

THE STATE OF SOUTH CAROLINA
In the Court of Appeals

APPEAL FROM SOUTH CAROLINA
WORKERS' COMPENSATION COMMISSION

Appellate Case No. 2014-001788

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SC Court of Appeals

Clarence Winfrey, Employee, Claimant,Respondent/Movant,

v.

Archway Services, Inc., Employer,
and American Fire & Casualty Insurance
Company c/o Liberty Mutual Group, Carrier, Appellants.

**MEMORANDUM IN SUPPORT OF PETITION FOR REHEARING
AS TO THE ORDER OF THE HONORABLE PAULA H. THOMAS
FILED JULY 29, 2016**

In accordance with Rule 221 AND Rule 240(j), SCACR, the Movant would submit that the Court misapprehended and/or overlooked the following specific points and/or issues of law and fact as presented to the Court and upon which the Motion was based and upon which the rulings/decisions was made:

1. That this Petition is addressed to the legal and factual bases for the denial of the Motion for an Emergency Protective Order and the rulings of law and fact made within the Order which are contrary to law and fact which the Plaintiff believes were

respectfully overlooked or misapprehended by the Court. Specifically including but not limited to the Court's not addressing its statutory duty under SC Code §42-17-60; the legal assumption that there is a statute, Rule or case law that allows for "discovery" after a judgment of a lower Court/Tribunal and during the pendency of an appeal challenging the entire judgment and where there is nothing pending (ex., Family Court divorce with custody and visitation, any Circuit Court Judgment involving request for new trial, any appeal of any judgment where there is not an automatic Stay or a Stay is not granted); and that the Court did not apply the fundamental construction principle applicable to all workers' compensation issues and Awards that the Act shall be liberally construed in favor of benefits to the injured worker.

2. That as to all issues before the Court in reference to the Motion and all prior pleadings referred to by the Court that resulted in the Order of July 29th, the General Assembly provided in the 2007 Amendments to SC Code §42-17-60 that the Defendants were required to make payment of and to,

"provide medical treatment **ordered by the Commission** involved in the Appeal or certification until the questions at issue have been fully determined in accordance with the provisions of this title." (Emp. added).

The Amendments also shifted the appeals and enforcement to this Court. The Act specifically notes that the Defendants are to

provide the medical care as ordered by the Commission, "involved in the Appeal."

3. That the Award of the SC Workers' Compensation Commission as affirmed by the Full Commission specifically provided for the following:

"IT IS FURTHER ORDERED that the Claimant having been found to have sustained compensable injury specifically to include injury to his heart, the Claimant is to receive medical care for all injuries and conditions stemming from the accident that occurred in this matter and specifically to include all conditions related to the heart as found to be causally related by the authorized treating physicians which are hereby declared to be Dr. Jeffrey A. Travis and Dr. Lanneau D. Lide. The Defendants reserve the right to contest the compensability of any injury or condition opined to be related to the injury involving any bodily part, member, organ or system and the right to direct the treatment for all causally related medical problems outside of the area of expertise of the two (2) authorized treating physicians including the right to choose authorized treating physicians to provide that medical care."

The Court overlooked the fact that the language in the Award as to the reservation of the right to challenge compensability (especially applying a liberal construction) was limited to:

"medical problems outside of the area of expertise of the two authorized treating physicians".

The Movant would respectfully ask the Court to find and on rehearing to cite one word, one sentence or any opinion by Dr. Lide or Dr. Travis that any of the medical care for the

Claimant's heart is not causally related to the work-related accident.

4. That by way of Appeal, Appeal No. 2014-001788, the Appellants have challenged the compensability of the accident and have denied that the Claimant is entitled to **any** benefits specifically including medical care at their expense as a result of the accident. Again, they specifically deny the Claimant's entitlement to any medical care or compensation resulting from this accident because they in fact deny that the accident is compensable.

5. That SC Appellate Court Rules of Practice and specifically Rule 205 provides that after service of Notice of the Appeal, the Appellate Court shall have exclusive jurisdiction over the appeal" admittedly that Rule does also provide that the lower Court or Commission shall retain jurisdiction over matters "not affected" by the appeal. However, it is absolutely clear that the appeal in this case contests the injured workers' right to any medical care and therefore his entitlement to any medical care is one of the specific issues on appeal before this Court.

6. That in addition to the provision in the Appellate Court Rules which places exclusive jurisdiction in this Court, the Movant would submit that the Court misapprehended the law and that this is not only an issue that applies under the jurisdiction of this Court during the pendency of the appeal but it involves the

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statutory duty and responsibility of the Court as placed upon the Court by statute SC Code §42-17-60. There are numerous decisions prior to 2007 affirming, and that statute since the inception of the Workers' Compensation Act in 1936 is very clear that enforcement of any Award of the Commission may be had through the enforcement procedures and enforcement powers of the Circuit Court under SC Code §42-17-70. The effect of the 2007 Amendment was to remove that jurisdictional authority from the Circuit Court and place it squarely in the responsibility of this Court during the pendency of the appeal before it. Therefore, under the Rules and under the statutory authority placing the responsibility to enforce the Award of the Commission with this Court during the pendency of the appeal (unless and until the appeal is in the Supreme Court), this Court clearly has the responsibility to enforce the Award.

In addition, the Court misapprehended that until the Award of the Commission is final which cannot occur until after the appeal is resolved, the Commission has absolutely no jurisdiction or statutory authority to enforce its Award. Without citation, the jurisdiction and the authority of the Commission is limited to the authority specifically granted to the Commission by statute.

7. That the Court in its Order basically remanded this case to the Commission and is allowing for continuing discovery during appeal and is gutting the intent of SC Code §42-17-60 by holding

that:

"Questions regarding the causality of Respondent's mitral valve defect and compensability of the attendant surgery are not part of the subject appeal. As we have noted, questions regarding those issues are not proper before this Court and are directed to the Workers' Compensation Commission Accordingly, Respondent's Motion for an Ex Parte Order of Protection directing Appellants to cancel the deposition scheduled for August 1, 2016 is denied." (Emp. added).

The Movant does not believe the Court intended and does not realize and would implore the Court to rehear its decision because the ruling as it stands allows for ongoing discovery during appeal and allows the Appellants' to challenge on an ongoing basis compensability for every bit of medical care prescribed after the Award of the Commission. This ruling eviscerates the Award and the provision of medical care during the pendency of the appeal. In this case, the Commission ordered continuing medical care for Mr. Winfrey's heart through Dr. Travis and Dr. Lide. The Court's Ruling allows a continual challenge to the Judgment. Must a claimant obtain a causal relationship statement and/or can the Appellants (or any insurance company/employer) deny awarded medical care without a statement from the designated medical doctors that care is not related? What about every medical visit, test, medication, physical therapy, injection or surgery prescribed after an Award? That is exactly what the decision holds and what the Appellants seek to do. Query: Commission awards

treatment for back and after award and appeal doctor orders back surgery; Commission awards traumatic brain injury and after appeal doctor orders brain surgery or after appeal doctor orders hospitalization for encephalopathy due to work-related medications or for blood clots after work-related surgery, etc., etc. Oh! The Defendants want to take a deposition (nothing pending) to see if it is compensable.

The Order also misapprehends the affect an Award has on the provision of medical care after the Award and as to when and how an action is filed and is pending after an Award. After an Award/Judgment of the Commission the provision of care becomes a claims administration issue until there is a controversy (SCWCC Rule 67-601). Once awarded, medical care cannot be denied unless the Defendants have a factual basis for denial and in reference to medical care that means a medical opinion. If the Defendants deny care, there is still nothing pending before the Commission. The claimant can file an action to have the care provided and then there is a pending action. If the Defendants do not establish a basis, at the time of the denial, they are subject to fines including a \$750/day fine for non-payment pursuant to an Award; and possible referral for unfair claims practices; and possibly referral under the Insurance Fraud Act. Also, only after the claimant files are they entitled to discovery. Like every other Court there has to be a pending action.

Again, the Court misapprehended or overlooked that in a workers' compensation case (and actually the same would apply to a civil litigation case after the Judgment is entered), there is no further discovery because there is no "pending" action until a further pending action is filed which is after the appeal where compensability is the issue. There is simply nothing pending before the Commission at this time and there is no right to discovery by either side until the issues on appeal are resolved. The Appellants are simply paying pursuant to the Award as if it were final by statute (§42-17-60) which prevents a Stay.

A clear review of the discovery provisions found at SC Code §42-3-140 through 170 will show unto the Court that the discovery provisions clearly contemplate depositions, subpoenas and all discovery being issued only in a pending proceeding before the Commission. Again, there is simply nothing pending before the Commission at this time.

In addition, the Act does provide that the defendants may communicate with the claimant's authorized physicians after an Award but only with his prior knowledge; and his presence if the communication is in person, concerning certain medical issues including causal relationship. This is the only way during the pendency of the appeal or in fact after any Award of the Commission that the defendants may challenge or question or in fact contact/communicate with the claimant's medical providers.

(See: SC Code §42-15-95). This is an exception to general principles of law as to a third party contacting a physician about his relationship with his or her patient which is in violation of numerous Federal and State statutes and common law concepts in that regard. In fact, such contact is actually a violation of the SC Constitution which contains a specific right of privacy.

8. That the Court misapprehended that at no time have the Appellants ever submitted any documentation wherein prior to their refusal of medical care that resulted in the original Order of this Court on March 18, 2016, nor have the Appellants ever presented anything wherein they had any statement from any doctor involved, much less Dr. Lide or Dr. Travis who are the two specific doctors designated by the Commission to provide this man's medical care, stating that any of this medical care is not causally related. They did not and will not submit any documentation prior to the time that the Movant came before this Court and asked for a Protective Order ordering them to provide the medical care during the pendency of the appeal. None exists. They have none from Dr. Lide nor Dr. Travis prior to this entire situation occurring, and they have none from any of the doctors involved. In fact, the Movant will submit that they will not submit any nor can they submit any nor was there any statement made by any doctor denying causation prior to this refusal of medical care that began in January of 2016 or through the date

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9. That the Court overlooked or misapprehended the very basis for the request for medical care which the Court ordered be provided in its March 18, 2016 Order. The Court makes the statement in its July 29th Order, which the Movant does not understand and cannot believe, that based on the fact that the doctor had stated that because of the injured worker's condition, he wanted to do the surgery within seven (7) days that because the injured worker has lived and is still alive that this serves as some type of factual basis to conclude that the surgery was not and is not needed as soon as possible. While the urgency of the situation based on the doctor's statement did result in the Motion being filed. At the time of the Motion, the Appellants had delayed providing the care for well over a month and the decision of the Court did not occur until two and a half (2 ½) months after the doctor had originally wanted to do the surgery. The Movant is absolutely confident that the Court is not criticizing the injured worker because the injured worker lived or that the doctor was not being truthful as to the surgery being needed as soon as possible. The Court's decision, like any decision, cannot be based on surmise, speculation or innuendo. There is simply no factual basis that this surgery has not been needed since the time that the doctor requested it nor is there any factual basis submitted that the doctors do not want to do this surgery as soon as it can be performed. In fact, attached hereto is a recent statement by

one of the specifically designated physicians, Dr. Lide, from a follow-up visit on June 28, 2016 that Mr. Winfrey, as of June 28th when he visited with him, "needs the surgery as soon as possible." There is simply no factual basis to the contrary and the Movant is absolutely positive that the Court did not mean to criticize this injured worker nor did it mean to excuse the Appellants' conduct on the basis that the injured worker has continued to live.

In fact, the Movant would submit that that very logic for delaying treatment is the specific reason that the General Assembly provided that the Appellants had to continue to provide medical care during the pendency of the appeal. This is the very reason that both compensation and medical must be provided during appeal because otherwise, certain unscrupulous parties that care more about money than our individual fellow human beings would not provide expensive medical care nor provide compensation on which a claimant can live during the pendency of the appeal with the very hope that a claimant would die or would be forced into a situation of accepting pennies on the dollar for their work-related injury to prevent starvation.

The words of the Magna Carta, William Ewart Gladstone, and Chief Justice Warren E. Burger ring in reference to due process and the very reason that the General Assembly made this provision:

"To no one will we sell, to no one will we refuse or delay, right or justice". (Magna Carta of 1215, clause 40).

* * *

"Justice delayed is justice denied." William Ewart Gladstone (1809-1898)."

* * *

"A sense of confidence in the Courts is essential to maintain the fabric of ordered liberty for a free people and three things could destroy that confidence and due incalculable damage to society: that people come to believe that inefficiency and delay will drain even a just judgment of its value; that people who have long been exploited in the smaller transactions of daily life come to believe that Courts cannot vindicate their legal rights from fraud and overreaching; that people come to believe the law - in the larger sense - cannot fulfil its primary function to protect them and their families in their homes, at their work, and on the public streets." Chief Justice of the United States, Warren E. Burger, address to the American Bar Assoc., 1970. (Emp. added).

Harken the words of the Supreme Court of this State since 1936 as to the beneficial purposes of the Workers' Compensation Act. See for example: Cokely v. Robert Lee, Inc., 197 S.C. 157, 14 S.E.2d 889 (1941).

10. That the Court misapprehended in its decision the facts in reference to the actions of the Appellants from January and even after March 18th had on delaying the surgery by finding that under the evidence that the Appellants are not attempting to delay the surgery. This is a misapprehension of the facts and is contrary to the both direct and circumstantial evidence in that regard. The Movant would ask this Court to remember, based on the

information supplied to the Court ever since the original Motion requesting that the Appellants be required to provide the surgery, that the very reason for the original Motion was that after the doctor wanted to perform the surgery within seven (7) days, the Appellants held a conference call the latter part of January between Defense Counsel, the Rehab Nurse, and the Adjuster and decided they would not provide the surgery until after depositions of the doctors. The Court in its March 18th Order specifically held that they had to provide the surgery and had the right after the provision of medical care to conduct discovery, whether or not they have that right or not, that was the Court's decision. The uncontradicted evidence in the Record is that they continued to request the deposition and the uncontradicted evidence in the Record is that the doctors did not schedule this surgery specifically because of a pending deposition set for July 11th. The Appellants were ordered on March 18th to provide the surgery and we are now in August of 2016 and that surgery has still not been performed. In reference to circumstantial evidence, this is the classic example from law school wherein one enters a theater and the ground is not wet and when one exits the theater, the ground is wet. It is a logical conclusion that it rained while you were in the theater. The Movant would first submit that it is a logical conclusion since this Court ordered the Appellants to provide that surgery on March 18th and it has not been provided

that they have obstructed its provision. The very fact that contrary to the Order of this Court, they continued to seek the deposition and had actually scheduled the deposition of a doctor which interfered with the scheduling of the surgery is a specific direct fact that the Defendants have not complied with the Order of this Court.

In addition, attached to this Motion is a document obtained during the emergency process in July in reference to the deposition wherein Appellants' Counsel was having direct communication with Dr. Ikonomidis' office (without copying Respondent's Counsel) after the March 18, 2016 Order and specifically inquired as to whether or not they could delay the surgery until May as evidenced by the responsive email from by Ms. Betsy Hyland, the Administrative Assistant to Dr. Ikonomidis. This is direct evidence that the Appellants' actions, intentionally or unintentionally, by continuing to question causation and by continuing to try to schedule the deposition before the surgery and medical care were provided, which was the direct and specific Order of this Court, delayed this surgery from being performed.

WHEREFORE, the Movant would respectfully request the following:

1. That the Court rehear and issue an Order based on statutory law as to whether or not and as to what extent the

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Appellants are allowed to perform discovery during the pendency of an appeal in reference to the specific issues that are before the Court on appeal.

2. That the Court grant rehearing and specifically address the basis for the Court's Order of medical care and the basis upon which the Court ordered the Appellants to provide medical care setting forth statutory law, case law, and/or Rules and Regulations under the Workers' Compensation Act, Administrative Procedures Act and the Rules of this Court as well as other applicable law providing for such medical care.

3. That the Court set a hearing before a Judge of this Court as to a Protective Order and to specifically delineate what further discovery, if any, shall be had during the pendency of this appeal.

4. That at that same hearing review the evidence as to whether or not there have been violations of the statutory laws of the State of South Carolina including the constitutional right of privacy, violations of the HIPPA laws, improper use of process during appeal (without a pending action), and/or improper communication with the Respondent's doctors and for such other and further relief as the Court deems appropriate based on that hearing.

Respectfully submitted,



Preston F. McDaniel, Esquire
SC Bar #: 3770
MCDANIEL LAW FIRM
1315 Elmwood Avenue
Columbia, South Carolina 29201
(803) 771-7211
Attorney for Respondent/Movant

August 15, 2016

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The South Carolina Court of Appeals

Clarence Winfrey, Employee, Claimant, Respondent,

v.

Archway Services, Inc., Employer, and American Fire & Casualty Insurance Company c/o Liberty Mutual Group, Carrier, Appellants.

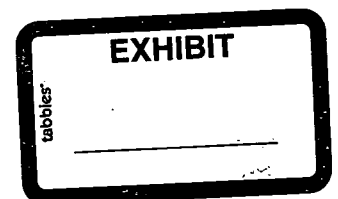
Appellate Case No. 2014-001788

ORDER

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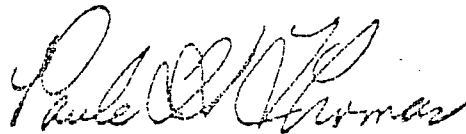
Respondent moves for an ex parte protective order directing Appellants to cancel a deposition set for August 1, 2016. Respondent further asks this court to enforce its order dated March 18, 2016, and "for such other and further relief in reference to discovery or any further action during the pendency of the appeal" In the March 18 order, this court granted Respondent's motion to compel medical care based on Respondent's assertions that any delay in care could result in "an absolutely devastating situation for [Respondent], up to and including his death." We rejected Appellants' position that depositions were necessary at that time to establish whether the recommended treatment was causally related to Respondent's heart condition "given that Respondent's surgeon recommended valve repair surgery within seven days of January 5, 2016." However, we noted nothing prevented Appellants from raising the causality issue after Respondent received the recommended treatment.

We note it has now been four months since we granted Respondent's request to compel medical care, which if delayed could have resulted in Respondent's death. We additionally recognize that exhibits filed with the myriad of motions in this case demonstrate the surgery has been approved "to go forward from the carrier's perspective" and Appellants are not working to actively impede Respondent's ability to undergo the recommended treatment. *See* Emails attached to Respondent's "Memorandum in Support of Emergency Motion for an Order of



Protection Postponing the Deposition of Dr. John Ikonomidis set for July 11, 2016 Until Further Order of the Court and Further to a Memorandum Schedule as to Whether or not the Defendants the Right to take Depositions During the Pendency of the Appeal(s)." Furthermore, we note the Workers' Compensation Commission Appellate Panel affirmed the Single Commissioner's ruling that "the [Appellants] reserve the right to contest the compensability of any injury or condition opined to be related to the injury involving any bodily part, member, organ or system[.]"

This court's March 18, 2016 order was not intended to convey the notion Appellants would be prevented from challenging the causality of Respondent's recommended surgery. The order was granted based on Respondent's assertions that Respondent's "condition [was] extremely delicate" and any delay in surgery could result in "an absolutely devastating situation for [Respondent], up to and including his death." Questions regarding the causality of Respondent's mitral valve defect and compensability of the attendant surgery are not part of the subject appeal. As we have noted, questions regarding those issues are not proper before this court and are directed to the Workers' Compensation Commission. Therefore, in accordance with this court's March 18, 2016 order, Respondent's surgery is entitled to go forth and Appellants are entitled to contest the compensability of the surgery. Accordingly, Respondent's motion for an ex parte order of protection directing Appellants to cancel the deposition scheduled for August 1, 2016 is denied.



FOR THE COURT

Columbia, South Carolina

FILED

July 29, 2016

cc:

Brett Harris Bayne, Esquire
Preston F. McDaniel, Esquire
Amy Bracy



Genex – Provider App

Claim #:	22209963	IW Name:	Clarence Winfrey
Target dates		WC Diagnosis(es):	425.4 (Congestive Cardiomyopathy)
RTW mod duty:	To be determined	Current work status:	Not Working
RTW full duty:	To be determined	Provider name:	Lanneau Lide, MD, Cardiologist
MMI:	To be determined	Appt date:	27-Jun-2016

- MCM attended appointment and met with: Lanneau Lide, MD, Cardiologist
- MCM did not attend appointment.
- Copy of relevant physician orders are attached

On 27-Jun-2016, I attended an appointment with Mr. Winfrey and Dr. Lanneau Lide, Cardiologist. I met with Mr. Winfrey in a secluded area of the waiting room. He reported general malaise and fatigue with exertion shortness of breath. We discussed his dental extractions and the delays of receiving the necessary records to send to MUSC. He stated he is ready to "get this done". We discussed Dr. Ikonomidis' delayed return to the office to review records and determine treatment plan and timetable.

Following a private examination, I met with Mr. Winfrey and Dr. Lide. Dr. Lide reported he would see Mr. Winfrey back in the office in 3 months unless directed by MUSC to return sooner. He recommended valve surgery as soon as possible for Mr. Winfrey. A follow up appointment is scheduled on 28-Sep-2016 at 9:00am pending timing of heart surgery and follow up directed by MUSC.

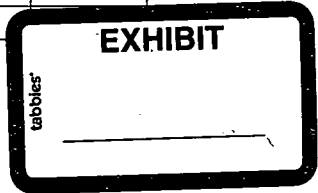
Narrative will summarize appointment outcome and will include the MCM's assessment of the injured worker as related to the work injury (if in-person), and will include:

1. Subjective symptoms: Mr. Winfrey reported fatigue and general malaise.
2. Objective findings: Dr. Lide reported Mr. Winfrey has significant congestive heart failure secondary to poor ventricular function and mitral regurgitation.
3. Provider treatment plan/recommendations, to include continue medication regimen and follow up at MUSC. He is to follow up with Dr. Lide in 3 months pending timing of surgery.

Diagnosis Performed	Date	Details	Results
	6/9/2015	Colonoscopy (rule out GI cause for anemia)	Medium sized hemorrhoids, a 1.5 cm sigmoid polyp, and a 5mm sigmoid polyp. Polyps removed.
	8/17/2015	EMG/NCV	Mild left carpal tunnel syndrome. No evidence of peripheral neuropathy, radiculopathy, or nerve impingement per Dr. Westerkam.
	10/20/2015	MRI cervical spine	Mild multilevel degenerative disc disease with mild C5-6 foraminal stenosis worse on the right per Radiologist.
	10/20/2015	MRI brain	Reduce intracranial volume with suspected tiny bilateral remote basal ganglia lacunar-type infarcts. No acute findings otherwise per Radiologist.
	12/28/2015	Transesophageal echocardiogram	Severe mitral insufficiency with primarily anterior leaflet pathology and estimated ejection fraction about 30% per Dr. Ikonomidis, Heart Surgeon.

PT/PT/Work Conditioning/etc.

Service	Start Date	Provider	Frequency	Anticipated Duration	Cost	End Date
Gastroenterology	07/06/2015	Bristow, Walter				
Cardiovascular	04/06/2016	Ikonomidis, John				





Surgery							
	05/12/2015	Lexington Medical Center					
	05/12/2015	Lide, Lanneau					
	07/01/2015	Mazzeo, Paul					
Cardiovascular Surgery	04/06/2016	Steinberg, Daniel					
Cardiovascular Surgery	05/12/2015	Travis, Jeffrey					
Cardiovascular Surgery	11/16/2015	Van Bakel, Adrian					
Neurology	07/29/2015	White, MD, Marshall					

a) Rx: No changes in medications at this visit.

Name	Dosage	Type	Frequency	Purpose	Prescribing Physician	Pharmacy	Start Date	End Date
Altase	5 mg	OTC	One capsule daily	Anti-hypertensive	Lide, Lanneau D.			
HCTZ	12.5	Rx	One tablet daily	Anti-hypertensive	Lide, Lanneau D.			
Lasix	80 mg	Rx	One tablet daily	Diuretic/ Anti-hypertensive	Lide, Lanneau D.			
Spironolactone	25 mg	Rx	One tablet daily	Diuretic/ Anti-hypertensive	Lide, Lanneau D.			
Nitrostat	0.4 mg	Rx	One tablet under tongue for chest pain. May repeat	Antianginal	Lide, Lanneau D.			
Ranexa	500 mg ER	Rx	One tablet twice daily	Antianginal	Lide, Lanneau D.			
Pravastatin	40 mg	Rx	One tablet at bedtime	Dyslipidemic	Lide, Lanneau D.			
Vitamin C	500 mg	OTC	One tablet twice daily	Dietary supplement	Lide, Lanneau D.			

- b) Surgery: He is status post one-vessel coronary artery bypass grafting and ventriculoseptal defect (VSD) repair in May 2013. Recommended mitral valve replacement by Dr. Idonomidis.
- c) Complications impacting recovery: Cardiomyopathy, weakness, shortness of breath, unsteady gait, and gastrointestinal issues related to unspecified bleeding.
4. Nurse / EBM guidelines assessment: Mr. Winfrey suffered a catastrophic electrical injury affecting his heart directly and contributing to cardiomyopathy (425.4). He is status post one-vessel coronary artery bypass grafting and ventriculoseptal defect (VSD) repair in May 2013. Evaluation of peripheral neuropathy is appropriate with vascular issues to rule out neurologic etiology. Current medications and cardiac rehabilitation are within treatment guidelines.
5. Work status: Not working
6. Case Management Strategy - what the MCM plans to do to attain referral goal
- I will contact Mr. Winfrey on a weekly basis for report of medical status and to coordinate and schedule appointments through 5-Jul-2016.



- I will keep the CCO, defense, and plaintiff attorneys promptly advised of case developments as they occur through 5-Jul-2016.
- I will coordinate transportation for each of Mr. Winfrey's covered appointments.
- I will coordinate with the MUSC valve team, when approved by CCO.

Activity Date: 27-Jun-2016 - 27-Jun-2016

Activity Date	Activity Note
6/27/2016	Roundtrip travel in heavy traffic to attend an appointment with Mr. Winfrey and Dr. Lanneau Lide, Cardiologist.
6/27/2016	Roundtrip mileage to attend an appointment with Mr. Winfrey and Dr. Lanneau Lide, Cardiologist.
6/27/2016	<p>I met with Mr. Winfrey in a secluded area of the waiting room. He reported general malaise and fatigue with exertion shortness of breath. We discussed his dental extractions and the delays of receiving the necessary records to send to MUSC. He stated he is ready to "get this done". We discussed Dr. Ikonomidis' delayed return to the office to review records and determine treatment plan and timetable.</p> <p>Following a private examination, I met with Mr. Winfrey and Dr. Lide. Dr. Lide reported he would see Mr. Winfrey back in the office in 3 months unless directed by MUSC to return sooner. <u>He recommended valve surgery as soon as possible for Mr. Winfrey.</u> A follow up appointment is scheduled on 28-Sep-2016 at 9:00am pending timing of heart surgery and follow up directed by MUSC.</p>
6/27/2016	Email update to CCO and attorneys following the appointment attended with Mr. Winfrey and Dr. Lide.
6/27/2016	Provider Visit Report completed.

Howard Altman, RN

Submitted By: Howard Altman RN, BSN
Title: Case Manager - Medical
Phone #: (704) -503-4775, (803) 530-9693
Email: Howard.Altman@genexservices.com

Debra Gray

Supervised By: Debra Gray BA, M. Ed, CCM, CRC
Supervisor - CM

Cc: McAngus, Goudelock, & Courie, LLC. c/o Brett Bayne, Esq.
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c/o Preston McDaniel, Esq.
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Columbia, SC 29201

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Brett Bayne

From: Hyland, Betsy <puthofey@musc.edu>
Sent: Wednesday, March 30, 2016 4:23 PM
To: Brett Bayne
Cc: Ikonomidis, John S.
Subject: RE: Questionnaire for Dr. Ikonomidis in Clarence Winfrey Matter

Mr. Bayne,

Dr. Ikonomidis said Mr. Clarence Winfrey's surgery could be postponed until May 2016.

Also, he asked if the rates he quoted you for his deposition were acceptable.

Betsy

Betsy P. Hyland
Administrative Assistant John S. Ikonomidis, MD
MUSC Cardiothoracic Surgery
843-876-4842 Office
843-876-4866 Fax
puthofey@musc.edu

From: Brett Bayne [<mailto:brett.bayne@mgclaw.com>]
Sent: Wednesday, March 23, 2016 2:25 PM
To: Hyland, Betsy
Cc: Ikonomidis, John S.
Subject: Questionnaire for Dr. Ikonomidis in Clarence Winfrey Matter
Importance: High

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Betty,

Please see the attached letter for Dr. Ikonomidis. This has been sent via hard copy as well. In lieu of the depositions for now, I would appreciate you filling out the questions and returning to me by the end of the week (3/25) if at all possible. For ease, you can simply scan and email it back. Please feel free to contact me if you have any questions (803-227-2281).

Thank you,

Brett

