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THE STATE OF SOUTH CAROLINA
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In The Court of Appeals
[In The Supreme Court]

SC Court of Appeals

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OF
APPEALS
COPY

Frank Wilson, Claimant, Appellant,

v.

American LaFrance, Employer, and AIG C/O Gallagher
Bassett Services, Inc., Carrier, Respondent.

Appellate Case No. 2014-001996

FRANK E. WILSON
8755 JESSICA COURT
NORTH CHARLESTON, SC 29406

Frank E. Wilson
4/13/15

Appellant Reply to Respondent's MOTION FILED 4/3/15

The South Carolina Court of Appeals

Frank Wilson, Claimant, Appellant,

v.

American LaFrance, Employer, and AIG C/O Gallagher
Bassett Services, Inc., Carrier, Respondents.

Appellate Case No. 2014-001996

ORDER

Respondents have filed a motion to strike. Appellant shall serve and file a return to the motion within ten days of the date of this order. The return shall provide proof that the following matters included in Appellant's designation of matter were presented to the lower court pursuant to Rule 210(c), SCACR:

#21. TriCounty Radiology Associates—Appellant's Thoracic Spine MRI report dated May 21, 2012;

#22. Appellant's Southeastern Spine Institute Pain Management patient medical report dated June 4, 2012—pages 1-2;

#25. Appellant's Southeastern Spine Institute Pain Management patient medical report dated January 11, 2013—pages 1-2;

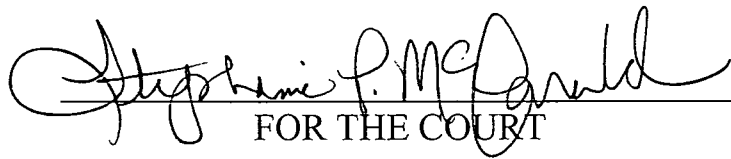
Supp. #4. Appellant's Southeastern Spine Institute Physician's Statement (Donald R. Johnson, II, MD) dated June 18, 2011;

Supp. #5. Appellant's Southeastern Spine Institute patient medical report dated November 22, 2011—pages 1-2;

Supp. #6: Appellant's Southeastern Spine Institute patient medical report dated December 29, 2011—pages 1-2;

Supp. #7: Appellant's Southeastern Spine Institute patient medical report dated February 24, 2012—pages 1-2; and

Supp. #8: Appellant's Southeastern Spine Institute Pain Management Physician's Statement (William Blane Richardson, MD) dated February 24, 2012—pages 1-2.


FOR THE COURT


Columbia, South Carolina

cc:

Frank Wilson

Erin Leigh Hantske, Esquire

Helen Faith Hiser, Esquire

FILED
4/3/15 

INDEX OF APA SUBMISSIONS

Frank E. Wilson vs. American LaFrance
WCC File No. 0506037
(Hearing Date: April 3, 2012 at 12:00PM)

CLAIMANT'S SUBMISSIONS

<u>NAME OF PHYSICIAN'S MEDICAL OFFICE/OTHER</u>	<u>DATE</u>	<u>PAGE(S)</u>
1.) Tricounty RADIOLOGY ASSOCIATES	7/11/09	1
2.) Southeastern Spine Institute	10/12/09-6/18/11	2 thru 6
3.) Palmetto Comprehensive Center For Pain	11/22/11-2/24/12	7 thru 15
4.) Tricounty RADIOLOGY ASSOCIATES	5/31/07	16 thru 17
5.) Lowcountry Orthopaedics And Sports Medicine	11/17/11	18 thru 20
6.) Southern Orthopedics And Sports Medicine	8/20/09-3/14/12	21 thru 38A
7.) CVS Pharmacy	3/15/12	38B thru 38C
8.) CVS Pharmacy	1/30/12-3/9/12	38D thru 38E
9.) MUSC Urology	12/1 11	39
10.) Claimant's MOTION- (EXHIBIT: H)	1/17/12-2/27/12	40 thru 66
11.) EXHIBITS: A thru G		67 thru 69
12.) EXHIBITS: A thru F		70 thru 71
13.) Claimant's Authorization for Release of the Claimant's South Carolina Workers' Compensation Commission File Information Document		72
14.) Hearing Transcript Packet- (EXHIBIT: I)	4/10/07	1 thru 40
15.) Claimant Deposition Packet- (EXHIBIT: J)	2/20/07	1 thru 55
16.) Hearing Transcript Packet- (EXHIBIT: K)	3/10/09	1 thru 29

APPELLATE PANEL DECISION AND ORDER
OF THE
SOUTH CAROLINA WORKERS' COMPENSATION COMMISSION

W.C.C. FILE NO: 0506037

FRANK WILSON

VS.

EMPLOYEE,
CLAIMANT/RESPONDENT

AMERICAN LAFRANCE

EMPLOYER,

AND

AIG C/O GALLAGHER BASSETT
SERVICES, INC..

CARRIER,
DEFENDANTS/APPELLANTS,

Appellate Panel Review held in Columbia, South
Carolina, on September 18, 2012 per notices timely
And properly served upon all parties of interest.

Appellate Panel Decision and Order Filed:
1/7, 2013

RECEIVED
FEB 13 2013
SC Court of Appeals

APPEARANCES: Claimant/Appellant appeared *Pro Se*
Defendants/Respondents represented by Erin L. Hantske

STATEMENT OF THE CASE

The parties were heard by Commissioner Avery B. Wilkerson, Jr., on April 18, 2012, in St. Matthews, South Carolina. Based upon the testimony and evidence received and produced at the hearing, the Hearing Commissioner made the following Findings of Fact:

1. The parties hereto are subject to and bound by the South Carolina Worker's Compensation Act.
2. The Claimant's average weekly wage is \$764.20, with a corresponding compensation rate of \$509.49.
3. The Claimant suffered an admitted injury by accident arising out of and in the course of his employment on or about May 16, 2005, to his neck, low back, left shoulder, right shoulder, ribs, bladder, and lungs.
4. On January 17, 2012, Claimant filed a Motion with the South Carolina Workers' Compensation Commission requesting the Commissioner address several issues in conjunction with his Form 50, Request for Hearing. In the regard, the Defendants filed a Reply Motion on January 24, 2012, which was received by the South Carolina Workers' Compensation Commission on January 30, 2012.
5. The Claimant's original Motion was returned as the filing fee did not accompany his hearing request. On February 17, 2012, the Claimant refiled his Form 50, Request for Hearing, along with his Motion, without making any material changes or alterations to the same.
6. The undersigned Commissioner attempted to schedule a telephone conference for March 3, 2012; however, the Claimant could not be reached at that time and a hearing was scheduled for April 18, 2012.
7. The Commission file indicates that the Commissioner's office called the Claimant on March 2, 2012; March 3, 2012; March 5, 2012; and March 9, 2012. The Claimant never

returned those phone calls, but indicated he did call back on April 2, 2012. At that time, this hearing was already scheduled.

8. Following that hearing, the undersigned Commissioner issued directives to the parties on April 27, 2012 and requested the Defendants draft a Decision and Order in this matter.
9. The MRI of the lumbar spine was already authorized at the time of the hearing. A copy of the authorization was provided to the Claimant at the hearing and another copy was sent by e-mail from defense counsel to the Commission that same afternoon.
10. The Claimant testified that he would like treatment before he gets worse.
11. The carrier is to provide all causally-related medical treatment that was previously ordered in this claim.
12. The Claimant wants treatment to both the right and left lower extremities, however those body parts are not compensable under the 2005 case as the Claimant failed to carry his burden of proof establishing compensable injuries to those alleged body parts.
13. The Claimant's prescriptions were delayed by no fault of the Defendants. There was a change with the prescription company and counsel for the Defendants tried to call the Claimant and wrote letters to the Claimant without a response.
14. The Claimant requested transportation costs to attend the hearing. The undersigned Commissioner denies that request as the Claimant requested the hearing and he has been very uncooperative in the resolution of these issues.
15. The carrier is to provide authorized medical treatment on a timely basis.
16. Counsel for the Defendants requested expenses of \$1,150.00 in preparation for this hearing including time spent responding to the Claimant's Motion and Form 50 as well as preparation for and travel to and from the hearing. The undersigned Commissioner would have likely awarded up to \$500.00 in defense costs, but due to the fact that the Defendants would be bearing the cost of writing that Order, the undersigned Commissioner waives awarding costs at this time. The undersigned Commissioner

would strongly consider a 100% reimbursement to the Defendants on any future request for defense costs in further defending this claim.

17. The Claimant testified he is now on social security and his case was accepted back in 2005.
18. The Claimant testified that he is very distrustful of defense counsel, her law firm, and the insurance carrier. The undersigned Commissioner views this as the main problem in this case.
19. The undersigned Commissioner finds defense counsel and her firm to be trustworthy and diligent in efforts to assist the Claimant with his workers' compensation claim.
20. The Claimant agrees to return phone calls to the Commissioner's office and to defense counsel without delay.
21. The Claimant was advised at the hearing on November 30, 2011 and again at the hearing on April 18, 2012 to communicate with all parties to help reduce expenses on all involved.
22. All unauthorized medical care needs to be filed with Medicare now that the Claimant has been accepted by social security.

Accordingly, as provided by S.C. Code Ann. §42-17-40, the Hearing Commissioner made the following Conclusions of Law:

1. Pursuant to S.C. Code Ann. §42-1-160, the Claimant sustained compensable injuries by accident arising out of and in the course of his employment on May 16, 2005 to the neck, low back, right shoulder, left shoulder, lungs, ribs, and bladder.
2. The Claimant has not carried his requisite burden of proof, required under the South Carolina Workers' Compensation Act, to establish that an injury involving the thoracic spine, right lower extremity, left lower extremity, or any other body part aside from the admitted injuries listed above arose out of or occurred in the course of his employment with the Defendants on May 16, 2005. See Clade v. Champion Laboratories, 330 S.C. 8,

496 S.E. 2d 856 (1998) (the workers' compensation Claimant has the burden of proving the facts that show the injury arose out of employment, and award of benefits must not rest on surmise, conjecture, or speculation;) Mims v. Nehi Bottling Co., 218 S.C. 513, 63 S.E. 2d 305 (1951) (the burden is upon the Claimant to prove the facts that will render the injury compensable).

3. Pursuant to S.C. Code Ann. §42-15-60, the Claimant is entitled continued causally-related medical care and treatment for his admitted injuries.
4. Pursuant to S.C. Code Ann. §42-9-30, any award for permanency at this time is premature.

Based upon these Findings of Fact and Conclusions of Law, the Hearing Commissioner issued the following Order:

IT IS HEREBY ORDERED that the Defendants are to provide all causally related medical treatment previously ordered for the Defendants' admitted work related accident.

IT IS FURTHER ORDERED that the Claimant failed to carry his burden of proof establishing a compensable injury by accident to his thoracic spine, left lower extremity, or right lower extremity and therefore is not entitled to any causally related medical treatment or further benefits under the Act.

No costs or fees are awarded at this time.

Within the statutory period, the Claimant filed an application for review in the case setting forth his reasons, copies of which were furnished to all interested parties prior to oral argument presented before the Appellate Panel on September 18, 2012. All proffered testimony has been taken. Such, together with all documentary evidence has been delivered by oral argument to the individual members of the Appellate Panel and has since been under study and consideration. By appeal, Claimant submitted the following:

1. "The Claimant's Back (Thoracic Spine) MRI- supported by APA SUBMISSIONS- PAGES: 6, 9, 10, 11, 12, 14 and 15; Hearing Transcript April 10, 2007- PAGE: 10- Lines 14-22, PAGE: 14 Lines 19-25, PAGE: 15- Lines 1-24; Hearing Transcript-March 10,

2009: PAGE: 13- Lines 16-25, PAGE: 14-Lines 16-25, PAGE: 15-Lines 1-13; Claimant's Deposition February 20, 2007-PAGE: 42- Lines 1-25"

2. "The Claimant's Bilateral Lower Extremity EMG/nerve conduction study- supported by APA SUBMISSIONS- PAGES: 6, 7, 8, 10, 11, 14 and 15"
3. "The Claimant's First Script (Medco) prescription drug coverage...The Claimant received in the mail a new First Script (Medco) prescription drug ID card on or about May 1, 2012. The new First Script (Medco) prescription drug ID card was an exact duplicate First Script (Medco) prescription drug ID card as before. The Claimant presented and submitted the new exact duplicate First Script (Medco) prescription drug ID card to CVS Pharmacy located on 5212 Ashley Phosphate Road North Charleston, SC 29420 at (843) 767-4500. This took place on May 4, 2012. This was also when the Claimant request a prescription refill from CVS Pharmacy for the prescription Promethazine 25MG/Phenergan 25MG and this prescription medication received a rejection message from First Script (Medco). The CVS Pharmacy associate contacted First Script (Medco) by telephone and First Script (Medco) associate replied by stating that the Carrier (Adjuster) would contact CVS Pharmacy in 48 hours as it relates to the Claimant's prescription refill request the prescription Promethazine 25MG/Phenergan 25MG. The Claimant will provide the documentation from CVS Pharmacy for this ongoing and continuing delay(s) as it relates to the Claimant's prescription drug medication(s):- supported by APA SUBMISSIONS- PAGE: 38A – 38E ...The Claimant will provide the documentation for the Claimant's recent prescription drug delay at the Claimant's REQUEST FOR COMMISSION REVIEW Hearing."
4. "The Claimant's South Carolina Workers' Compensation Commission Hearing on April 10, 2007 with Commissioner J Alan Bass to address and determine the issues brought forth... (Form # 58- PRE-HEARING BRIEF- 4.) Facts in controversy: issue # 4.) PAGE: 2 of 7 and PAGE: 3 of 7 was not determined or addressed. - Supported by Hearing

Transcript April 10, 2007- (EXHIBIT: I- PAGES- 1-40) and APA SUBMISSIONS- PAGES: 16-17.”

5. “The Claimant's MOTION dated February 27, 2012 and served by the South Carolina Workers' Compensation Commission on February 29, 2012- supported by APA SUBMISSIONS- (EXHIBIT: H- PAGES: 59-72)...The Claimant paid an additional \$25.00 filing fee for the Claimant's MOTION dated February 27, 2012 and served by the South Carolina Workers' Compensation Commission on February 29, 2012. The Claimant's MOTION dated February 27, 2012 was not determined, addressed or filed with the South Carolina Workers' Compensation Commission. This was after the fact of the Claimant paying the additional \$25.00 filing fee for this MOTION to be determined, addressed and or filed by and or with the South Carolina Workers' Compensation Commission.”
6. “The Claimant respectfully request that the UTICA-MOHAWK language be included and inserted in any and all of the Claimant's final settlement(s) and or any and all of the Claimant's final agreement(s).”
7. “The Claimant respectfully request reimbursement for, but not limited to, the following: Please refer to the Claimant's (Form # 58- PRE-HEARING BRIEF- 4.) Facts in controversy- issue 7.) — PAGE: 4 of 7) ***(This is due to the ongoing and continuing issues of delays in the Claimant's medical treatment that is requested and recommended by the Authorized Treating Physician(s) this has been an ongoing and continuing issue since the early stages of the Claimant's claim to the present.- supported by Hearing Transcript April 10, 2007- (EXHIBIT I- PAGES: 1-40, Hearing Transcript March 10, 2009- (EXHIBIT K- PAGE: 13-Lines 16-25, PAGE: 14-Lines 16-25, PAGE: 15-Lines 1-13 and issues of delays in the Claimant's medical treatment noted in the Claimant's South Carolina Workers' Compensation Commission Hearing file on July 21, 2011 with Commissioner Andrea C. Roche- (refer to the Claimant's Form # 58- PREHEARING

BRIEF) also refer to APA SUBMISSIONS- PAGES: 1-5, the Defendants delays in providing payment(s) for the Claimant's medical treatment noted in the Claimant's South Carolina Workers' Compensation Commission Hearing file on November 30, 2011 with Commissioner Avery B. Wilkerson Jr.- (refer to the Claimant's Form # 58- PREHEARING BRIEF) and the ongoing and continuing delay(s) as it relates to the Claimant's prescription drug medication(s)- supported by APA SUBMISSIONS- PAGES: 38A-38E...the Claimant will provide additional documentation for the recent delay(s) in the Claimant's prescription drug medication(s) at the Claimant's South Carolina Workers' Compensation Commission (REQUEST FOR COMMISSION REVIEW) Hearing."

8. "The Claimant respectfully request reimbursement for the medical expenses as it relates to the Claimant's Right Shoulder and Left Shoulder evaluation by William J. Estes, MD of Southern Orthopedics And Sports Medicine.- supported by APA SUBMISSIONS- PAGES: 21-38, PAGES: 16-17 and Hearing Transcript April 10, 2007- (EXHIBIT: 1- PAGES: 1-40)"
9. "The Claimant respectfully request lifetime maintenance as it relates to the Claimant's Back injury. The Claimant respectfully request lifetime hardware maintenance as it Relates to the Claimant's Back injury."

****The Claimant disagree with having to provide payment expenses of the Defendants in this claim. This is due to the treatment towards the Claimant as noted throughout the Claimant's South Carolina Workers' Compensation Commission. This would include the unreasonable treatment from the Defendants, including but not limited to, the Carrier, the hand selected Authorized Treating Physicians by the Defendants and the Defendants representation which was and is aware of all the above through the exchanging of APA SUBMISSIONS and during the Claimant's South Carolina Worker's Compensation Commission Hearings."

“***The Claimant strongly disagree with the statement of Commissioner Avery B. Wilkerson Jr. as it states that he finds the Defense counsel and her law firm to be trustworthy and have been trying to assist the Claimant. Commissioner Wilkerson’s statement is considered to be very inconsistent with all of the above facts and enclosed information given by the Claimant which is also noted in the Claimant’s South Carolina Workers’ Compensation Commission file.”

“***If all of the above issues and concerns of the Claimant are not clearly and properly addressed at the Claimant’s South Carolina Workers Compensation Commission (REQUEST FOR COMMISSION REVIEW), then the claimant has no other option but to seek the attention of, but not limited to, the South Carolina Sate Governor’s office, the South Carolina State Attorney’s office, and or the South Carolina State NAACP office.”

In an Appellant Review, the Appellate Panel shall, pursuant to S.C. Code Ann. §42-70-50 (1985) review the Award, weigh the evidence as presented at the initial hearing and, if good grounds be shown therefore, make its own Findings of Fact and reach its own Conclusions of Law consistent with or inconsistent with those of the Hearing Commissioner. During oral argument, Appellant argued the Respondents omitted a Finding of Fact by the Hearing Commissioner on the previous Decision and Order relating to the Appellant’s ability to obtain prescription medication and the credibility of the Defendants. Defendants admitted at the Full Commission hearing this omission was a scrivener’s error and not an intentional act of omission. Therefore, the Appellate Panel amends all previous Findings of Fact relating to the credibility of the parties. Based upon a review of the forgoing, we hereby Affirm as Amended.

Accordingly, the Appellate Panel has stated the following Findings of Facts and Conclusions of Law and they shall become the law of the case; and, therefore, the Decision and Order of the Hearing Commissioner is amended as follows.

FINDINGS OF FACT

Based upon the documentary evidence submitted by the respective parties pursuant to the Administrative procedure Act, and the Commission file relative to this claim, **WE, THE APPELLATE PANEL, FIND THE FOLLOWING AS FACT:**

1. The parties hereto are subject to and bound by the South Carolina Worker's Compensation Act.
2. The Claimant's average weekly wage is \$764.20, with a corresponding compensation rate of \$509.49.
3. The Claimant suffered an admitted injury by accident arising out of and in the course of his employment on or about May 16, 2005, to his neck, low back, left shoulder, right shoulder, ribs, bladder, and lungs.
4. On January 17, 2012, Claimant filed a Motion with the South Carolina Workers' Compensation Commission requesting that the Commission address several issues in conjunction with his Form 50, Request for Hearing. In the regard, the Defendants filed a Reply Motion on January 24, 2012, which was received by the South Carolina Workers' Compensation Commission on January 30, 2012.
5. The Claimant's original Motion was returned as the filing fee did not accompany his hearing request. On February 17, 2012, the Claimant refiled his Form 50, Request for Hearing, along with his Motion, without making any material changes or alterations to the same.
6. The single hearing Commissioner attempted to schedule a telephone conference for March 3, 2012; however, the Claimant could not be reached at that time and a hearing was scheduled for April 18, 2012.
7. The Commission file indicates that the single hearing Commissioner's office called the Claimant on March 2, 2012; March 3, 2012; March 5, 2012; and March 9, 2012. The Claimant never returned those phone calls, but indicated he did call back on April 2, 2012. At that time, the hearing was already scheduled.
8. Following that hearing, the single hearing Commissioner issued directives to the parties on April 27, 2012 and requested the Defendants draft a Decision and Order in this matter.

9. The MRI of the lumbar spine was already authorized at the time of the hearing. A copy of the authorization was provided to the Claimant at the hearing and another copy was sent by e-mail from defense counsel to the Commission that same afternoon.
10. The Claimant testified that he would like treatment before he gets worse.
11. The carrier is to provide all causally-related medical treatment that was previously ordered in this claim.
12. The Claimant wants treatment to both the right and left lower extremities; however those body parts are not compensable under the 2005 case as the Claimant failed to carry his burden of proof establishing compensable injuries to those alleged body parts.
13. The Claimant's prescriptions were delayed by no fault of the Defendants. There was a change with the prescription company and counsel for the Defendants tried to call the Claimant and wrote letters to the Claimant without a response.
14. The Claimant requested transportation costs to attend the hearing. The undersigned deny that request.
15. The carrier is to provide authorized medical treatment on a timely basis.
16. The Claimant testified he is now on social security and his case was accepted back in 2005.
17. The Claimant testified that he is very distrustful of defense counsel, her law firm, and the insurance carrier. The single hearing Commissioner and the Appellate Panel view this as the main problem in this case.
18. The Claimant agrees to return phone calls to the Commission and to defense counsel without delay.
19. The Claimant was advised at the hearing on November 30, 2011 and again at the hearing on April 18, 2012 to communicate with all parties to help reduce expenses on all involved.

20. All unauthorized medical care needs to be filed with Medicare now that the Claimant has been accepted by social security.

CONCLUSIONS OF LAW

In view of these Findings of Fact, it is concluded that under the South Carolina Worker's Compensation Act and pursuant to other applicable law, **WE, THE APPELLATE PANEL, CONCLUDE THE FOLLOWING AS A MATTER OF LAW:**

1. Pursuant to S.C. Code Ann. §42-1-160, the Claimant sustained compensable injuries by accident arising out of and in the course of his employment on May 16, 2005 to the neck, low back, right shoulder, left shoulder, lungs, ribs, and bladder.
2. The Claimant has not carried his requisite burden of proof, required under the South Carolina Workers' Compensation Act, to establish that an injury involving the thoracic spine, right lower extremity, left lower extremity, or any other body part aside from the admitted injuries listed above arose out of or occurred in the course of his employment with the Defendants on May 16, 2005. See Clade v. Champion Laboratories, 330 S.C. 8, 496 S.E. 2d 856 (1998) (the workers' compensation Claimant has the burden of proving the facts that show the injury arose out of employment, and award of benefits must not rest on surmise, conjecture, or speculation;) Mims v. Nehi Bottling Co., 218 S.C. 513, 63 S.E. 2d 305 (1951) (the burden is upon the Claimant to prove the facts that will render the injury compensable).
3. Pursuant to S.C. Code Ann. §42-15-60, the Claimant is entitled continued causally-related medical care and treatment for his admitted injuries.
4. Pursuant to S.C. Code Ann. §42-9-30, any award for permanency at this time is premature.

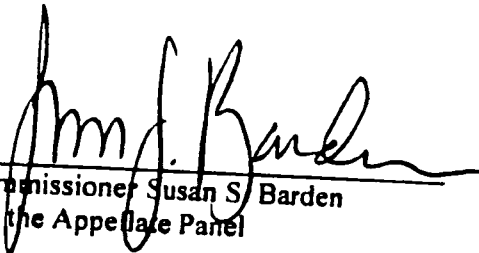
ORDER


IT IS HEREBY ORDERED that the Defendants are to provide all causally related medical treatment previously ordered for the Defendants' admitted work related accident.

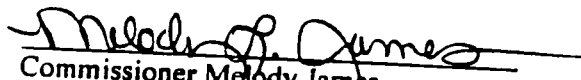
IT IS HEREBY ORDERED that the Claimant failed to carry his burden of proof establishing a compensable injury by accident to his thoracic spine, left lower extremity, or right lower extremity and therefore is not entitled to any causally related medical treatment or further benefits under the Act.

No cost or fees are awarded at this time.

AND IT IS SO ORDERED.


Commissioner Susan S. Barden
For the Appellate Panel


Commissioner T. Scott Beck


Commissioner Melody James

WE CONCUR:

CERTIFICATE OF SERVICE

To certify that the undersigned has this date
served order in the above entitled action
and to file of record by depositing a copy thereof
in the United State mail addressed to
the attorneys for said parties.

14th day of January 2013
Valene D. Deller

Valene D. Deller, Clerk Assistant to the Court

Frank Wilsom (Reg & cert)
Erin L. Hantzke



Physician's Statement

Claimant's Name: Frank E. Wilson

Employer's Name: American LaFrance

Physician's Name: Donald R. Johnson, II, MD

Insurance Carrier: AIG: C/O Gallagher Bassett Services, Inc.

Practice/Clinic: Southeastern Spine Institute

SCWC File No: 0506037

Preparer's Name: Donald R. Johnson, II, MD

Phone: (843) 849-1551

The undersigned physician has been authorized by the Employer/Carrier to treat this Claimant for his or her injury by accident pursuant to §§ **42-15-60, 42-1-172 or 42-11-10.**

Date of Injury or Illness: 5/16/08
Date of first office visit: 6/18/08 Date of last visit: 10/12/10
Diagnosis or nature of injury or illness: low back injury, L5-S1, neck
Body part(s) injured: spine Body part(s) affected: back + legs, arm
Date of Maximum Medical Improvement: 10/12/10 from surgical standpoint

Based on the **AMA Guidelines**, the claimant has sustained a _____ % **medical impairment** to _____ injured body part(s) and a _____ % **medical impairment** to _____ other affected body part(s).

The claimant is **able to return to work** without restriction. 21% whole person
 The claimant is **able to return to work with the following restrictions:** 2° low back
(Not disability but impairment) 5% whole person
 The claimant is **unable to return to work** at his or her current employment. 2° neck

As of the date I last saw this patient, it is **my professional medical opinion** the claimant:

will not need future medical care related to his or her work related injury or illness based on a reasonable degree of medical certainty (more likely than not).

will need future medical care and treatment related to his or her work related injury or illness based on a reasonable degree of medical certainty (more likely than not) and that medical care and treatment including medication is as follows:

with Dr. B. Richardson in pain management
ongoing & 2-3° med in week + Rxmt

Donald R. Johnson II, MD
Treating Physician DONALD R. JOHNSON II, MD

6/18/11
Date

**PALMETTO COMPREHENSIVE CENTER FOR PAIN
OF THE SOUTHEASTERN SPINE INSTITUTE**

913 Bowman Road, Suite B, Mount Pleasant, SC 29464
Phone 843-388-6552 FAX 843-388-6555

WILSON, FRANK

Patient #133723

DOB: 02/07/1969

November 22, 2011

Mr. Wilson is seen today in our clinic on November 22, 2011. He comes in today for a follow-up visit and states, "I have a hearing coming up."

He continues to have pain in his low back and into his bilateral lower extremities. He describes his pain as a dull, aching. He rates his pain as a 7 out of 10 on the numeric analog scale. It is worse with walking and sitting. It is better with showering and elevating his legs in the recliner. He states that his left leg pain is worse than his right.

Review of Systems: He denies chest pain. He does have some mild shortness of breath with exertion. He denies any GI issues. He does feel like his bladder issues may be worsening. He has some mild urgency that has worsened over the past month. He is also leaking at night. He is planning to see Dr. Rovner on December 1.

Past Medical History: He denies any changes in his past medical history.

Social History: He is a nonsmoker, no alcohol, no marijuana.

Allergies: No known drug allergies.

Current Medications: Oxy-IR, Skelaxin, Phenergan, and Neurontin.

Vital Signs: His vital signs were taken today to include a weight of 224Lbs, blood pressure of 117/68, pulse of 64, oxygen saturation of 98% on room air.

Physical Examination: On exam, he is a well-developed, well-nourished male who is well-groomed with a normal affect. He has 5/5 strength noted in his bilateral lower extremities. Dorsi and plantar flexion are intact. Negative straight leg raise bilaterally. 1+ reflexes noted in his lower extremities. Normal muscle tone. He does ambulate into our clinic today with an antalgic gait. He is alert and oriented x3. Cranial nerves II through XII are grossly intact.

WILSON, FRANK

Patient #133723

DOB: 02/07/1969

November 22, 2011

Page 2

We reviewed his most recent MRI and discussed his care in detail and discussed multiple options to control his pain.

Impression: This is a patient with lumbar radiculitis and post-laminectomy syndrome of the lumbar spine.

Plan: At this time, we would like to move forward with a caudal injection. We will refill his medications today and see him back in our clinic in four weeks for follow-up.

My supervising physician has reviewed this plan and he is in agreement.

Virginia G. Blease, PA-C

VGB/jls

T- 12/06/2011

**PALMETTO COMPREHENSIVE CENTER FOR PAIN
OF THE SOUTHEASTERN SPINE INSTITUTE**
913 Bowman Road, Suite B, Mount Pleasant, SC 29464
Phone 843-388-6552 FAX 843-388-6555

WILSON, FRANK
Patient #133723
DOB: 02/07/1969
December 29, 2011

Mr. Wilson is seen today in our clinic on December 29, 2011. He comes in today for a follow-up visit and states, "I can't complain too much."

He continues to have pain in his neck and his shoulders, his mid-back and his lower-back. He describes his pain as dull and aching. His new pain is sharp. He rates it today as a 4 out of 10 on the numeric analog scale. It is worse with walking, sitting and activity. It is better with rest, medications, heat, showers, and being in his recliners.

He states that he had increased left-sided neck pain after his right-sided rhizotomy. He states that he is experiencing increased pain on the left side after his right sided rhizotomy and he occasionally has pain on the right side of his neck. He states that he is having increasing pain on the left side that shoots to his sternal area and he states that this has been going on two to three weeks and that it happens daily.

Review of Systems: He has neck pain, back pain, shortness of breath, chronic cough, wheezing. He does have chest pain with thoracic and back pain. Shortness of breath with the above. He has some GU issues with bladder urgencies and incontinent in the night time. He has been seeing neurology at MUSC for proper workup. He denies any GI issues. He has not had his caudal injection that was ordered at his last visit.

Past Medical History: He denies any changes in his past medical history other than those listed above. He has recently been diagnosed with pulmonary hypertension. His last procedure was a right-sided rhizotomy at C4-5-6. It did help him. He got about fifty percent pain relief.

Social History: He is a nonsmoker, no alcohol, no marijuana.

Allergies: No known drug allergies.

WILSON, FRANK

Patient #133723

DOB: 02/07/1969

December 29, 2011

Page 2

Current Medications: Oxy-IR and he states that he has been out since last week. Neurontin which we increased the dose on the last time he was here however he did not increase his dose however he felt like this may have been a mistake so he has continued to take 100mg four times a day. He continues to take Skelaxin and Phenergan.

Vital Signs: His vital signs were taken today to include a blood pressure of 147/93, pulse of 95, oxygen saturation of 98% on room air, and temperature of 99.

Physical Examination: On exam, he is a well-developed, well-nourished male who is well-groomed with a normal affect. He has 5/5 strength noted in his bilateral upper and lower extremities. Equal grip strength bilaterally. Dorsi and plantar flexion are intact. Negative straight leg raise bilaterally. Normal muscle tone. He does ambulate into our clinic today with an antalgic gait. He is alert and oriented x3. Cranial nerves II through XII are grossly intact. Normal myofascial tone. He does have some tenderness to palpation on the left side of his thoracic spine.

Impression: This is a patient with lumbar radiculitis, post-laminectomy syndrome of the lumbar spine, and thoracic radiculitis.

Plan: At this time, we did review his lumbar MRI again in detail with the patient. We also discussed that at this time he is not a surgical candidate for correction of his L4-5 disc however he continues to complain of new on-set leg pain therefore we would like to get a bilateral lower extremity EMG/nerve conduction study to further evaluation this patient's lower extremity pain as well as his concern over his L4-5 area.

We would like for him to have his caudal injection as soon as possible. We also would like to get an MRI of his thoracic spine to rule out any type of thoracic pathology with his new on-set pain. We did spend greater than forty-five minutes face-to-face time with this patient evaluating and discussing his care. We will see him back in our clinic in eight weeks for follow-up.

My supervising physician has reviewed this plan and he is in agreement.

Virginia G. Blease, PA-C

VGB/jls
T- 01/09/2012

**PALMETTO COMPREHENSIVE CENTER FOR PAIN
OF THE SOUTHEASTERN SPINE INSTITUTE**
913 Bowman Road, Suite B, Mount Pleasant, SC 29464
Phone 843-388-6552 FAX 843-388-6555

WILSON, FRANK

Patient #133723

DOB: 02/07/1969

February 24, 2012

Mr. Wilson is seen in our clinic today on February 24, 2012. He has a diagnosis at this time of lumbar radiculitis, post lumbar laminectomy syndrome, thoracic radiculitis, lumbar spondylosis and cervical spondylosis. He comes in today for a follow-up visit and states he is surviving. He has pain in the low back, the midback, the neck and the shoulders. He describes his pain as aching, states it is worse on the left than the right side. He rates it as a 6/10 on the numeric analog scale. It is worse with activities, better with rest, medications and heat. He states workers' comp denied the EMG as well as the thoracic MRI so he has requested a hearing. He also states on March 14th he has surgery scheduled on the right shoulder for a new tear. I have explained to him that he is welcome to have all this done, but that if they need to write him additional pain medications he needs to let us know before these are filled. He also is endorsing at this time some chest pain on the left side that is radiating around from his ribs. He does have associated shortness of breath with this. Otherwise he denies any additional chest pain, shortness of breath, GI or GU difficulties or any additional changes.

PAST MEDICAL HISTORY: He does have pulmonary hypertension. He doesn't smoke, drink or use marijuana. He is not married, not working, he is on workers' compensation.

ALLERGIES: NKDA.

He take Enablex, ~~Furvorite~~, Advair, ProAir and Singular. His medications include OxyIR, Neurontin, Skelaxin and Phenergan from our office.

The patient does ambulate into our clinic today with an antalgic gait. He is well developed, well nourished, well groomed, normal affect. He has 4/5 musculoskeletal strength bilateral upper and lower extremities bilaterally. His grip strength is equal bilaterally. His grip strength is equal bilaterally. dorsi and plantar flexion are intact. He has a negative straight leg raise on the right, positive on the left and he states the pain is worse on the left than the right side with rising. He is alert and oriented x3, cranial nerves II to XII are grossly intact per examination.

IMPRESSION: This is a patient with cervical spondylosis, lumbar radiculitis, lumbar spondylosis, post lumbar laminectomy syndrome and thoracic radiculitis.

(continued)

WILSON, FRANK

Patient #133723

DOB: 02/07/1969

February 24, 2012

Page two

PLAN: At this time we would like t his patient to proceed with a thoracic MRI and I am assuming that afterwards he will most likely need a TESI but we will evaluate the scan first. I also would like him to see his primary care physician as soon as possible to confirm that it is not his heart causing the associated symptoms he is having as I am concerned there may be a component of cardiac disease associated. We will also change his Skelaxin to Baclofen as this patient is having a difficult time getting Skelaxin. We will continue his other medications as listed above. I did spend greater than 20 minutes time in consultation with this patient today, in addition to his examination and we will see him back in our office in 4 weeks time.

It is also of note that Dr. Richardson does write home health assistance for maintenance of the inside and outside of the patient's home and we will continue that at this time.

Suzanne E. Livengood, PA-C

SEL/dam

T- 03/06/12

Frank E. Wilson
8755 Jessica Court
North Charleston, SC 29406
(843) 327-9616
Date of Birth: February 7, 1969

February 24, 2012

VIA HAND DELIVERY

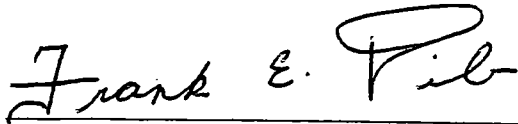
W. Blane Richardson, MD
Comprehensive Center For Pain Of Southeastern Spine Institute
913 Bowman Road Suite B
Mount Pleasant, SC 29464
(843) 388-6552

Dear Dr. Richardson:

I am a patient of yours at The Comprehensive Center For Pain Of Southeastern Spine Institute. I was referred to The Comprehensive Center For Pain Of Southeastern Spine Institute by Donald R. Johnson, II, MD of Southeastern Spine Institute. This was for the purpose of pain management for my **Back injury and Cervical Spine injury**. At the present time, I am currently preparing myself for a South Carolina Workers' Compensation Commission Hearing. This is for the purpose of addressing and determining the evaluation and treatment (**Back MRI and Bilateral Lower Extremity EMG/nerve conduction study**) requested and recommended at my December 29, 2011 Comprehensive Center For Pain Of Southeastern Spine Institute office visit. The requested and recommended evaluation and treatment noted in my patient office note dated December 29, 2011 is well supported by the **Form 14B- (Physician's Statement)** completed by Donald R. Johnson, II, MD of Southeastern Spine Institute dated June 18, 2011. Dr. Johnson clearly stated on the **Form 14B- (Physician's Statement)** that the *Body part(s) affected from the patient's **Lumbar Spine injury and Cervical Spine injury** were the *Back, Legs and Arms. The patient's **Form 14B- (Physician's Statement)** completed by Donald R. Johnson, II, MD of Southern Spine Institute dated June 18, 2011 is a part of my Comprehensive Center For Pain Of Southeastern Spine Institute patient medical file. Dr. Richardson, I request that if you are in agreement with Dr. Johnson's comments noted on the patient's **Form 14B- (Physician's Statement)** dated June 18, 2011 stating that the Body part(s) affected from the patient's **Lumbar Spine injury and Cervical Spine injury** were the patient's Back, Legs and Arms which makes the Back, Legs and Arms casually related to the patient's **Lumbar Spine and Cervical Spine injury**. Dr. Richardson if you are in agreement with Dr. Johnson's comments noted on the patient's **Form 14B- (Physician's Statement)** dated June 18, 2011, this would be based on your **professional medical opinion** and based on a reasonable degree of medical certainty (more likely than not) the patient would benefit from the evaluation and treatment requested and recommended in the patient's December 29, 2011 office visit medical note. Dr. Richardson if you would sign and date this document, it would assist in getting the necessary evaluation

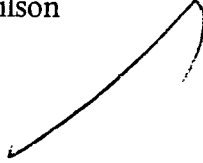
PAGE: 1 of 2

and treatment (**Back MRI and Bilateral Lower Extremity EMG/nerve conduction study**) requested and recommended in the patient's December 29, 2011 office visit medical note. I would like to thank you and your staff in advance for your assistance in this matter.



Frank E. Wilson

Date: February 24, 2012



Richardson

Date: _____

2/24/12

W. Blane Richardson, MD

Comprehensive Center For Pain Of Southeastern Spine Institute

913 Bowman Road Suite B

Mount Pleasant, SC 29464

(843) 388-6552

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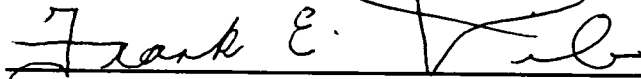
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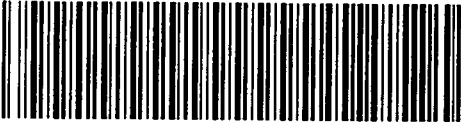



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North Charleston, SC 29406
Telephone: 8433279616

Employee: od02233

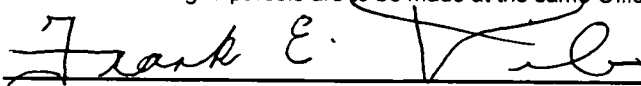
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	Contents: Other : documents		
	Tracking #:		
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 00164394000019991	Express Mail Flat Rate	\$19.99	Erin Hantske and Helen F Hiser
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