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**S.C. Supreme Court**

THE STATE OF SOUTH CAROLINA  
In the Supreme Court

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APPEAL FROM THE  
WORKERS' COMPENSATION COMMISSION

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Appellate Case No: 2013-000890

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Loretta Springs, .....Petitioner,

vs.

Clemson University and State Accident Fund.....Respondent.

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**BRIEF OF PETITIONER**

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## QUESTIONS PRESENTED

1. Did the Court of Appeals err in failing to address and follow the precedent and established law found in Anderson v. Baptist Medical Center, 343 S.C. 487, 541 S.E. 2d 526 (2001).
2. The Workers' Compensation Commission misapplied South Carolina law when it found the Petitioner's mental injury was aggravated by the work injury but still found it not compensable because it was "more related" to childhood abuse.

## STATEMENT OF THE CASE

This case involves injuries suffered by Loretta Springs (Springs) during her employment at Clemson University (Respondent).

On February 13, 2013, the Court of Appeals issued an opinion affirming the decision of the Workers' Compensation Commission which affirmed the Decision and Order of the Single Commissioner.

The Appellate Panel cited *Bartley v. Allendale Cnty. Sch. Dist.*, 392 S.C. 300, 306, 709 W.E.2d 619, 622 (2011) for the proposition that the Court of Appeals must affirm the findings of fact made by the Commissioner if they are supported by substantial evidence. The Court of Appeals did not address the arguments made in the appeal by the Petitioner (App. p. 404-405).

Springs maintains she suffered work related injuries from an accident occurring on October 12, 2007 when she fell from a golf cart hitting her head and injuring her neck, back, and hip. Springs contends she sustained a physical brain injury and injuries to her head, her back, her coccyx, her left lower extremity related to nerve damage, her ears, her nose, her tongue, her olfactory nerve, anxiety, depression, and psychological overlay. These mental injuries are severe and manifest as dissociative identity disorder.

The Respondents admitted injuries to the coccyx, hip, and head. The Respondents maintained that Springs suffered a minor closed head injury (concussion) which subsequently healed. The Respondents specifically denied physical brain damage. The Respondents contended Springs' current psychological condition and need for counseling is primarily related to her past post-traumatic stress disorder as a result of childhood abuse and that it is the abuse which resulted in the

dissociative identity disorder (multiple personalities).

A hearing in this matter was held before Commissioner Avery B. Wilkerson, Jr. The hearing was set on the Form 50. Commissioner Wilkerson took evidence on the claim and issued a Decision and Order filed April 11, 2011. Both sides subsequently and timely filed Requests for Review by the Appellate Panel of the South Carolina Workers' Compensation Commission asserting numerous errors on the part of Commissioner Wilkerson.

The issues were heard by the Commission on August 15, 2011. The Appellate Panel Decision and Order dated November 16, 2011 affirmed the decision of the Hearing Commissioner with the following Award:

1. The Claimant is entitled to 10 weeks of permanent disability to her coccyx and 15 weeks of permanent disability to her back, representing five (5%) percent disability to her back, totaling 25 weeks. Based on the Claimant's compensation rate of \$289.95, this totals \$7,248.75.
2. The Claimant sustained a minor closed head injury which subsequently healed and has not suffered permanent physical brain damage as contemplated under S.C. Code Ann. §42-9-10.
3. The Claimant currently suffers from at least five (5) different personalities as a result of her dissociative identity disorder stemming from post-traumatic stress disorder from childhood abuse. The Claimant's memory problems and other psychological conditions are more related to her childhood abuse than as a direct result of her work injury. Accordingly, the Claimant is not entitled to any permanent disability for the closed head injury.
4. The Claimant is entitled to additional medical care and treatment which would tend to lessen her period of disability. At the current time, this would include the counseling by Dr. Kriegel as his counseling is for both pain and her PTSD.
5. The Claimant is to be referred to vocational rehabilitation, and the Defendants will be responsible for the cost.

(App. p. 25)

Petitioner timely filed a Notice of Appeal from this Order.

After the issuance of the Opinion by the Court of Appeals, a timely petition for rehearing was filed on February 27, 2013 and denied on March 27, 2013 (App p. 406-420).

## STATEMENT OF FACTS

Springs was injured while at work at Clemson University (App. pp. 86, 87). She was a maintenance technician and was being driven by a coworker in a golf cart when she was flung out as the cart was cornering (App. p. 87, lines 9-23). Springs landed on her coccyx and hit her head sustaining injuries to her back, coccyx, head, brain and ear (App. p. 87, line 24-p. 88, line 3). These injuries also led to mental injuries (App. p. 293).

At the time of the initial hearing Springs had been married for five and one-half (5 1/2) years (App. p. 66, lines 19-23). Springs' husband, Daniel Springs, testified that Springs did not have the strength she used to have and planting a garden, bending, squatting, and kneeling are very difficult for her (App. p. 71, line 4-p. 72, line 10). Mr. Springs testified she was still taking a prescription medication for pain, an antidepressant, and wore a patch for pain. She also uses a TENS unit to ease pain (App. p. 75, line 17 - p. 76, line 6).

Mr. Springs testified that Springs' dizziness and headaches did improve after the accident (App. p. 76, lines 17-22). He further testified that she could do some household chores, some cooking, and some housekeeping. Mr. Springs was aware his wife suffers from multiple personality disorder. Mr. Springs acknowledged he had no training in determining how to detect personality disorders and that he learned of her multiple personalities after she began seeing Dr. Kriegel. He testified that some of Springs' personalities have certain memories, and it is his understanding these personalities are the way she now copes with her early childhood trauma (App. p. 78, line 3-p. 79, line 11).

Prior to the work accident, Springs' childhood trauma did not interfere with her ability to function in life. Her work history includes waitressing, landscaping, zookeeper, farming, raising cattle, and work at a dairy cow auction (App. p. 82, line 16-p. 84, line 25). She was able to train koala bears (App. p. 83, lines 13-14) and was a handler of the Anheuser Busch Clydesdales (App. p. 83, lines 14-17). She also worked as an electrical assistant installing conduit and wiring commercial buildings (App. p. 85, lines 8-12). Springs eventually went to work at Clemson University as a Maintenance Technician repairing HVAC electrical and plumbing systems all over campus (App. p. 86, lines 3-12).

During the course of her extensive treatment, Springs saw Sheldon Herring, Ph.D. at the Roger C. Peace Rehabilitation Center for a Neuropsychological Evaluation. Dr. Herring diagnosed her with Adjustment Disorder with anxiety and depressed mood. He recommended two main treatments:

First, although the patient's semantic (verbal and visual) memories are quite functional, she presents with forgetfulness and problems with organizing herself for daily activities. This may be a secondary symptom impacted more by depression and pain; however, it does cause the patient significant distress. For this reason I recommend brief referral to our outpatient speech therapy team to help the patient develop a more practical memory management strategy and to help her organize herself in day to day activities.

Second, I recommend that supportive counseling be provided to the patient to help her address her coping style and to provide more direct support for her depression. Since it is anticipated that the patient will be involved in outpatient speech therapy for a fairly brief period of time, I recommend that the patient find a psychotherapist closer to her home community that can help work with her over the longer term regarding adjustment to her chronic pain and to help her develop better relaxation and pain management skills (App. p. 262-263)

Springs began seeing a psychologist, Dr. Kriegel for pain and emotional counseling. While receiving counseling, it became apparent she was abused as a child (App. pp. 103, lines 13-16). Since the accident, she has not been able to put the memories out of her mind. It now interferes with her daily life, her marriage and her ability to work (App. pp. 104, lines 7-19).

Springs testified that prior to the accident she took an antidepressant for about 6 months when she was in her 20's and was going through a divorce. She stated she continues to have memory problems since the accident but has learned to cope through therapy. She testified her word recall has improved, but she has more problems with anger and emotions (App. p. 105, line 8-p. 106, line 25). Springs acknowledged that she has multiple personalities, and she has been aware of them some of the time. She maintained she has never experienced multiple personalities prior to the injury, but she did have prior "lost time," (App. p. 107, lines 1-17). Springs testified she was not sure if Dr. Kriegel's treatment was helping her with her pain because she has only been seeing him for a year (App. p. 107, lines 19-24). She did believe his teaching her breathing techniques has helped and she wished to continue seeing Dr. Kriegel because she hoped to rid herself of most of her situation (App. p. 108, lines 1-6).

Springs acknowledged that Dr. Kriegel has diagnosed her with at least five (5) different personalities. She stated she was unaware of her multiple personalities prior to the accident (App. p. 117, lines 22-25). Springs testified that when she disassociates, Dr. Kriegel can ask an alter (an 8-year old female) to discuss a bad occurrence. This female alter can make Springs smell and taste as if the occurrence were happening (App. p. 118, lines 1-12). Springs further recalls losing time or blacking out in high school. She stated these could have been due to different personalities because she was being abused at the time, but she never saw anyone for these problems nor sought

treatment prior to this accident (App. p. 119, lines 1-15).

A review of Dr. Kriegel's medical records indicates that her inability to work affected her emotional stability (App. p. 282). Springs has been diagnosed with dissociative identity disorder. Dr. Kriegel believes Springs suffers from post-traumatic stress disorder as a result of childhood abuse with the current situation overwhelming her coping skills (App. p. 289). Springs is still seeing Dr. Kriegel for therapy and Eric Loudermilk, M.D. for pain management (App. pp. 92, line 4-p. 93, line 2).

## ARGUMENTS

This case presents a novel issue in as much as the hearing commissioner seems to have relied on a standard not found in the SC Workers' Compensation Act or in South Carolina case law.

The issue of a new standard for compensability is of considerable importance to the workers' compensation bar. This new standard used by the Commissioner and affirmed without discussion by both the full commission and the S.C. Court of Appeals is whether an aggravation of a pre-existing condition can still be held not compensable if it is "more related" to the pre-existing cause and not the work injury.

The Administrative Procedures Act ("APA") provides the standard for judicial review of workers' compensation decisions. Pierre v. Seaside Farms, Inc., 386 S.C. 534, 689 S.E.2d 615 (2010); Lark v. Bi-Lo, Inc., 276 S.C. 130, 276 S.E.2d 304 (1981). Under the APA, the Court can reverse or modify the decision of the Workers' Compensation Commission if the substantial rights of the appellant have been prejudiced because the decision is affected by an error of law or is clearly erroneous in view of the reliable, probative, and substantial evidence on the whole record or are arbitrary or capricious. Transp. Ins. Co. v. South Carolina Second Injury Fund, 389 S.C. 422, 427, 699 S.E.2d 687, 689-90 (2010) (citing S.C. Code Ann. § 1-23-380(5)(d), (e) (Supp. 2009) 1-23-380(5)(d), (e) (Supp. 2009)" "S.C. Code Ann. §1-23-380(5)(d), (e) (Supp. 2009)"

**A. The Court of Appeals Erred in Failing to Address and Follow the Precedent and Established Law Found in Anderson v. Baptist Med. Ctr., 343 S.C. 487, 493, 541 S.E.2d 526, 528 (2001)**

Mental injuries are compensable if they are induced either by physical injury or by unusual or extraordinary conditions of employment. Anderson v. Baptist Med. Ctr., 343 S.C. 487, 493, 541

S.E.2d 526, 528 (2001); Getsinger v. Owens-Corning Fiberglass Corp., 335 S.C. 77, 80, 515 S.E.2d 104, 106 (Ct. App. 1999); Stokes v. First Nat'l Bank, 298 S.C. 13, 21, 377 S.E.2d 922, 926 (Ct. App. 1988). A mental condition is causally related to the original injury if the condition was induced by the physical injury. Estridge v. Joslyn Clark Controls, Inc., 325 S.C. 532, 537-38, 482 S.E.2d 577, 580 (Ct. App. 1997).

S.C. Code Ann. § 42-9-35 applies to the aggravation of a pre-existing condition and provides:

- a) The employee shall establish by a preponderance of the evidence, including medical evidence, that:
  - (1) the *subsequent injury* aggravated the preexisting condition or permanent physical impairment; or
  - (2) the preexisting condition or the permanent physical impairment aggravates the subsequent injury.
- b) The commission may award compensation benefits to an employee who has a permanent physical impairment or preexisting condition and who incurs a *subsequent disability* from an injury arising out of and in the course of his employment for the resulting disability of the permanent physical impairment or preexisting condition and the subsequent injury.

A claimant is entitled to benefits for aggravation of a pre-existing condition of depression.

Bentley v. Allen Cnty. Sch. Dist., 392 S.C. 300, 310, 709 S.E.2d 619, 624 (2011) *citing* Anderson v. Baptist Med. Cntr., 343 S.C. 487, 541 S.E.2d 526 (2001).

Pre-existing depression does not preclude workers' compensation benefits for a mental injury. *See* Doe v. S.C. Dep't of Disabilities & Special Needs, 377 S.C. 346, 351, 660 S.E.2d 260, 263 (2008). However, the right of a claimant to compensation for aggravation of a pre-existing condition arises only when the claimant has a dormant condition that has produced no disability but becomes

disabling because of the aggravating injury. Anderson, 343 S.C. at 493, 541 S.E.2d at 528.

The Act addresses the standard for compensability of mental injuries at S.C. Code Ann. §42-1-160(D).

(D) Stress, mental injuries, and mental illness alleged to have been aggravated by a work-related physical injury may not be found compensable unless the aggravation is:

(1) admitted by the employer/carrier;

(2) noted in a medical record of an authorized physician that, in the physician's opinion, the condition is at least in part causally-related or connected to the injury or accident, whether or not the physician refers the employee for treatment of the condition;

(3) found to be causally-related or connected to the accident or injury after evaluation by an authorized psychologist or psychiatrist; or

(4) noted in a medical record or report of the employee's physician as causally-related or connected to the injury or accident.

In this case, the Full Commission found that Springs' PTSD was aggravated by the work injury. That finding was not appealed and is the law of the case (See finding of Fact #5, App. p. 15). The Commissioner also found that "the evidence establishes that the five (5) different personalities associated with the personality dissociative identity disorder were suppressed and unknown prior to the accident. This disorder was diagnosed during her counseling sessions". (Finding of Fact #7, App. p. 15) Thus, the Commissioner's own findings confirm the aggravation of the pre-existing condition and that it was dormant and became disabling because of the aggravating injury.

The Full Commission Order also stated:

14. I award the Claimant such further causally related medical treatment as would tend to lessen her disability. This would currently include the counseling she receives from Dr. Kriegel as the counseling for the PTSD is hand in hand with the counseling for pain therapy.

Finding of Fact No. 14, (App. p. 16).

There are also findings that seem to question the compensability of the mental injuries:

7. The Claimant has had and suffers from some very serious problems, however, based on the greater weight of the evidence, I do not find the accident of October 12, 2007 caused all of the problems the Claimant is experiencing. The evidence establishes that the five (5) different personalities associated with the personality dissociative identity disorder were suppressed and unknown prior to the accident. This disorder was diagnosed during her counseling sessions.
24. The medical record of Dr. Kriegel dated February 17, 2010 states that the Claimant has found herself focusing on memories from her childhood. There is the potential that her memory problems may be more related to intrusive memories from her childhood rather than as a direct result of her head injury during her accident (App. p. 18).
25. The medical record of Dr. Kriegel dated March 19, 2001, states that the Claimant's symptoms relate and make it appear more and more that she suffers from post-traumatic stress disorder from childhood abuse (App. p. 18).
29. The medical record of Dr. Kriegel dated August 19, 2010 states the Claimant has been battling depression for many years and that the reason the Claimant did not recognize it as such is primarily because it has been her constant companion (App. p. 18).
30. The medical record of Dr. Kriegel dated August 26, 2010

states that the Claimant has had a difficult time in the last two (2) days with her memory. In addition, she has had a much greater than normal level of anxiety and agitation. As we discussed this during our session, it became clear that it was associated to her PTSD and dissociative identity disorder. She dissociated twice during our session today and was then able to relate the triggering mechanism that occurred two (2) days ago. She is beginning to understand more fully how her PTSD can play a major role in her memory issues. It does appear that she does have some level of memory dysfunction as a result of her on-the-job injury but the PTSD has an impact on her memory as well. She appeared to be much calmer and reassured by the time that she left today (App p. 19).

Findings of Fact Nos. 7, 24, 25, 29 and 30, (App. pp. 18, 19).

The Award of the Commission states:

3. The Claimant currently suffers from at least five (5) different personalities as a result of her dissociative identity disorder stemming from post-traumatic stress disorder from childhood abuse. The Claimant's memory problems and other psychological conditions are more related to her childhood abuse than as a direct result of her work injury. Accordingly, the Claimant is not entitled to any permanent disability for the closed head injury.
4. The Claimant is entitled to additional medical care and treatment which would tend to lessen her period of disability. At the current time, this would include the counseling by Dr. Kriegel as his counseling is for both pain and her PTSD.

The Appellate Panel Decision and Order Nos. 3 and 4, (App. pp. 32).

Taken together, these Findings and Awards seem contradictory on the question of the compensability for Springs' mental condition. The contradiction results from the failure to follow Anderson.

In the Anderson opinion, this Court explained the compensability of an aggravation of a pre-existing mental injury and held, while reversing the Workers Compensation Commission, that the psychological treatment of Springs' was compensable after a work injury aggravated a pre-existing psychological problem even where the Claimant was already treating for the problem before the work injury in question. The Court found that the only substantial evidence was that the work injury made her condition worse. Anderson, 343 S.C. at 493, 541 S.E.2d at 528.

The Anderson decision is directly analogous to Mrs. Springs' claim. Here we have the same situation with all the evidence showing Mrs. Springs' condition is much worse after the work accident. The aggravation occurred, as found by the Commission and there is no evidence, no medical or psychological opinion, and no testimony that Mrs. Springs' mental condition ever returned to its pre work accident state. All of the opinions and testimony state exactly the opposite, that her mental condition deteriorated because of the aggravation from the work injury, she became increasingly worse until reaching the point of, as noted in the records and in the Commission's Order, suffering from dissociative identity disorder.

Dr. Kriegel, the authorized treating physician, is clear in his records that, "[Claimant's] inability to work has affected not only her emotional level but also her emotional stability." (App. p. 282). He also states, "[Her] physical symptoms have created tremendously powerful psychological symptoms." (App. p. 283) Dr. Kriegel then summarizes, "[Her] coping skills have been overwhelmed by her current situation." (App. p. 289).

Dr. Kriegel's opinion on these issues was made absolutely clear in the questionnaires he completed. In response to those submitted questions, he opined as follows:

1. In light of the medical and psychological history and

medical and psychological treatment of Mrs. Springs it is my opinion, to a reasonable degree of medical certainty that the work injury of October 12, 2007 has exacerbated Ms. Springs Post Traumatic Stress Disorder and caused the onset of symptoms.

Yes  
 No

2. In light of the medical and psychological history and medical and psychological treatment of Mrs. Springs it is my opinion, to a reasonable degree of medical certainty that the need for psychological treatment is related to the work accident on October 12, 2007.

Yes  
 No

3. Is Loretta Springs at Maximum Psychological improvement from the symptoms brought forth by the work injury of October 12, 2007?

Yes  
 No

4. What further treatment is needed and at what frequency to optimize Ms. Spring's recovery from the symptoms brought forth by the work injury of October 12, 2007?

**Ms. Springs needs individual cognitive behavioral psychotherapy on a minimum of a weekly basis. Optimal treatment would be for her to receive treatment twice weekly due to the severity of her symptoms.**

(App. p. 294).

1. Is future treatment needed for Ms. Springs to maintain her level of functioning?

Yes  
 No

2. If yes to number 1, what further treatment is

needed and at what frequency to optimize Ms. Spring's recovery from the symptoms brought forth by the work injury of October 12, 2007?

**Ms. Springs will require continued cognitive-behavioral psychotherapy, two sessions per week in order to optimize her recovery.**

3. With treatment outlined in 1 and 2 above, Is Loretta Springs at Maximum Psychological improvement from the symptoms brought forth by the work injury of October 12, 2007?

  ✓   Yes  
       No

4. In light of the medical and psychological history and medical and psychological treatment of Mrs. Springs it is my opinion, to a reasonable degree of medical certainty that the work injury of October 12, 2007 has exacerbated Ms. Springs Post Traumatic Stress Disorder and caused the onset of symptoms. Because of the work injury Ms. Springs has an impairment rating of **Class 4 Moderately Severe Impairment.**

(App. pp. 293-294).

Clearly Springs was highly functioning prior to the work injury. She was able to perform her job at Clemson without problems. She had a long history of employment with many areas of responsibility after her school years and after the childhood abuse took place. The psychological problems she now faces had never surfaced before, nor did they interfere with any employment at any time in her past.

While it may be argued that Springs' current condition of depression with moderately severe impairment and multiple personalities would not be present if she had never experienced the childhood trauma, it is also true that the symptoms came out subsequent to and because of the work

injury. The medical and psychological providers are emphatic on this point and, as mentioned above, the Order of the Commission specifically finds her condition was exacerbated by the work accident and that her five different personalities associated with the personality identity disorder were suppressed and unknown prior to the incident. There is no meaningful difference between the Anderson case and the present case. As in Anderson v. Baptist Medical Cntr., 343 S.C. 487, 541 S.E.2d 526 (2001), Springs' condition should be found compensable.

**B. The Workers' Compensation Commission misapplied South Carolina law when it found the Appellant's mental injury was aggravated by the work injury but still found it not compensable because it was "more related" to childhood abuse.**

The Workers' Compensation Act is a form of social legislation which was primarily created for the benefit, protection and welfare of working men and women and their families and it shall be given a liberal interpretation in favor of benefits to the injured worker to help achieve the beneficial purposes for which it was created including to prevent the injured worker and their families from becoming charges on society. This Court has specifically held that this is the "policy" of this Court. Phillips v. Dixie Stores, Inc., 186 S.C. 374, 195 S.E. 646 (1938); Cokely v. Robert Lee, Inc., 197 S.C. 157, 14 S.E. 2d 889 (1941). This is a fundamental principle of the Act.

Another fundamental principle requires strict construction of the provisions of the Act. Since the Act creates a compensation system in derogation of common law rights, the provisions and terms of the Act as enacted by the General Assembly must be strictly construed. Wigfall v. Tideland Utilities, Inc., 354 S.C. 100, 580 S.E. 2d 100 (2003).

The law for aggravations of mental injuries is well defined both in the statute itself and in the applicable case law as discussed above. Neither contains any balancing test by the Commission to determine what percentage of condition is pre-existing and what percentage is due to the aggravation.

Despite this, a balancing test was invoked in the Commissioner's finding that the "Claimant's memory problems and other psychological conditions are more related to her childhood abuse than as a direct result of her injury." (App p. 20).

Again, the exact wording from the Order is:

3. The Claimant currently suffers from at least five (5) different personalities as a result of her dissociative identity disorder stemming from post-traumatic stress disorder from childhood abuse. The Claimant's memory problems and other psychological conditions are more related to her childhood abuse than as a direct result of her work injury. Accordingly, the Claimant is not entitled to any permanent disability for the closed head injury.

That language conflates the mental injury with the closed head injury suffered by Springs in addition to creating the improper standard for the compensability of an aggravation of the mental injury.

A ruling by this Court that the Commissioner must engage in such a balancing test for an aggravation of pre-existing condition would significantly alter the compensability of all injuries that could be considered an aggravation of a pre-existing condition. It would presumably apply to a knee injury if there was prior arthritis. It would apply to all back injuries on workers with degenerative disc disease. A change in the law of this type must lie with the legislature. Until the statute is so amended, the use of any balancing test for determining the compensability of the aggravation of Springs' PTSD is an error of law. Accordingly, the Order should be reversed.

## CONCLUSION

The Court of Appeals failure to address and follow the established law in the compensability of an aggravation of a mental injury left in place the Commission's "balancing test". The "balancing test" is contrary to previous decisions of this Court and to the plain language of the statute. A change in the law of this type would apply to aggravations of any and all body parts. This would be a significant change to South Carolina's Workers' Compensation law and would have a devastating effect on the workers in this state who have pre-existing medical conditions but are able to work and who are then injured on the job.

The decision of the Commissioner as affirmed by the Full Commission and The Court of Appeals should be reversed and the case remanded for a determination of the extent of the compensable aggravation of Springs' PTSD.

Respectfully Submitted

August 11, 2014



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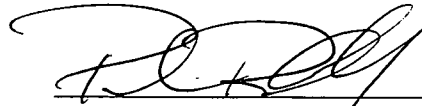
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CERTIFICATE OF COUNSEL

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

August 11, 2014



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PROOF OF SERVICE

I certify that I have served the Redacted Appendix and Brief of Petitioner on Clemson University and State Accident Fund by depositing a copy of it in the United States Mail, postage prepaid, on August 11, 2014, addressed to their attorney of record, Reginald M. Gay, McNair Law Firm, P.O.Box 4086, Anderson, SC 29622 and Matthew C. Robertson, State Accident Fund, 800 Dutch Square Boulevard, Suite 160, P.O. Box 102100, Columbia, SC 29221.

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