this reliance must have been substantial factor in hiring. 3.) There must have been a causal connection between the false representation and the injury." *Id.* at 835.

134. Employment Application: In accordance with Finding of Fact No. 34 (*supra*), Defendants submitted two pages of Claimant's four page employment application. There is one question on the submitted documentation (Defendants' APA No. 12. pp. 508-509) that directly addresses the issues at bear in this matter. The question is as follows: "Are you able to perform the essential functions of the job for which you are applying either with or without reasonable accommodations?" Claimant answered: "Yes".

135. The qualifying clause in this question: "...either with or without reasonable accommodations," does not substantiate a finding that Claimant "knowingly and willfully made a false representation as to his physical condition" on his employment application. *Id.* at 835. Therefore, Defendants have not satisfied the first factor of the McDevitt & Street defense.

136. To satisfy the second factor of the McDevitt & Street defense, Defendants must have relied upon Claimant's false representation and this reliance must have been a substantial factor in Claimant's hiring. *Id.* at 835. Referring back to the question on Claimant's employment application, Claimant affirmed he could perform the "essential functions" of his job "either with or without reasonable accommodations". The question's lack of specificity as to "essential functions," coupled with the qualifying clause, does not substantiate a finding that Defendant Employer substantially

relied on Claimant's response. This is further evidenced by Defendant- Employer allowing Claimant to observe his potential job functions prior to hire (Hr. Tr. p. 49.), but not taking any additional steps to ensure he could actually perform those job functions before an offer of permanent employment was made (ex. a trial period). Therefore, Defendants have not satisfied the second factor of the McDevitt & Street defense.

137. Defendants must establish a causal connection between Claimant's false representation and his injury to satisfy the third factor of the McDevitt & Street defense. Circling back to the question on Claimant's employment application, Claimant's simple "yes" to a question that has already been established as lacking specificity in one respect (i.e. "essential functions"), but broadening its scope in another (i.e. "reasonable accommodations), does not substantiate a finding that a causal connection exists between Claimant's response and his injury. Therefore, Defendants have not satisfied the third factor of the McDevitt & Street defense.

138. **Post-Job Offer Medical ...Questionnaire:** Claimant omitted a significant amount of information about his health history on Defendant-Employer's medical questionnaire. For example, he did not inform Defendant-Employer about the prior injury to his cervical spine. Claimant's glaring omissions on the questionnaire (for a job that is physical in nature) substantiates a finding that Claimant "knowingly and willfully made a false representation as to his physical condition" on his post-job offer medical...questionnaire. Therefore, Defendants' have satisfied the first factor of the McDevitt & Street defense.

139. Though Claimant omitted a significant amount of information on his questionnaire, the evidence in the record does not substantiate a finding that Claimant's false representations were a substantial factor in his hiring. This is evidenced by Defendant-Employer accepting the information that Claimant provided on the questionnaire without any additional follow up (e.g. a

physical) to ensure he was actually fit for the position. Furthermore, Defendants did not provide sworn testimony (Hr. Tr. pp. 107-108) or other evidence to support their assertion that they reasonably relied on Claimant's false representations and that said representations were a substantial factor in his hire. Therefore, Defendants have not satisfied the second factor of the McDevitt & Street defense.

140. Claimant omitted information about his prior back injuries, specifically the injury to his cervical spine that he sustained nine months before starting work for Defendant-Employer. Defendant-Employer's medical questionnaire specifically asked: "Please list any condition, injury or disease for which you have been treated in the past three (3) years. If no treatment has been provided, state 'none.' Please list any medical providers and dates when applicable." Claimant answered: "none". (Defendants' APA No. 12. p. 518). Claimant's assertion that he sustained an injury to his cervical spine while working for Defendant-Employer, substantiates a finding that a causal connection exists between Claimant's false representations on the questionnaire and his injury. Therefore, Defendants' have satisfied the third factor of the McDevitt & Street defense.

141. I find Defendants have failed to establish all three factors under the McDevitt & Street defense for Fraud in the Application. Therefore, Claimant's claim is not barred by this defense.

142. Though Claimant's claim is not barred by the McDevitt & Street defense in this matter, based on the greater weight of the evidence, Claimant's claim is not compensable under the provisions of the Act.

143. I find Claimant is not entitled to medical benefits.

144. I find Claimant is not entitled to temporary disability compensation.

145. I find Claimant is not entitled to permanent disability compensation.

146. I find Claimant is not entitled to any other ancillary cost associated with this claim.

CONCLUSIONS OF LAW

1. Under S.C. Code Ann. § 42-1-130, Claimant was a covered employee at the time in question; and under § 42-1-140, Defendant Employer was a covered employer under the Act.

2. The *Linen* court held that the Commission may not rest its determinations on surmise, conjecture, or speculation. *Linen v. Ruscon Constr. Co.*, 286 S.C. 67, 68, 332 S.E.2d 211, 212 (1985). See also *Bundrick v. Powell's Garage*, 248 S.C. 496, 151 S.E.2d 437 (1966). Indeed, South Carolina cases are replete that a finding of the Commission will normally be upheld. However, "such a finding may not be based upon surmise, conjecture, or speculation, but must be founded on evidence of sufficient substance to afford a reasonable basis for it." *Burnette v. City of Greenville*, 401 S.C. 417, 426, 737 S.E.2d 200, 206 (Ct. App. 2012). See also *Grayson v. Carter Rhoad Furniture*, 317 S.C. 306, 309-10, 454 S.E.2d 320, 322 (1995); *Edwards v. Pettit Constr. Co., Inc.*, 273 S.C. 576, 579, 257 S.E.2d 754, 755 (1979).

3. Where claimant's credibility is a substantial issue, the Appellate Panel may properly give less weight to doctor's opinions if it believed a claimant to be untruthful in self-reporting of symptoms or presentation. *Rummage v. BGF Industries*, 434 S.C. 441, 459, 865 S.E.2d 380, 390 (Ct. App. 2021), *cert. granted and then dismissed as improvidently granted*, S.C. Sup. Ct., July 26, 2023. While questioning the commissioner's assessment of claimant's credibility, the appellate court in *Rummage* concurred that Claimant lacked credibility where she had "denied some relatively major prior issues entirely," including prior complaints to affected body parts. *Id.* "Expert medical testimony is designed to aid the Commission in coming to the correct conclusion; therefore, the Commission determines the weight and credit to be given to the expert testimony." *Tiller v. Nat'l Health Care Ctr. Of Sumter*, 334 S.C. 333, 340, 513 S.E.2d 843, 846 (1999). The appellate courts have implicitly approved the single commissioner giving less weight to the treating doctor's opinion "because of the objective evidence and [her] own observations and impression at the hearing."

Fishburne v. ATI Sys. Internat'l, 384 S.C. 76, 87, 681 S.E.2d 595, 601 (Ct. App. 2009). Indeed, this is a large measure of the point of in person hearings before a commissioner-to assess credibility and determine the weight to be given to evidence. "[The Commission is the sole fact-finder in workers' compensation cases, and . . . any questions of credibility must be resolved by the Commission." *Smith v. S. C. Dep't of Mental Health*, 329 S.C. 485, 501, 494 S.E.2d 630, 638 (Ct. App. 1997). "It is logical for the [Appellate Panel], which did not have the benefit of observing the witnesses, to give weight to the Hearing Commissioner's opinion." *Green v. Raybestos-Manhattan, Inc.*, 250 S.C. 58, 64, 156 S.E.2d 318, 321 (1967).

4. The substantial weight of the evidence shows Claimant has not met his burden of proof that his claim was causally related to an alleged work-related accident on March 8, 2022.

5. Defendants have failed to establish all three factors under the McDevitt & Street defense for Fraud in the Application. Therefore, Claimant's claim is not barred by this defense.

6. The *Cooper* court addressed fraud in the application after the defendants appealed the Commission's award of benefits to the claimant. *Cooper v. McDevitt & Street Co.*, 260 S.C. 463, 196 S.E.2d 833 (1973).

7. The *Cooper* court established three factors that must be present before a false statement in an employment application will bar benefits: (1) The employee must have knowingly and willfully made a false representation as to his physical condition. (2) The employer must have relied upon the false representation and this reliance must have been a substantial factor in hiring. (3) There must have been a causal connection between the false representation and the injury. *Id.* at 835.

8. Though Claimant's claim is not barred by the *McDevitt & Street* defense in this matter, Claimant's claim is not compensable under the provisions of the Act based on the greater

weight of the evidence. Claimant has failed to carry his burden of proof that a compensable injury occurred at Confluence.

III. ISSUES ON APPEAL

1. Did the Hearing Commissioner err as a matter of fact and matter of law by ignoring, misrepresenting, stating without reference to the record, and/or excluding specific medical evidence and testimony that supports Claimant's claim?
2. Did the Hearing Commissioner err as a matter of fact and matter of law by ignoring, misrepresenting, stating without reference to the record, and/or excluding specific hearing testimony and lay evidence that supports Claimant's claim?
3. Did the Hearing Commissioner err as a matter of fact and law by improperly assessing the medical evidence and testimony under *Crane v. Raber's Discount Tire Rack*, 429 S.C. 636, 842 S.E.2d 349 (2020)?
4. Did the Hearing Commissioner err as a matter of law and fact in Finding of Fact 7 by not specifying this prior claim was for Claimant's low back?
5. Did the Hearing Commissioner err as a matter of law and fact in Finding of Fact 13 by not specifying this prior claim was for unrelated injuries to the alleged body parts at question in this claim?
6. Did the Hearing Commissioner err as a matter of fact in Finding of Fact 17 by finding Claimant's prior treatment for this motor vehicle accident ended on July 12, 2021?
7. Did the Hearing Commissioner err as a matter of law and fact in Finding of Fact 45 by finding Claimant did not inform his medical providers about prior accidents and injuries, but ignoring that all his providers *were* apprised of this in their depositions and stood by their opinions concerning causation?
8. Did the Hearing Commissioner err as a matter of law and fact in Finding of Fact 48 by finding Claimant's employment with Cintas was prior to Confluence and not making reference to any transcript regarding Claimant's testimony?
9. Did the Hearing Commissioner err as a matter of law and fact in Finding of Fact 62 by misrepresenting the actual testimony of Claimant and the records in evidence?
10. Did the Hearing Commissioner err as a matter of law and fact in Finding of Fact 71 by finding based on conjecture that Claimant "indirectly asserted" he was harassed and that Claimant's testimony was inconsistent but provided no cite to the record to substantiate such a finding?
11. Did the Hearing Commissioner err as a matter of law and fact in Finding of Fact 81 by misrepresenting that Claimant only testified to having a 0% impairment rating when it was corroborated separately in the record?
12. Did the Hearing Commissioner err as a matter of law and fact in Finding of Fact 82 by finding

Claimant treated "through July 2021" for a prior motor vehicle accident when the record clearly showed this treatment ended on July 9, 2021?

13. Did the Hearing Commissioner err as a matter of law and fact in Finding of Fact 85 by finding Claimant's testimony was untruthful, evasive, and inconsistent and lacked credibility when he provided no reference to any transcript to substantiate such a finding?
14. Did the Hearing Commissioner err as a matter of law and fact in Finding of Fact 100 by misrepresenting that Dr. Van Pelt testified he was unaware of prior claims and had not seen prior records when his testimony clearly showed he was apprised of such information and given an opportunity to review prior medical records?
15. Did the Hearing Commissioner err as a matter of law and fact in Finding of Fact 119 by mispresenting that Dr. Grady testified that the cervical and right arm symptoms were "probably" caused by the work-related accident?
16. Did the Hearing Commissioner err as a matter of law and fact in Finding of Fact 122 by finding the crux of Dr. Van Pelt's opinion was the appearance of annular fissures on Claimant's MRI when there was additional objective testing, subjective complaints, and physical examinations that formed his opinion?
17. Did the Hearing Commissioner err as a matter of law and fact in Finding of Fact 124 by speculating generally as to what medical records Dr. Hodge reviewed without knowing specifically what he reviewed, if anything, outside of the records mentioned in his opinion statement?
18. Did the Hearing Commissioner err as a matter of law and fact in Finding of Fact 125 by finding Dr. Grady "unilaterally contradicted" Dr. Van Pelt's opinion when Dr. Grady specifically deferred to Dr. Van Pelt regarding the annular fissures and causation and also opined independently that Claimant's injuries were causally related to the March 8, 2022 work accident based on an aggravation of a preexisting condition?
19. Did the Hearing Commissioner err as a matter of law and fact in Finding of Fact 125 by finding Dr. Van Pelt "failed to admit knowing about prior injuries to a body part" in direct contradiction to Finding of Fact 100?
20. Did the Hearing Commissioner err as a matter of law and fact in Finding of Fact 126 by finding the greater weight of the evidence did not support Dr. Van Pelt's opinion, when no doctor provided a contradictory opinion to the appropriate standard and the objective medical evidence and physical examinations supported Dr. Van Pelt's opinion?
21. Did the Hearing Commissioner err as a matter of law and fact in Finding of Fact 127 by finding Dr. Grady's opinion as to causation should be afforded little weight when he relied on portions of his testimony in Finding of Fact 125 to support denying the claim?
22. Did the Hearing Commissioner err as a matter of law and fact in Finding of Fact 128 by finding Dr. Hodge's opinion aligned with the preponderance of the medical evidence, when such finding is not supported by a preponderance of the substantial evidence in the record and without citing any portion of the record to support such a finding and his opinion was not

provided to the appropriate standard (reasonable degree of medical certainty)?

23. Did the Hearing Commissioner err as a matter of law and fact in Finding of Fact 128 in finding as fact ". . . that the cause of Claimant's present symptoms are idiopathic in nature. . .," when there was no such opinion provided by any medical expert and no such opinion was provided to the appropriate standard (reasonable degree of medical certainty)?
24. Did the Hearing Commissioner err as a matter of law and fact in Finding of Fact 130 by not complying with *Crane v. Raber's Discount Tire Rack*, 429 S.C. 636, 842 S.E.2d 349 (2020), and directly contradicting Finding of Fact 86 by not explaining any basis on which Claimant's credibility could justify ignoring objective medical evidence?
25. Did the Hearing Commissioner err as a matter of law and fact in Finding of Fact 131 by finding the substantial weight of the evidence did not support finding Claimant has met his burden of proof?
26. Did the Hearing Commissioner err as a matter of law in Conclusion of Law 4 by concluding the substantial weight of the evidence did not support finding Claimant has met his burden of proof?
27. Did the Hearing Commissioner err as a matter of law in Conclusion of Law 8 by concluding the greater weight of the evidence did not support finding Claimant has met his burden of proof for a compensable injury?

IV. DECISION OF THE APPELLATE PANEL

Pursuant to S.C. Code Ann. §42-17-50, we, the Appellate Panel, have reviewed the Decision and Order of the Single Commissioner and weighed the evidence as presented at the initial hearing. We have also considered all issues raised in the respective Appellant and Respondent briefs of the parties, as well as those issues raised at the Full Commission Review Hearing.

After careful review, the Appellate Panel of the South Carolina Workers' Compensation Commission, by unanimous vote, does hereby **AFFIRM** the Decision and Order of the Single Commissioner filed on February 27, 2025.

Below are set out the Findings of Fact and Conclusions of Law of the Appellate Panel as to this claim.

FINDINGS OF FACT

1. We affirm the above-stated findings of the Single Commissioner as to this claim.

CONCLUSIONS OF LAW

1. Pursuant to S.C. Code Ann. § 42-17-50, we affirm the above-stated conclusions of the Single Commissioner as to this claim.

ORDER

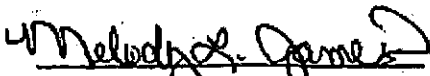
THEREFORE IT IS HEREBY ORDERED that the Decision and Order of the Single Commissioner filed in the above-captioned matter on February 27, 2025, is **AFFIRMED**.

ACCORDINGLY:

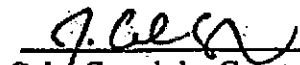
IT IS FURTHER ORDERED that Claimant (1) failed to meet his burden of proof that he sustained a compensable work injury, and (2) is not entitled to medical benefits, temporary or permanent disability compensation, or any other ancillary costs associated with this claim.

AND SO IT IS ORDERED.

_____(date)
Columbia, SC



Melody L. James, Commissioner



Gabe Coggiola, Commissioner



Michael Campbell, Commissioner

Order Served via email:

<p>Benjamin M. Renfrow Wilson Jones Carter & Baxley, PA bmrenfrow@wicblaw.com</p>	<p>Richard Charles Alexander Shelly Leeke Law Firm, LLC chip@leekelaw.com</p>
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CERTIFICATE OF SERVICE

This is to certify that the undersigned has on this date served a copy of this order in the above entitled action upon all parties to this case by sending an electronic copy hereof by electronic mail addressed to the attorneys for said parties; or if there is an unrepresented party(ies), by depositing a copy hereof, postage paid in the United States mail, first class, addressed to the unrepresented party(ies) and to the attorney(s) for the represented party(ies).

By Eugenia Hollmon on August 26, 2025

THE STATE OF SOUTH CAROLINA
In The Court of Appeals

APPEAL FROM THE WORKERS COMPENSATION COMMISSION

R. Michael Campbell, II, Commissioner
Gabe Coggiola, Commissioner
Melody L. James, Commissioner

WCC File No. 2202565

Confluence Outdoor, Inc. &
Great American Alliance
Insurance Co.,

Respondents,

v.

Rusty Young,

Appellant.

NOTICE OF APPEAL

Rusty Young appeals the Order of the of the Appellate Panel of the South Carolina Workers Compensation Commission dated August 26, 2025. Appellant received written notice of entry of this order on August 26, 2025.

September 11, 2025



Richard C. Alexander (SC Bar #: 77958)
Shelly Leeke Law Firm
6060 Rivers Avenue
North Charleston, SC 29406
(843) 297-8485
Attorney for Appellant

Other Counsel of Record:
Benjamin M. Renfrow
Willson Jones Carter & Baxley, P.A.
325 Rocky Slope Rd., Suite 201
Greenville, SC 29607
(864) 527-3296
Attorney for Respondents

THE STATE OF SOUTH CAROLINA
In The Court of Appeals

APPEAL FROM THE WORKERS COMPENSATION COMMISSION

R. Michael Campbell, II, Commissioner
Gabe Coggiola, Commissioner
Melody L. James, Commissioner

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SC Court of Appeals

WCC File No. 2202565

Confluence Outdoor, Inc. & Respondents,
Great American Alliance
Insurance Co.,

v.

Rusty Young, Appellant.


PROOF OF SERVICE

I certify that I have served the Notice of Appeal by depositing a copy of the same in the United States Mail, postage prepaid, or by sending an electronic copy hereof by electronic mail on September 11, 2025 to the following parties, and or their representatives:

Benjamin M. Renfrow, Esq.
bmrenfrow@wjcblaw.com
Willson Jones Carter & Baxley, P.A.
325 Rocky Slope Rd., Suite 201
Greenville, SC 29607

Amy Bracy, Judicial Director
S.C. Workers' Compensation Commission
P.O. Box 1715
Columbia, SC 29202

September 11, 2025


Richard C. Alexander (SC Bar #: 77958)
Shelly Leeke Law Firm
6060 Rivers Avenue
North Charleston, SC 29406
(843) 297-8485
Attorney for Appellant



Shelly Leeke Law Firm, LLC
6060 Rivers Ave
North Charleston, SC 29406

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South Carolina Court of Appeals
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