

THE STATE OF SOUTH CAROLINA
In the Court of Appeals

APPEAL FROM THE SOUTH CAROLINA
WORKERS' COMPENSATION COMMISSION
APPELLATE PANEL

Appellate Case No. 2017-001027
W.C.C. File No. 1019167

RECEIVED

MAR 19 2018

SC Court of Appeals

Seeahray Brailsford, Employee, Claimant, ...Appellant,

v.

Piggly Wiggly Carolina Company, Inc., Employer, and Constitution
State Service Company as TPA for Greenbax Enterprise Inc., Carrier, ... Respondents.

SUPPLEMENTAL RECORD ON APPEAL

Seeahray Brailsford
322 Rice Road
Newberry, SC 29108
APPELLANT *PRO SE*

Michael E. Chase (SC Bar No. 15230)
Carmelo B. Sammataro (SC Bar No. 69746)
Turner Padget Graham & Laney, P.A.
Post Office Box 1473
Columbia, SC 29202
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ATTORNEYS FOR RESPONDENTS

INDEX

I. ORDERS AND JUDGMENTS

October 11, 2016 Decision and Order of the single commissioner	1
March 29, 2017 Decision and Order of the Full Commission.....	10

II. PLEADINGS

October 22, 2014 Form 50 - Employee's Request for Hearing	19
November 21, 2014 Form 51 - Employer's Answer to Request for Hearing	21
January 26, 2015 Form 21 - Employer's Request for Hearing	23
April 5, 2016 Form 50 - Employee's Request for Hearing.....	24
April 20, 2016 Form 51 - Employer's Answer to Request for Hearing	25
October 14, 2016 Form 30 - Request for Commission Review.....	26

III. TRANSCRIPTS

Transcript of December 10, 2014 deposition of Seeahray Brailsford	35
Transcript of August 1, 2016 hearing	67

IV. EXHIBITS AND OTHER MATERIALS

Respondents' APA submissions (pp. 0025-0029, 0056-0061, 0181-0184, 0189-0192, 0229-0230, and 0235-0237)	89
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V. CERTIFICATE OF COUNSEL.....116

SOUTH CAROLINA WORKERS' COMPENSATION COMMISSION

W.C.C. FILE NO: 1019167

Seeahray Brailsford,

Employee,

Claimant,

vs.

Piggly Wiggly Carolina Company, Inc.,

Employer,

AND

Constitution State Service Company as
TPA for Greenbax Enterprise Inc,

Carrier,

Defendants.

DECISION AND ORDER OF THE
SOUTH CAROLINA WORKERS'
COMPENSATION COMMISSION

HEARING:

Held in Columbia, South Carolina on August 1, 2016, before
Commissioner T. Scott Beck.

APPEARANCES:

Claimant appeared *pro se*.

Defendants represented by Michael E. Chase, Esquire, of Turner
Padgett Graham & Laney P.A., of Columbia, South Carolina.

PURPOSE OF HEARING:

To determine the issues as set forth on Forms 50 and 51, as well as
the Form 21, and any other issues which may have timely come
before the Commissioner.

DECISION AND ORDER:

T. Scott Beck, S.C. Workers' Compensation Commissioner.

FILED:

_____, 2016.

APA / EVIDENTIARY SUBMISSIONS

The following records were submitted into evidence under the Administrative Procedures

Act:

Defendant's APA Submissions

NAME OF PROVIDER/OTHER	DATE(S) OF RECORD(S)	PAGE NUMBERS
Oscar F. Lovelace, Jr., M.D. Lisa Heichberger, M.D.	11/24/10 – 5/19/11	DEF 0001 – DEF 0045
S. Wendell Holmes, Jr., M.D. Moore Orthopaedics	2/7/11 – 10/27/11	DEF 0046 – DEF 0084
Physicians Health and Rehab	12/28/10 – 7/16/12	DEF 0085 – DEF 0090
Newberry Physical Therapy & Sports Medicine Clinic, Inc.	3/1/11	DEF 0091 – DEF 0167
John Clavet, M.D. Moore Orthopaedics	7/15/11	DEF 0168 – DEF 0173
David Lee, M.D. Carolina Orthopaedic & Sports Medicine, P.A. Southeastern Orthopaedic and Sports Medicine	12/6/11 – 7/29/14	DEF 0174 – DEF 0230
Imagecare	1/13/12	DEF 0231 – DEF 0234
Coleman Fowble, M.D. Midlands Orthopaedics, P.A.	9/12/12	DEF 0235 – DEF 0237
Ryan Hess, M.D.	2/20/14	DEF 0038 – DEF 0240
Jacquelyn F. Van Dam, M.D.	5/12/14	DEF 0241 – DEF 0244
Global Options Report and DVD	4/25/13 4/30/13	
Deposition Transcript of Claimant	12/10/14	
Form 70 Mediator Report	1/17/15	
Letter from Thomas Pope III, Esquire	3/20/15	
Form 70 Mediator Report	6/13/16	

STIPULATIONS

All parties stipulated at the hearing to the following issues:

1. The purpose of the hearing was to determine the issues set forth on Forms 50 and 51, as well as the Form 21, and any other issues which may have timely come before the Commissioner.
2. Notice of the hearing was timely and properly served upon all parties of interest.
3. Venue, set in Richland County, is proper as agreed by all parties.
4. The Claimant's average weekly wage and compensation rate are \$537.18 and \$358.14, respectively.
5. The Claimant seeks benefits under the South Carolina Workers' Compensation Act based upon an alleged accidental injury occurring on November 23, 2010 while employed by the Employer and, therefore, the South Carolina Workers' Compensation Commission has jurisdiction of the case.

STATEMENT OF THE CASE

The Claimant claims an injury by accident arising out of and in the course of employment on or about November 23, 2010. The Claimant specifically contends that she injured her left shoulder with effect to her left arm and hand. The Claimant seeks an award for permanent partial disability to her left shoulder, left arm and her left hand. In addition, the Claimant is seeking future medical care for causally related maintenance, replacement or repair of the prosthetic shoulder.

Defendants contend that the Claimant achieved maximum medical improvement on July 29, 2014 with a converted rating of 46.7 percent to the left shoulder. The Defendants assert that this is a single scheduled member injury to the left shoulder and request an order stopping

payment of temporary total disability benefits and seek a credit for overpayment for benefits paid beyond the date of maximum medical improvement. In addition, Defendants assert that the Claimant is entitled to future medical care but limited to lifetime repair, maintenance or replacement of causally related medical hardware.

EVIDENCE OF THE CASE

The Claimant appeared and testified. She explained that she injured her left shoulder on November 23, 2010 while working for Piggly Wiggly.

The Claimant was reaching for some frozen pies with her left arm above her head. As she pulled them towards her off the pallet, she felt pain go through her left arm.

The Claimant reported the injury to the store manager. At that time, she went to see the company doctor, Dr. Oscar Lovelace.

The Claimant explained that she received care for her shoulder and then had an MRI in March of 2011, which showed that she suffered a torn rotator cuff in her left shoulder.

Based on the medical records, the Claimant had left shoulder surgery with Dr. Wendell Holmes (Def. APA 56-57). She claims that following surgery she continued to experience pain while attending physical therapy. She explained that she had not had these types of issues with her previous rotator cuff surgery on her other (right) shoulder. She testified that Dr. Holmes told her to get a second opinion.

The Claimant had a second opinion with Dr. David Lee. She claims that Dr. Lee found ongoing issues with her shoulder and recommended repeat surgery. Dr. Lee performed the revision surgery (Def. APA 181-184). This was not the surgery when the prosthetic was placed.

She continued to have issues with her shoulder. She got another opinion with Dr. Coleman Fowble who recommended a reverse total shoulder arthroplasty (Def. APA 235-237).

That procedure was completed by Dr. Lee, who placed a prosthetic device in her shoulder (Def. APA 188-190).

The Claimant explained that her left shoulder injury has had a large impact on her life and that she is no longer able to work. She explained that she is now sixty-five and has been out of the work force with limited education.

The Claimant conceded and read during cross-examination her testimony from her prior deposition that she was unable to walk her dog and hold the leash in her left hand. However, she would not concede that the surveillance presented as evidence showed her using her left hand walking the dog and pulling on the leash.

The Claimant has not returned to work since she was released by Dr. Lee. She admits that she has not even applied for a job, has not gone back to see the doctor and is not taking any prescription medications.

The Claimant claims that this whole ordeal has been very depressing and has caused her to start taking depression pills. However, she testified that no doctor has related her depression to her left shoulder injury, and she confirmed that she is not claiming depression as an injury and is therefore not seeking benefits for the depression under the Act. In her deposition testimony, the Claimant admitted that her depression pre-existed this accident.

FINDINGS OF FACT

1. The Claimant sustained an accidental injury to her left shoulder only on November 23, 2010, which arose out of and in the course of employment with Piggly Wiggly. This finding is based upon the pleadings, the testimony rendered, and the medical evidence submitted.

2. The Claimant treated with Dr. Wendell Holmes, and he performed shoulder surgery on March 9, 2011 (Def. APA 56-57). The Claimant continued to have shoulder issues and received a second opinion, paid for by the Defendants, with Dr. David Lee, who performed a second shoulder surgery on February 15, 2012 (Def. APA 181-184). The Claimant continued to have ongoing shoulder issues and eventually had a reverse total shoulder arthroplasty (Def. APA 188-190). As a result of this last procedure, the Claimant has prosthetics in her shoulder. This finding is based upon the testimony rendered and the medical evidence submitted.

3. The Claimant did not sustain any other injuries by accident arising out of and in the course of employment on the date in question, including but not limited to, her left arm, left elbow, and depression. In addition, the Claimant failed to show a causal connection between her left shoulder injury and subsequent treatment for her liver issue and other claimed infections she contends that she suffered from while in the hospital. This finding is based upon the testimony rendered and the medical evidence submitted.

4. Per stipulations made by the parties, the Claimant earned an average weekly wage of \$537.18, and, therefore, the applicable compensation rate is \$358.14.

5. The Claimant reached maximum medical improvement for her single scheduled member shoulder injury on July 29, 2014 (DEF APA 229). She was assigned a converted impairment rating of 46.7% to the left shoulder (DEF APA 229). She did not receive any other impairment ratings as a result of this accident.

6. Defendants are entitled to stop payment of temporary total disability benefits and are entitled to a credit for temporary total disability benefits paid beyond July 25, 2016, the date which the Defendants filed their Form 21.

7. The Claimant is entitled to 70% permanent partial disability to the left shoulder, less credit for TTD overpayment, and subject to the maximum total benefits of 500 weeks compensation under the Act, which may limit her net recovery.

8. The Claimant is awarded future lifetime medical care limited to the repair, maintenance, or replacement of causally related medical hardware for the left shoulder only pursuant to S.C. Code Ann. Section 42-15-60.

CONCLUSIONS OF LAW

1. The Claimant suffered an admitted compensable injury to the left shoulder only on November 23, 2010. This conclusion is based upon findings of fact 1-5, and South Carolina Code Ann. Section 42-1-160.

2. The Claimant reached maximum medical improvement for the left shoulder on July 29, 2014. This conclusion is based upon findings of fact 1-5.

3. The Defendants are entitled to stop payment of temporary total disability benefits and are entitled to a credit for overpayment of temporary total disability benefits back to the date of filing the Form 21 on July 25, 2016 pursuant to South Carolina Code Ann. Section 42-9-10 and the regulations.

4. The Claimant is entitled to an award of 70% to the left shoulder. This conclusion is based upon finding of facts 1-7, and South Carolina Code Ann. Section 42-9-30 for a single scheduled member injury.

5. The award of 70% to the shoulder in this case for permanent partial disability is subject to, and may be limited by, the maximum period of compensation of 500 weeks allowable under the Act pursuant to section 42-9-10 and other sections of the Act. Therefore, claimant's net

award may be less than 70% of the shoulder depending on the number of weeks of temporary total disability benefits paid.

6. The Claimant is entitled to lifetime causally related medical expenses limited to repair, maintenance or replacement of the hardware in the Claimant's left shoulder only. This conclusion is based upon South Carolina Code Ann. Section 42-15-60.

AWARD

IT IS HEREBY ORDERED AND ADJUDGED that the Claimant sustained a compensable injury to the left shoulder only on November 23, 2010 and reached maximum medical improvement on July 29, 2014;

IT IS FURTHER ORDERED AND ADJUDGED that Defendants are entitled to stop payment of temporary total disability benefits and that Defendants are entitled to a credit for temporary total disability benefits paid beyond July 25, 2016, the date of filing the Form 21.

IT IS FURTHER ORDERED AND ADJUDGED that the Claimant is awarded 70% permanent partial disability benefits to the left shoulder, less credit for overpayment of TTD, and subject to the 500 week limitation of maximum compensation benefits.

IT IS FURTHER ORDERED AND ADJUDGED that the Claimant is awarded future medical care limited to repair, maintenance, or replacement of causally related medical hardware in the left shoulder.

IT IS SO ORDERED.

SOUTH CAROLINA WORKERS'
COMPENSATION COMMISSION



T. Scott Beck, Commissioner

October 11, 2016

Columbia, South Carolina

Order Served Upon:
Michael Chase, Esquire
Turner Padgett Graham & Laney, PA
PO Box 1473
Columbia, SC 29202
Seeahray Brailsford
322 Rice Road
Newberry, SC 29108

CERTIFICATE OF SERVICE

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

By Shawn Debruhl on October 11, 2016

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

SCWCC FILE NO. 1019167

Seeahray Brailsford, Employee,

Claimant/Appellant,

v.

Piggly Wiggly Carolina Company, Inc., Employer,

and

Constitution State Service Company
as TPA for Greenbax Enterprise Inc., Carrier

Defendants/Respondents.

Appellate Panel Review held in Columbia,
South Carolina on January 23, 2017 per
notices timely and properly served on all
parties of interest.

Appellate Panel Decision and Order filed
March 29, 2017

ARGUMENTS BRIEFED BY:

Seeahray Brailsford representing herself *pro se*
for Claimant/Appellant

Michael E. Chase, Esquire, of Columbia, South Carolina
for Defendants/Respondents

STATEMENT OF THE CASE

The parties were heard by Commissioner T. Scott Beck, Hearing Commissioner, in Columbia, South Carolina on August 1, 2016. On October 11, 2016, Commissioner Beck issued the following Findings of Fact, Conclusions of Law, and Order:

FINDINGS OF FACT

1. The Claimant sustained an accidental injury to her left shoulder only on November 23, 2010, which arose out of and in the course of employment with Piggly Wiggly. This finding is based upon the pleadings, the testimony rendered, and the medical evidence submitted.
2. The Claimant treated with Dr. Wendell Holmes, and he performed shoulder surgery on March 9, 2011 (Def. APA 56-57). The Claimant continued to have shoulder issues and received a second opinion, paid for by the Defendants, with Dr. David Lee, who performed a second shoulder surgery on February 15, 2012 (Def. APA 181-184). The Claimant continued to have ongoing shoulder issues and eventually had a reverse total shoulder arthroplasty (Def. APA 188-190). As a result of this last procedure, the Claimant has prosthetics in her shoulder. This finding is based upon the testimony rendered and the medical evidence submitted.
3. The Claimant did not sustain any other injuries by accident arising out of and in the course of employment on the date in question, including but not limited to, her left arm, left elbow, and depression. In addition, the Claimant failed to show a causal connection between her left shoulder injury and subsequent treatment for her liver issue and other claimed infections she contends that she suffered from while in the hospital. This finding is based upon the testimony rendered and the medical evidence submitted.
4. Per stipulations made by the parties, the Claimant earned an average weekly wage of \$537.18, and, therefore, the applicable compensation rate is \$358.14.

5. The Claimant reached maximum medical improvement for her single scheduled member shoulder injury on July 29, 2014 (DEF APA 229). She was assigned a converted impairment rating of 46.7% to the left shoulder (DEF APA 229). She did not receive any other impairment ratings as a result of this accident.
6. Defendants are entitled to stop payment of temporary total disability benefits and are entitled to a credit for temporary total disability benefits paid beyond July 25, 2016, the date which the Defendants filed their Form 21.
7. The Claimant is entitled to 70% permanent partial disability to the left shoulder, less credit for TTD overpayment, and subject to the maximum total benefits of 500 weeks compensation under the Act, which may limit her net recovery.
8. The Claimant is awarded future lifetime medical care limited to the repair, maintenance, or replacement of causally related medical hardware for the left shoulder only pursuant to S.C. Code Ann. Section 42-15-60.

CONCLUSIONS OF LAW

1. The Claimant suffered an admitted compensable injury to the left shoulder only on November 23, 2010. This conclusion is based upon findings of fact 1-5, and South Carolina Code Ann. Section 42-1-160.
2. The Claimant reached maximum medical improvement for the left shoulder on July 29, 2014. This conclusion is based upon findings of fact 1-5.
3. The Defendants are entitled to stop payment of temporary total disability benefits and are entitled to a credit for overpayment of temporary total disability benefits back to the date of filing the Form 21 on July 25, 2016 pursuant to South Carolina Code Ann. Section 42-9-10 and the regulations.

4. The Claimant is entitled to an award of 70% to the left shoulder. This conclusion is based upon finding of facts 1-7, and South Carolina Code Ann. Section 42-9-30 for a single scheduled member injury.

5. The award of 70% to the shoulder in this case for permanent partial disability is subject to, and may be limited by, the maximum period of compensation of 500 weeks allowable under the Act pursuant to section 42-9-10 and other sections of the Act. Therefore, claimant's net award may be less than 70% of the shoulder depending on the number of weeks of temporary total disability benefits paid.

6. The Claimant is entitled to lifetime causally related medical expenses limited to repair, maintenance or replacement of the hardware in the Claimant's left shoulder only. This conclusion is based upon South Carolina Code Ann. Section 42-15-60.

AWARD

IT IS HEREBY ORDERED AND ADJUDGED that the Claimant sustained a compensable injury to the left shoulder only on November 23, 2010 and reached maximum medical improvement on July 29, 2014;

IT IS FURTHER ORDERED AND ADJUDGED that Defendants are entitled to stop payment of temporary total disability benefits and that Defendants are entitled to a credit for temporary total disability benefits paid beyond July 25, 2016, the date of filing the Form 21.

IT IS FURTHER ORDERED AND ADJUDGED that the Claimant is awarded 70% permanent partial disability benefits to the left shoulder, less credit for overpayment of TTD, and subject to the 500 week limitation of maximum compensation benefits.

IT IS FURTHER ORDERED AND ADJUDGED that the Claimant is awarded future medical care limited to repair, maintenance, or replacement of causally related medical hardware in the left shoulder.

IT IS SO ORDERED.

Within the statutory period, the Claimant filed an Application for Review in this case, setting forth the reasons for an appeal. A copy of this Application was furnished to all interested parties prior to Appellate Review.

All proper testimony has been taken. Together with all documentary evidence and a transcript of the hearing, appellate briefs were delivered to the individual members of the South Carolina Workers' Compensation Appellate Panel. Oral Argument has been provided to the individual members of the Full Commission and the case has since been under study and consideration.

By appeal, Claimant/Appellant submits the following:

1. The Single Commissioner erred as a matter of fact and law in finding that the claim was limited to a single schedule member injury.
2. The Single Commissioner erred as a matter of fact and law in determining that the Claimant did not suffer from depression resulting from this claim.
3. The Single Commissioner erred as a matter of fact and law in determining that the Claimant did not suffer from a compensable liver disease.

On the other hand, Defendants/Respondents contend that the Appellant only sustained a left shoulder injury on the date in question. Respondents deny that the Appellant sustained compensable injuries to her liver or psyche. Respondents relied on the medical evidence which released the Appellant with a converted 46.7 percent impairment rating to the left shoulder on

July 29, 2014 by Dr. Lee. (Hearing Tr. p. 15). Respondents further contended that the Appellant was sent to two additional doctors for additional opinions. (Hearing Tr. p. 16).

In addition, Respondents contended that the depression claim was not raised and that the Appellant specifically denied claiming depression as part of her claim to the Single Commissioner. (Hearing Tr. p. 16). Lastly, Respondents contended that the Appellant did not produce any evidence regarding her liver to the Single Commissioner. (Hearing Tr. p. 17). Therefore, the Respondents requested that the Full Commission affirm the decision below and find that there has been no error of law and that the findings of fact were supported by the preponderance of the evidence.

Based upon a review of the Record and Briefs, the Panel, by a **UNANIMOUS** vote, **AFFIRMS** the Decision and Order of the Hearing Commissioner dated October 11, 2016. Accordingly, the Findings of Fact and Conclusions of Law set forth below shall become and hereby are the law of the case:

FINDINGS OF FACT

1. The Claimant sustained an accidental injury to her left shoulder only on November 23, 2010, which arose out of and in the course of employment with Piggly Wiggly. This finding is based upon the pleadings, the testimony rendered, and the medical evidence submitted.
2. The Claimant treated with Dr. Wendell Holmes, and he performed shoulder surgery on March 9, 2011 (Def. APA 56-57). The Claimant continued to have shoulder issues and received a second opinion, paid for by the Defendants, with Dr. David Lee, who performed a second shoulder surgery on February 15, 2012 (Def. APA 181-184). The Claimant continued to have ongoing shoulder issues and eventually had a reverse total shoulder arthroplasty (Def. APA 188-

190). As a result of this last procedure, the Claimant has prosthetics in her shoulder. This finding is based upon the testimony rendered and the medical evidence submitted.

3. The Claimant did not sustain any other injuries by accident arising out of and in the course of employment on the date in question, including but not limited to, her left arm, left elbow, and depression. In addition, the Claimant failed to show a causal connection between her left shoulder injury and subsequent treatment for her liver issue and other claimed infections she contends that she suffered from while in the hospital. This finding is based upon the testimony rendered and the medical evidence submitted.

4. Per stipulations made by the parties, the Claimant earned an average weekly wage of \$537.18, and, therefore, the applicable compensation rate is \$358.14.

5. The Claimant reached maximum medical improvement for her single scheduled member shoulder injury on July 29, 2014 (DEF APA 229). She was assigned a converted impairment rating of 46.7% to the left shoulder (DEF APA 229). She did not receive any other impairment ratings as a result of this accident.

6. Defendants are entitled to stop payment of temporary total disability benefits and are entitled to a credit for temporary total disability benefits paid beyond July 25, 2016, the date which the Defendants filed their Form 21.

7. The Claimant is entitled to 70% permanent partial disability to the left shoulder, less credit for TTD overpayment, and subject to the maximum total benefits of 500 weeks compensation under the Act, which may limit her net recovery.

8. The Claimant is awarded future lifetime medical care limited to the repair, maintenance, or replacement of causally related medical hardware for the left shoulder only pursuant to S.C. Code Ann. Section 42-15-60.

CONCLUSIONS OF LAW

1. The Claimant suffered an admitted compensable injury to the left shoulder only on November 23, 2010. This conclusion is based upon findings of fact 1-5, and South Carolina Code Ann. Section 42-1-160.
2. The Claimant reached maximum medical improvement for the left shoulder on July 29, 2014. This conclusion is based upon findings of fact 1-5.
3. The Defendants are entitled to stop payment of temporary total disability benefits and are entitled to a credit for overpayment of temporary total disability benefits back to the date of filing the Form 21 on July 25, 2016 pursuant to South Carolina Code Ann. Section 42-9-10 and the regulations.
4. The Claimant is entitled to an award of 70% to the left shoulder. This conclusion is based upon finding of facts 1-7, and South Carolina Code Ann. Section 42-9-30 for a single scheduled member injury.
5. The award of 70% to the shoulder in this case for permanent partial disability is subject to, and may be limited by, the maximum period of compensation of 500 weeks allowable under the Act pursuant to section 42-9-10 and other sections of the Act. Therefore, claimant's net award may be less than 70% of the shoulder depending on the number of weeks of temporary total disability benefits paid.
6. The Claimant is entitled to lifetime causally related medical expenses limited to repair, maintenance or replacement of the hardware in the Claimant's left shoulder only. This conclusion is based upon South Carolina Code Ann. Section 42-15-60.

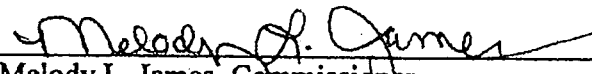
ORDER

Based on the foregoing Findings of Fact and Conclusions of Law:

IT IS HEREBY ORDERED that the Order of the Hearing Commissioner filed in the above-captioned matter on October 11, 2016, is hereby affirmed by the Full Commission Appellate Panel. The claim for a compensable psychological issue and liver disease is denied in its entirety.

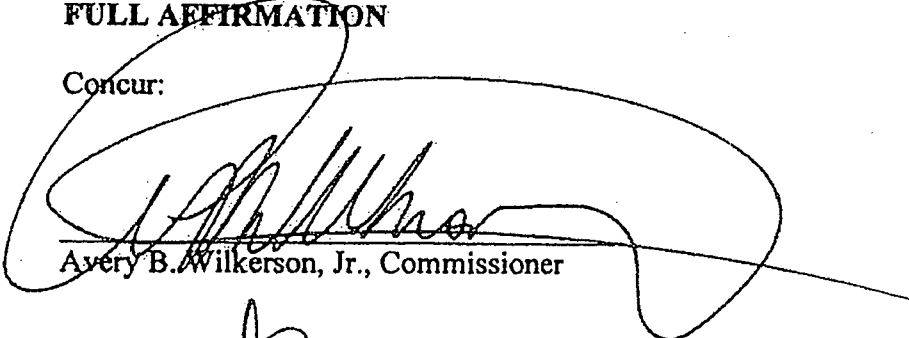
AND IT IS SO ORDERED.

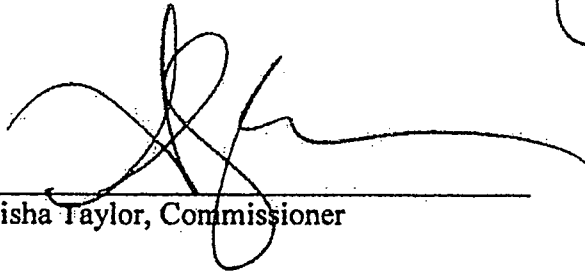
**SOUTH CAROLINA WORKERS'
COMPENSATION COMMISSION**


Melody L. James, Commissioner
On Behalf of the Appellate Panel

FULL AFFIRMATION

Concur:


Avery B. Wilkerson, Jr., Commissioner


Aisha Taylor, Commissioner

CERTIFICATE OF SERVICE

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

By Eugenia Hollmon on March 29, 2017

South Carolina Workers' Compensation Commission
3 Main Street, Suite 500 • Post Office Box 1715
Columbia, South Carolina 29202-1715
(803) 737-5723
www.wcc.sc.gov



WCC File #: 1019107
Carrier File #:
Carrier Code #:
Employer FEIN #:

Claimant's Name: Seeahray Brailsford SSN: Employer's Name: Piggly Wiggly
Address: 322 Rice Road Address: 518 N. Wheeler Avenue
City: Newberry State: SC Zip: 29108 City: Prosperity State: SC Zip: 29127
Home Phone: (803) 276 - 8523 Work Phone: () Insurance Carrier: Constitution State Service Co as TPA for Greenbax Enterprise Inc
Preparer's Name: Thomas H. Pope III Law Firm: Pope & Hudgens, PA Preparer's Phone #: (803) 276 - 2532

Complete each information blank. To request a hearing, check Box 13b, indicate the kinds of benefits claimed by checking the box(es) at Lines 6, 7, 8 and 9, file this form in duplicate.

Claim for workers' compensation benefits is made based on the following grounds:

Date of Injury or Illness: 11/23/2010

Injury ☐ Illness ☐ Repetitive Trauma

- 1a. The claimant sustained an injury to left arm, left shoulder, clavicle (Part(s) of Body Injured) on 11/23/2010 (Month/Day/Year) in Newberry county, state of S.C.. Clavicle; left arm and left hand; left shoulder; with psychological overlay (depression and anxiety). Carrier waited four months before approving her to go to doctor.
- 1b. Body part(s) affected are: anxiety. Briefly describe how the accident occurred. As claimant was retrieving frozen bakery goods from the freezer, she felt a "pop" in her left arm
2. Both the claimant and the employer were subject to the South Carolina Workers' Compensation Act at the time of injury.
3. The relationship of employer and employee existed at the time of injury.
4. At the time of the injury the claimant was performing services arising out of and in the course of employment.
5. Notice of the accidental injury was given to the Employer on 11/23/2010 (Month/Day/Year) in the following manner: Claimant immediately reported this injury to the co-manager of the Piggly Wiggly store in Prosperity, SC where she was working.
6. Due to injury, the claimant is in need of (check one):
☒ (a) medical examination and treatment for: surgery for reverse total left shoulder arthroplasty and follow up
☐ (b) additional medical examination and treatment for: N/A
7. Due to injury, the claimant requests temporary total disability benefits because of lost compensable time from work and wages for the period of: (already receiving)
8. Due to the injury, the Claimant has permanent disability of the following nature and extent (check one):
☒ (1) General Disability: ☒ Total ☐ Partial ☒ (2) Specific Disability: ☐ Total ☒ Partial
☐ (3) Wage Loss ☐ Partial
9. Due to the injury, the Claimant has a serious bodily disfigurement consisting of: Not Applicable
- 10a. At the time of the injury, the Claimant was paid weekly wages of \$ 544.37, and demands accounting of days worked and wages earned as provided by law.
- 10b. Give names and addresses of all employers for whom the Claimant has worked since the date of the accident: None.
- 11a. Further grounds or unusual aspects of claim:
- 11b. List names and addresses of all physicians or other medical specialists who have seen or treated the Claimant as a result of the accident: SEE ATTACHMENT HERETO.
- 11c. To the best of your knowledge, did you have any prior permanent disability? No
If yes, describe:
12. Appropriate benefits as provided in the Act for the above grounds and other relief as the Workers' Compensation Commission may direct as just and proper.
- 13a. I am filing a claim. I am not requesting a hearing at this time.
- 13b. I am requesting a hearing. A \$25 fee is required.
14. Estimated time needed for hearing: 45 minutes

I certify the contents of this form are accurate and true to the best of my knowledge.

Preparer's Signature: Thomas H. Pope III Attorney for Claimant: thpope@popeandhudgens.com Date: October 22, 2014
Title: Email: Date:

File to R.67-204 through R.67-210 and R.67-601 through R.67-615. Questions about the use of this form may be directed to the Commission's Claims Department.

WCC Form # 50

Revised 9/07

50

Employee's Notice of Claim and/or
Request for Hearing

ATTACHMENT TO WCC FORM 50

Seeahray Brailsford v. Piggly Wiggly, et al.

WCC File No. 1019167

ITEM 116. List names and addresses of all physicians or other medical specialists who have seen or treated the Claimant as a result of the accident:

1. Dr. David K. Lee
Southeastern Orthopedics
110 East Medical Lane
Suite 140
Columbia, SC 29169
2. Dr. S. Wendell Holmes
Moore Orthopedics
104 Saluda Point Drive
Lexington, SC 29072
3. Newberry Physical Therapy & Sports Medicine
2515 Evans Street
Newberry, SC 29108
4. Dr. Coleman Fowble (second opinion)
Midlands Orthopaedics
1910 Blanding Street
Columbia, SC 29201
5. Dr. Oscar Lovelace
Lovelace Family Medicine
PO Box 630
Prosperity, SC 29127
6. Dr. Ryan Hess (required 2nd opinion)
USC Orthopedics
Columbia, SC
7. Lexington Medical Center
Lexington, SC
8. Carolina Orthopaedics & Sports Medicine
3221 Sunset Boulevard
West Columbia, SC 29169



WCC File #: 1019167
Carrier File #: 026-CB-ENH0532M
Carrier Code #: 1019167
Employer FEIN #: _____

Claimant's Name: Seeahray Brailsford SSN: _____ Employer's Name: Greenbax Enterprises, Inc.
Address: 322 Rice Road Address: PO Box 118047
City: Newberry State: SC Zip: 29108 City: Charleston State: SC Zip: 29423
Home Phone: (803) 276-8523 Work Phone: () - Insurance Carrier: Constitution State Service Company as TPA for Greenbax Enterprise Inc
Date of Injury: 11/23/2010 Preparer's Name: Michael E. Chase, Esq. Law Firm: Turner Padgett Graham & Laney P.A. Preparer's Phone #: (803) 227-4241

Date of Injury or Illness: 11/23/2010 Estimated time for hearing: 1 hour

Complete each information blank. Clearly specify when contentions are admitted in part and denied in part. The Employer/Carrier in answer to the claim, respectfully shows:

1. It is ☒ Admitted ☐ Denied the employee sustained an injury or illness on or about the date set forth in the Form 50. The reasons for denial are: However, it is only admitted Claimant sustained compensable left shoulder injury on date in question; any and all other claimed injuries are denied on the basis that they did not arise out of and in the course of employment on the date in question.
2. It is ☒ Admitted ☐ Denied both the employer and employee were subject to the Workers' Compensation Act at the time in question. The reasons for denial are: However, see number 1.
3. It is ☒ Admitted ☐ Denied the relationship of employer and employee existed at the time in question. The reasons for denial are: However, see number 1.
4. It is ☒ Admitted ☐ Denied at the time in question the employee was performing services arising out of and in the course of employment. The reasons for denial are: However, see number 1.
5. It is ☒ Admitted ☐ Denied notice of injury was given the employer. The reasons for denial are: However, see number 1.
6. It is ☐ Admitted ☒ Denied the employee ☐ Needs ☐ Is Entitled to Additional medical care as a result of injury or illness. The reasons for denial are: Claimant is under authorized medical treatment; determination of whether Claimant is entitled to any additional medical she has requested to be determined pursuant to Section 42-15-60.
7. It is ☐ Admitted ☒ Denied the employee is entitled to temporary total disability for the period(s) of : Claimant not entitled to any additional TTD other than what has been, or is currently being paid.
8. It is ☐ Admitted ☒ Denied the employee is permanently disabled. The reasons for denial are: No competent evidence of any permanent impairment or disability (this issue is premature).
9. It is ☐ Admitted ☒ Denied the employee has serious disfigurement.
10. It is contended that an average weekly wage of \$537.18 applies, according to attached Form 20 as provided by law.
11. Further contentions, grounds of defense, or unusual aspects are:

☐ Mediation

- ☐ a. Mediation is requested to be ordered pursuant to Reg. 67-1801 B.
☐ b. Mediation is required pursuant to Reg. 67-1802.
☐ c. Mediation is requested by consent of the Parties pursuant to Reg. 67-1803.
☐ d. Mediation has been conducted by a duly qualified mediator and resulted in an impasse.

Questions regarding mediation may be submitted to mediation@wcc.sc.gov.

I verify the contents of this form are accurate and true to the best of my knowledge.


Preparer's Signature Esq. Title

MChase@TurnerPadgett.com
Email

November 21, 2014
Date

SCWCC
NOV 24 2014
JUDICIAL

Refer to R.67-204 through R.67-210 and R.67-601 through R.67-615. Refer to R. 67-1801 for mediation. Questions about the use of this form may be directed to the Commission's Judicial Department at 803-737-5675 or jud@wcc.sc.gov or mediation@wcc.sc.gov. Pursuant to R.67-606, a Form 20 must be filed with the Claims Department at least 30 days from the date of filing this form.

South Carolina Workers' Compensation Commission
P.O. Box 1715 • 1612 Marion Street
Columbia, South Carolina 29202-1715
(803) 737-5700

WCC File # _____
Carrier File # _____
Carrier Code # _____
Employer FEIN _____

Seeshray Brallsford		Piggly Wiggly # 89	
Claimant's Name	SSN	Employer's Name	
322 rice Rd Newberry	SC 29108	P.O. Box 118047	Charleston SC 29423
Address	City State Zip	Address	City State Zip
(803)276-8523		Greenbax Enterprise Inc	
Home Phone #	Work Phone #	Insurance Carrier	
	Sarah Brown	(849)554-9880 x3420	
Preparer's Name	Phone #		

A. Total Wages Paid

1. Check Applicable Method: Date of Injury: 11/23/2010
☒ Report of earnings of injured employee based on four completed quarters.
☐ Report of earnings of injured employee who did not complete four quarters based on actual time worked.
☐ Report of earnings of similar employee. Injured employee did not work sufficient time before alleged injury. Hire Date: 06/09/2006
☐ Report of earnings of injured employee based on alternative method because Form 20 results in a compensation rate that is not fair and just. (Attach documentation to show how average weekly wage and compensation rate were calculated.)

2. List total wages paid as reported to Employment Security Commission on the Employer Quarterly Contribution and Wage Reports during the four quarters immediately preceding the quarter in which the injury occurred. Do not include the quarter during which the injury occurred.

Quarter	Ending Date	Total Wages Paid
1st	12/27/09	7567.95
2nd	03/28/10	6544.03
3rd	06/27/10	6890.38
4th	09/26/10	7468.42
Total Paid		28470.78

3. List total value of other allowances of any character made in lieu of wages during four quarters above. TOTAL WAGES PAID: 28470.78
4. Add lines 2 and 3. 5. 53.00
5. List total number of weeks paid to employee during the four quarters immediately preceding the quarter in which the injury occurred.

B. Average Weekly Wage

6. To calculate average weekly wage, divide total wages (line 4) by total weeks paid (line 5). AVERAGE WEEKLY WAGE: 6. 537.18452830188

C. Compensation Rate

7. The general rule for calculating the compensation rate is to multiply average weekly wage (line 6) by .8667. Estimate compensation rate by multiplying average weekly wage (line 6) by .6667. See part 8 below to determine the actual compensation rate. 7. 358.14092501886

8. The compensation rate is as follows (choose one):

- ☐ When average weekly wage (line 6) is less than \$75.00, the compensation rate is the average weekly wage. Enter average weekly wage on line 8.
☐ When the estimated compensation rate (line 7) is less than \$75.00 and average weekly wage (line 6) is more than \$75.00, the compensation rate is \$75.00. Enter \$75.00 on line 8.
☐ When the estimated compensation rate (line 7) is more than the maximum compensation rate for the year in which the injury occurred, enter the maximum compensation rate for the year in which the injury occurred on line 8.
☐ Employee is within the exceptions listed in S.C. Code Ann. Section 42-7-65. List applicable exception here and enter appropriate compensation rate on line 8: _____
☒ The calculated compensation rate (line 7) applies. Enter amount from line 7 on line 8.

WEEKLY COMPENSATION RATE: 8. 358.14092501886

Employer's representative shall prepare a Form 20 and serve per R.67-211 a copy on the claimant within thirty days of beginning temporary compensation. See R.87-1603 when no temporary compensation is paid. NOTE: Average weekly wage represents average gross pay before taxes and other deductions. WHEN THE CLAIMANT DOES NOT AGREE WITH THE COMPENSATION RATE ON LINE 8, HE OR SHE SHOULD CONTACT THE EMPLOYER'S REPRESENTATIVE TO TRY TO REACH AN AGREEMENT AS TO THE COMPENSATION RATE. IF NO AGREEMENT CAN BE REACHED THE CLAIMANT SHOULD CONTACT THE CLAIMS DEPARTMENT AT (803)737-5723.

WCC FORM # 20 REV. DATE 3/97

2.0

STATEMENT OF EARNINGS



WCC File #: 1019167
or File #: 026-CB-ENH0532M
Carrier Code #: _____
Employer FEIN #: _____

Claimant's Name: Seehray Brailsford SSN: _____ Employer's Name: Greenbax Enterprises, Inc.
Address: 322 Rice Road Address: PO Box 118047
City: Newberry State: SC Zip: 29108 City: Charleston State: SC Zip: 29108
Home Phone: (803) 276-8523 Work Phone: () - Insurance Carrier: Constitution State Service Company as TPA for Greenbax Enterprise Inc
Preparer's Name: Michael E. Chase, Esq. Law Firm: Turner, Padgett, Graham & Laney, P.A. Preparer's Phone #: (803) 227-4241

The date of injury reported on Form 12A is: 11/23/2010 (m/d/yyyy)

Check appropriate section(s). The Employer's Representative requests a hearing to:

☒ **Stop payment of compensation.** Claimant has reached maximum medical improvement and Claimant continues to receive temporary compensation payments. The employer's representative requests a hearing pursuant to § 42-9-260(D) to stop payment of temporary compensation. A hearing requested pursuant to this section must be held within sixty days of the date of the request.

Claimant reached maximum medical improvement on 7/29/2014 (m/d/yyyy) (copy of medical report must be attached).

Compensation payments are current as of 1/26/2015 (m/d/yyyy) and shall continue until otherwise ordered or until Form 17 is signed by the claimant. A Form 17 was offered and refused on 1/26/2015 (m/d/yyyy).

☐ **Address suspension, termination, or reduction of temporary disability payments for any cause.**

☐ a. At any time pursuant to § 42-9-260(E).

☐ b. After the one-hundred-fifty day period has expired pursuant to § 42-9-260(F), R.67-505 and R.67-506.

The basis for the termination/ suspension is _____

☒ **Determine if compensation is due** pursuant to § 42-9-10, § 42-9-20 or § 42-9-30 and, if so, in what amount, based on the following grounds:

Based on authorized treating physician's rating.

Claimant reached maximum medical improvement on 7/29/2014 (m/d/yyyy) (copy of medical report must be attached).

☒ **Request Credit for Overpayment of temporary compensation pursuant to § 42-9-210.**

☐ **Determine amount of compensation for claims involving a fatality.**

☐ a. Payment of unpaid balance of compensation when employee dies pursuant to § 42-9-280.

☐ b. Amount of compensation for death of employee due to accident pursuant to § 42-9-290.

☐ **Mediation**

☐ a. Mediation is requested to be ordered pursuant to Reg. 67-1801 B.

☐ b. Mediation is required pursuant to Reg. 67-1802.

☐ c. Mediation is requested by consent of the Parties pursuant to Reg. 67-1803.

☐ d. Mediation has been conducted by a duly qualified mediator and resulted in an impasse.

Failure to respond pursuant to Reg. 67-208 B in writing or by submission of a Form 22 may result in ordered mediation pursuant to Reg. 67-1801 B.

Questions regarding mediation may be submitted to mediation@wcc.sc.gov.

I certify I have served this document pursuant to Reg. 67-211 by delivering a copy to Claimant's attorney, Thomas H. Pope, Esquire, in the ____ day of January, 2015, by ☒ first class postage ☐ certified mail ☐ personal service.

A \$25.00 filing fee and updated Form 18 is required.


Preparer's Signature Esq.
Title

MChase@TurnerPadgett.com
Email

January 26, 2015
Date

SCWCC
JAN 30 2015
JUDICIAL

Questions about the use of this form should be directed to the Judicial Department at 803-737-5675, or jud@wcc.sc.gov or mediation@wcc.sc.gov refer to Regulations 67-211, 67-504, 67-505, 67-506; and 67-510.

South Carolina Workers' Compensation Commission
1333 Main Street, Suite 500 • Post Office Box 1715
Columbia, South Carolina 29202-1715
(803) 737-5675 www.wcc.sc.gov



WCC File #: 1019167
Carrier File #: _____
Carrier Code #: _____
Employer FEIN #: _____

Claimant's Name: SEAKRAY BRILSFORD SSN: _____ Employer's Name: P. G. G. Wiggly
Address: 322 Rice Road Address: _____
City: Newberry State: SC Zip: 29108 City: _____ State: _____ Zip: _____
Home Phone: 803-276-0001 Work Phone: _____ Insurance Carrier: TRAWLERS INSURANCE
Preparer's Name: _____ Law Firm: _____ Preparer's Phone #: _____

A claim for workers' compensation benefits is made based on the following grounds: Date of Injury or Illness: Nov. 2010 ²³
☒ Injury ☐ Illness ☐ Repetitive Trauma ☐ Occupational Disease ☐ Physical Brain Injury ☐ Concurrent Jurisdiction

1. The claimant sustained an injury to (L) Shoulder + ARM (Part(s) of Body Injured) on Nov. 2010-23 rd (Month/Day/Year) in Newberry county, state of SC. Body part(s) affected are: (L) ROTOR CUFF AND (L) ARM + HAND
2. Briefly describe how the accident occurred. PULLING FROZEN PIE CASE FROM FREEZER
3. Both the claimant and the employer were subject to the South Carolina Workers' Compensation Act at the time of injury.
4. The relationship of employer and employee existed at the time of injury.
5. At the time of the injury the claimant was performing services arising out of and in the course of employment.
6. Notice of the accidental injury was given to the Employer on Nov 2010 (Month/Day/Year) in the following manner: Report to MANAGER THEN WENT TO WORKERS COMPENSATION DOCTOR
- ☐ 7. Due to injury, the claimant is in need of (check one):
☐ (a) medical examination and treatment for: _____
☐ (b) additional medical examination and treatment for: _____
- ☐ 8. Due to injury, the claimant requests temporary total disability benefits because of lost compensable time from work and wages for the period of: _____
- ☒ 9. Due to the injury, the claimant has permanent disability of the following nature and extent (check one):
☒ (1) General Disability: ☒ Total ☐ Partial ☐ (2) Specific Disability: ☐ Total ☐ Partial ☐ (3) Wage Loss
- ☐ 9a. A determination of permanent disability is premature at this time.
- ☐ 10. Due to the injury, the claimant has a serious bodily disfigurement consisting of: _____

10a. At the time of the injury, the claimant was paid weekly wages of \$_____, and demands accounting of days worked and wages earned as provided by law.

10b. Give names and addresses of all employers for whom the claimant has worked since the date of the accident: NONE

11. Further grounds or unusual aspects of claim:

11a. List names and addresses of all physicians or other medical specialists who have seen or treated the claimant as a result of the accident:

11b. To the best of your knowledge, did you have any prior permanent disability? NONE
If yes, describe:

12. Appropriate benefits as provided in the Act for the above grounds and other relief as the Workers' Compensation Commission may direct as just and proper.

☐ 13a. I am filing a claim, I am not requesting a hearing at this time.

14. Estimated time needed for hearing: _____

☒ 13b. I am requesting a hearing. A \$25 fee is required.

☐ Mediation

- ☐ a. Mediation is requested to be ordered pursuant to Reg. 67-1801 B.
☐ b. Mediation is required pursuant to Reg. 67-1802.
☐ c. Mediation is requested by consent of the Parties pursuant to Reg. 67-1803.
☐ d. Mediation has been conducted by a duly qualified mediator and resulted in an impasse.

Questions regarding mediation may be submitted to mediation@wcc.sc.gov.

I certify I have served this document pursuant to Reg. 67-211 by delivering a copy to _____
address _____ on the _____ day of _____ 20____, by ☐ first class postage ☐ certified mail ☐ personal service.

I verify the contents of this form are accurate and true to the best of my knowledge.

Seakray Brilsford Title _____ Email _____ Date April 5th 2016
Preparer's Signature _____

Questions about the use of this form should be directed to the Claims Department at 803.737.5723. Refer to Regulations 67-204 through 67-211 and Regulations 67-601 through 67-615 as well as Reg. 67-1801.

WCC Form # 50
Revised 7/13

31222

50

Employee's Notice of Claim and/or
Request for Hearing



WCC File #: 1019167
Carrier #: 026-CB-ENH0532M
Carrier Code #: 1019167
Employer FEIN #: _____

Claimant's Name: Seahray Brailsford SSN: _____ Employer's Name: Greenbax Enterprises, Inc.
Address: 322 Rice Road Address: PO Box 118047
City: Newberry State: SC Zip: 29108 City: Charleston State: SC Zip: 29423
Home Phone: (803) 276-8523 Work Phone: () - Insurance Carrier: Constitution State Service Company as TPA for Greenbax Enterprise Inc
Date of Injury: 11/23/2010
Preparer's Name: Michael E. Chase, Esq. Law Firm: Turner Padgett Graham & Laney P.A. Preparer's Phone #: (803) 227-4241

Date of Injury or Illness: 11/23/2010

Estimated time for hearings: 1 hour

Complete each information blank. Clearly specify when contentions are admitted in part and denied in part. The Employer/Carrier in answer to the claim, respectfully shows:

1. It is ☒ Admitted ☐ Denied the employee sustained an injury or illness on or about the date set forth in the Form 50. The reasons for denial are: However, it is only admitted Claimant sustained compensable left shoulder injury on date in question; any and all other claimed injuries are denied on the basis that they did not arise out of and in the course of employment on the date in question.
2. It is ☒ Admitted ☐ Denied both the employer and employee were subject to the Workers' Compensation Act at the time in question. The reasons for denial are: However, see number 1.
3. It is ☒ Admitted ☐ Denied the relationship of employer and employee existed at the time in question. The reasons for denial are: However, see number 1.
4. It is ☒ Admitted ☐ Denied at the time in question the employee was performing services arising out of and in the course of employment. The reasons for denial are: However, see number 1.
5. It is ☒ Admitted ☐ Denied notice of injury was given the employer. The reasons for denial are: However, see number 1.
6. It is ☐ Admitted ☒ Denied the employee ☐ Needs ☐ Is Entitled to Additional medical care as a result of injury or illness. The reasons for denial are: Claimant has achieved maximum medical improvement.
7. It is ☐ Admitted ☒ Denied the employee is entitled to temporary total disability for the period(s) of: Claimant not entitled to any additional TTD other than what has been, or is currently being paid.
8. It is ☐ Admitted ☒ Denied the employee is permanently disabled. The reasons for denial are: Permanent partial disability to be determined.
9. It is ☐ Admitted ☒ Denied the employee has serious disfigurement.
10. It is contended that an average weekly wage of \$537.18 applies, according to attached Form 20 as provided by law.
11. Further contentions, grounds of defense, or unusual aspects are:

☒ Mediation

- ☐ a. Mediation is requested to be ordered pursuant to Reg. 67-1801 B.
☒ b. Mediation is required pursuant to Reg. 67-1802.
☐ c. Mediation is requested by consent of the Parties pursuant to Reg. 67-1803.
☐ d. Mediation has been conducted by a duly qualified mediator and resulted in an impasse.

Questions regarding mediation may be submitted to mediation@wcc.sc.gov.

SCWCC

APR 21 2016

JUDICIAL

verify the contents of this form are accurate and true to the best of my knowledge.


Preparer's Signature

Esq.
Title

MChase@TurnerPadgett.com
Email

April 20, 2016
Date

Refer to R.67-204 through R.67-210 and R.67-601 through R.67-615. Refer to R. 67-1801 for mediation. Questions about the use of this form may be directed to the Commission's Judicial Department at 803-737-5675 or jud@wcc.sc.gov or mediation@wcc.sc.gov. Pursuant to R.67-606, a Form 20 must be filed with the Claims Department at least 30 days from the date of filing this form.



WCC File #: 1019167
Carrier File #: _____
Carrier Code #: _____
Employer FEIN #: _____

Claimant's Name: Seanhay Brailsford SSN: _____

Address: 322 Rice Road

City: Newberry State: SC Zip: 29108

Home Phone: (803) 276-0001

Work Phone: ()

Preparer's Name: _____

Law Firm: _____

Employer's Name: Piggly Wiggly

Address: _____

City: _____ State: _____ Zip: _____

Insurance Carrier: TRAVELERS INSURANCE

Preparer's Phone #: ()

REQUEST FOR COMMISSION REVIEW

Request for Commission Review by

☒ Claimant

☐ Employer (check one)

Date of Injury or Illness: _____

(m/d/yyyy) 11/10

The undersigned makes application for review of the findings of the Commissioner in the above-captioned case. The request for review is based on the following grounds: (State the grounds of your appeal in the form of questions presented. Each question presented must contain a concise statement of one proposition of law or fact. Refer to evidence by title and exhibit number. Use additional pages if necessary).

① Why did it take 33 days to get MRI when Doctor Lovelace ordered it the 2nd day?

② Why did it take 25 days to send in the Accident Report?

③ Why did Doctor Holmes have to do the surgery when doctor Holmes stated it had been too long for surgery?

④ Why when I asked Doctor Lovelace on 10/10/16 if worker's comp. had OK'd the MRI, then surgery in 7-10 days as per all the

(Check one) Oral argument ☒ Is ☐ Is not requested. Appellant's request for oral argument is waived if not indicated on this form.

☐ Mediation

☐ Mediation is requested by consent of the Parties pursuant to Reg. 67-1803.

SCWCC

OCT 10 2016

JUDICIAL

Questions regarding mediation may be submitted to mediation@wcc.sc.gov.

I certify I have served this document pursuant to Reg. 67-211 by delivering a copy to _____ address _____ on the _____ day of _____ 20____ by _____ first class postage _____ certified mail _____ personal service.

Seanhay Brailsford
Preparer's Signature

Title

Email

Date

10/14/16

Check this box if you are not represented by an attorney ☒

Questions about the use of this form should be directed to the Judicial Department at 803.737.5675 or appeals@wcc.sc.gov.

If the claimant appeals and is not represented by counsel, the Judicial Department will properly serve this form pursuant to Reg. 67-607 C. Pursuant to Reg. 67-205 and Reg. 701, the appeal must be postmarked no later than 14 days from the date of service of the Decision and Order of the Hearing Commissioner along with the filing fee. Attach a Form 32, if you are unable to pay the filing fee. Refer to Reg. 67-211 and Reg. 67-701 through 711.

10/25 Beck

(2)

All the Doctors we spoke to AND the Mayo Clinic would I have gotten the Liver disease. Because of a Low Immune System, the 3 surgeries in a row, fighting the pain and agony. I was going thru. Doctor Love Lake stated Absolutely Not in his opinion.

- (5) Why would you state that I was depressed before the accident. I got depressed AFTER all the surgery, physical therapy and pain. Always having to wait for the OK'd from Worker's Comp. which took a long time and lost of position and job.
- (6) Why would you say I have a dog lease in left hand when even in the still picture you can see a sling on my left arm?
- (7) Why did it take 7 months for a bone stimulator?
- (8) Why did you need a police office in the room to keep us quiet?
- (9) Why didn't Worker's Comp. call Doctor Love Lake who was their Worker's Comp. doctor and ask how serious it was. Instead of just saying NO. on MRI on 2nd day?
- (10) Why did Worker's Comp., Travelers Insurance, and Greenbax Industries have to ruin my life?
- (11) Why is it that I can't change the time or day when it comes to a meeting? I was so sick at the last one and could not think straight.

Why?

My name is Seeahray Brailsford. I was the deli/bakery manager for the Piggly Wiggly store in Prosperity SC for 7 years and in November of 2010, while at work, I injured my left shoulder by tearing the rotator cuff. I reported the injury and was sent to Dr. Oscar Lovelace who was the workers compensation doctor for Piggly Wiggly at the time. Dr. Lovelace noted my shoulder had a rotator cuff tear but he did not know how extensive the tear was. He also ordered an MRI because my arm was swollen, I was bruised from the shoulder to past my elbow, and my fingers were cold and blue. He scheduled the MRI for the next day.

The next day Dr. Lovelace's office called and told me that Travelers Insurance (workers comp) had said no to the MRI. I went back to see Dr. Lovelace and he wanted me to start physical therapy so the arm would not get stiff, but once again Travelers Insurance said no to the physical therapy. I went back to Dr. Lovelace a week later and he then told me he wanted me to see an orthopedic surgeon in Newberry, he reordered the MRI, and physical therapy. Travelers Insurance said no again. Why?

On one visit to Dr. Lovelace's office a nurse with Travelers Insurance came in with me to the office. Dr. Lovelace let the nurse know that he was not happy with Travelers Insurance, he did not understand why every time he requested an order Travelers Insurance would refuse the request. He was so upset that he told the nurse that the proper procedure was xrays or other tests, physical therapy and then orthopedic surgery. He told her that Travelers Insurance did not follow protocol and asked her to leave.

Finally late in December of 2010 about 40 days after the accident Dr. Lovelace's office called me to set up an appointment for an MRI. I was working with such arm pain that I could not lift anything and my fingers were still swollen and blue. I continued to work because I did not want to lose my job. After a couple of weeks I went back to get the results of the MRI. Dr. Lovelace told me at that time that my rotator cuff was torn very badly in the left shoulder. He then reordered me to see an orthopedic surgeon. Travelers Insurance said no again. And the entire time I was working and trying to save my job. Why?

In January 2011 I finally was able to see the orthopedic surgeon. Travelers Insurance sent me to see a Dr. Holmes. Dr. Holmes read the MRI and also said the rotator cuff was torn

2

very badly. At first he did not want to do the surgery because too much time had passed since my accident.

I did not get a surgery date until February 2011. Dr. Holmes office called and stated that the earliest date was in March 2011. I asked why so long and that I was hurting very badly. Dr. Holmes nurse asked me when the accident occurred and when I told them they agreed it had been a long time and that if they had a cancelation that they would get me in earlier. I called the Mayo clinic and was informed that someone my age, 63, that the repair should be done within 7 to 10 days. But I am still working in terrible pain, swollen and blue fingers. I did not want to lose my job or position.

I finally got a surgery date in March 2011. It is 107 days after my accident. I started physical therapy the next day after surgery. I kept my appointments through all the pain, I could not lift my arm, it was still very swollen and my fingers were still blue. Every time I went back to see Dr. Holmes I told him about my concerns with blue fingers, numbness and my arm still being swollen. On the last visit with Dr. Holmes told me to stop worrying about the arm and that he didn't know what else to do with me.

I decided to get a second opinion. I went to see Dr. David Lee in January 2012. He asked for post op xrays but none were taken. Dr. Lee took them in his office. He told me the results were not good. He would need to redo the surgery but we needed to wait for approval from Travelers Insurance. I finally got the ok in February 2012 for surgery. Meanwhile I was sent for another MRI with dye. As I was lying on the table I heard the doctor and the nurse talking and heard him say that he could not see where anything had been done at all or it had completely come undone.

I was in the OR when the doctor informed my husband that he could not do the micro surgery, that it would take major surgery because there was so much scare tissue and damage that he would have to clean up first and that he could not guarantee that the surgery would hold because too much time and damage had passed. After 4 weeks I started physical therapy. I was still having a very hard time, still in a lot of pain, fingers are still swollen and blue. Dr. Lee ordered another xray and informed me that the surgery did not hold and that the only thing left to do was shoulder replacement. Meanwhile, I am still working. Travelers Insurance agreed to the

(3)

surgery and it was set up for October 2012. Now, I am almost 2 years from the date of my accident in November of 2010.

From the time of the 3rd surgery I could feel myself not well. My energy level was failing. I went to see Dr. Lovelace and he treated me for depression. I had the 3rd surgery but was unable to start physical therapy for 6 to 8 weeks. I restarted physical therapy for the third time. One day I had a very sharp pain in my shoulder. I called Dr. Lee and made an appointment. He took xrays and said nothing showed up but that he was treating this like a fracture. He told me to come back in 2 weeks. After 2 weeks I went back for more xrays and at this time he said there was a crack in the shoulder. He sent me home again to return in 1 week. I then took yet another xray and Dr. Lee informed me that the crack went all the way through the bone and that it would take a very long time to heal. He told me that this happens due to the shoulder bones being very weak from 3 surgeries and the weight of the muscle. He also told me that if it did not heal that he would have to put screws in my shoulder to keep the bones together. Dr. Lee told me at this time he would order a bone stimulator to help heal the bone. It took over 6 months to get the stimulator. I even hired an attorney but Mr. Pope couldn't even get the stimulator any faster. I did not understand how it could take so long. Why?

In the meantime I was getting even sicker. It could have been from depression, but my body could not physically function. I cried a lot. I was unable to do normal things around my house. I did not understand why I felt so bad.

After several months of physical therapy I went back to see Dr. Lee and at this time he said he unfortunately could not do anything else for me. The damage from the start of waiting too long and too much time had passed before getting the first surgery.

I was then fired by letter from Piggly Wiggly. I was never called or received one letter or card to wish me a speedy recovery or even to see how I was doing after 7 years of work and dedication. That included hours of improving the department, going to classes and I really enjoyed my job. It was all over Travelers Insurance not giving me the ok for the MRI back in November of 2010. The outcome is a total of 91% disability in my left shoulder and arm.

After several months, my attorney Mr. Pope, Travelers Insurance's attorney, Mr. Chase, and Mr. Merchant (mediator) all met with me to try to settle this matter before we went in front

of the insurance commissioner. I told them I was too sick to come in but Mr. Pope insisted that I had to be there. I arrived at 11:30a, I was very sick and my skin was a yellow green color. I was scared and I didn't know what was wrong with me. We met altogether the first few minutes. Mr. Chase (Piggly Wiggly attorney) apologized to me on behalf of Piggly Wiggly for the treatment from and neglect that I have suffered.

I was still at the office at 4:30p and was still very ill. I told them repeatedly that I had to go home that I was sick. My husband came through the door and was shocked that I was still there and of my appearance. There was no way I was going to take \$73,400 for what they did to me. I told my husband I was not happy with this and he took me home.

The next day I went to the doctor and he put me into the hospital immediately. I had surgery the next day. Dr. Jones asked my husband what happened. My husband explained everything to him from the accident in 2010 all the way to the meeting that lasted 5 hours. Dr. Jones wondered how they couldn't see how sick I was. I was in ICU for 4 days. I had feeding tubes, tubes draining fluids from my liver, saline, antibiotics, pain meds and oxygen. I came very close to dying. The doctor told my husband it would be touch and go for few days.

I was to go to a meeting on March 23, 2015. I was still in the hospital and they wanted a letter from Dr. Jones stating why I couldn't be there. I was on my death bed and they wanted a letter. They wanted me to sign for a settlement and I was still in the hospital. My husband kept telling them that I was sick. Finally Dr. Jones said NO visitors unless approved. I lost 110 lbs in 4 months. Due to the surgery they found out that I got a liver disease. Primary bilateral cirrhosis in the hospital. The most embarrassing part was that Mr. Pope (my attorney) sent me the letter and the contract for me to sign. I would have thought that he would have taken up for me.

I went home from the hospital at the end of March 2015 with a feeding tube. I could not stand or walk. I was in terrible shape and pain. They kept wanting me to sign the contract. I was very sick and on a lot of medications. A nurse came by 3 times a week and a physical therapist to start. The nurse would take vitals, check the feeding tubes, clean me up and changed dressing.

The attorneys continuously tried to get me to sign the contract. My husband read the contract, we let several people we know read the contract including other attorneys and even law

5

enforcement officials and they have all said that it was the worst thing they had ever read. I would not sign it and I still have not signed the contract.

I was told by a doctor that it may be a good idea to write to our Governor Nikki Hailey, for she may not be aware of what has happened with workers compensation or the actions of Travelers Insurance. I wrote a letter much like this one explaining my situation and the events since November of 2010 until now. I have not heard from her, no letter, nothing acknowledging that they had received it at all. I really needed some advice so I went to the DA's office. Mrs. Rogers stated that I was terribly wronged and told me to contact the Lt. Governor. I called at least 14 times. No letter, no return phone call or any kind of response.

At this time I contacted Mrs. Valentine who is over the workers compensation. Her reply to me was that it takes time for treatment. Why? I did not get a sorry for any problems I am having and she didn't even take the time to answer any of my questions. Next I called Senator Cromer's office. He told me that workers comp on Assembly St in Columbia hung up on him.

You don't have to be a high graduate to understand why big companies want to come to SC. As a right to work state, they can treat employees like dirt. They can fire you for no reason. Workers comp can treat a hurt employee any way they want and obviously nothing can be done about it. I intend to ask the public to sign a petition for the way I was treated. I say let's get rid of big businesses who don't give a damn about their injured employees. Like Senator Cromer said nothing can be done for me but my story may help someone else.

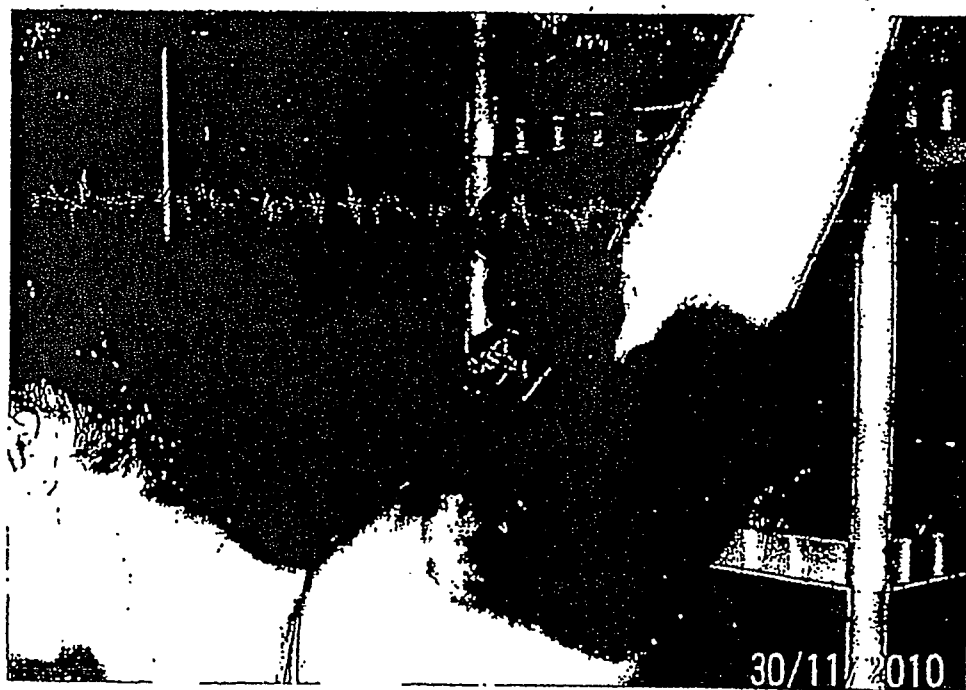
It amazes me that everyone I have spoken to including the DA's office, Mrs. Rogers, Mr. Pope, Piggly Wiggly and their attorney Mr. Chase, Dr. Lee, Senator Cromer and other attorneys all say the same thing, I was treated awful!!! But no one knows what to do to help me.

Because of the cost of an MRI that Travelers Insurance was contracted to fulfill by Piggly Wiggly, I have lost my job which most importantly includes being able to care for myself, I lost my health, I lost my life and health insurance, and I am missing out on my 401k which is my retirement that I will not ever be able to enjoy now. This is all due to Travelers Insurance not doing what they were supposed to do. The quality of my life now is very poor and I still have no one to help me. Why? I loved my job, took great pride in working and now I can't. I wonder as

(6)

I lay here if anyone else has went through this. Do firemen, police officers or teachers or their families would have to wait 107 days for treatment or an operation. Why? Again just why?

Sincerely,



STATE OF SOUTH CAROLINA
BEFORE THE
SOUTH CAROLINA WORKERS' COMPENSATION COMMISSION
WCC No. 1019167

Seeahray Brailsford

Claimant,

v.

Greenbax Enterprises, Inc.,

Employer,

and

Constitution State Service
Company as TPA for Greenbax
Enterprises, Inc.,

Carrier/Defendants.

COPY

DEPOSITION OF
SEEAHRAY BRAILSFORD

Wednesday, December 10, 2014
10:08 a.m. - 10:40 a.m.

The deposition of SEEAHRAY BRAILSFORD, taken on behalf of the Defendant at Pope and Hudgens, P.A., 1508 College Street, Newberry, South Carolina, on the 10th day of December, 2014 before Amy G. Byrd, Court Reporter and Notary Public in and for the State of South Carolina, pursuant to Notice of Deposition.



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APPEARANCES

Thomas H. Pope, Esquire
 Pope & Hudgens, P.A.
 1508 College Street
 Newberry, South Carolina 29108
 Attorney for the Claimant

Michael E. Chase, Esquire
 Turner, Padget, Graham & Laney, P.A.
 1901 Main Street
 17th Floor
 Columbia, South Carolina 29201
 Attorney for the Defendants

INDEX

<u>Ms. BRAILSFORD:</u>	<u>PAGE</u>
MR. CHASE EXAMINATION	3
Certificate	32

EXHIBITS

Defendant's Exhibit Number One	7
(Drivers License of Seeahray Brailsford)	

STIPULATIONS

It is stipulated and agreed that this deposition is being taken pursuant to the Administrative Procedures Act and the South Carolina Rules of Civil Procedure.

It is stipulated by and between counsel and the witness that the reading and signing of the following deposition be, and the same are, hereby waived.



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1 SEEAHRAY BRAILSFORD, having been duly sworn, deposes
2 and testifies as follows:

3 MS. BRAILSFORD - EXAMINATION BY MR. CHASE:

4 Q: Ms. Brailsford, I'm Mike Chase. I represent
5 Piggly Wiggly, of course, in your workers' comp
6 case. I'm going to ask you a number of
7 questions this morning. Some you'll probably
8 be wondering why I'm asking them but we get to
9 ask them and it's a discovery deposition. So
10 I'll ask the questions and pause and let you
11 answer. The court reporter, she's repeating
12 everything we say into these machines here. I
13 can't tell you how any of that works, but if
14 you could verbalize your answers saying yes or
15 no. She can't pick up if we nod or shake our
16 heads at each other.

17 A: Okay.

18 Q: And that will help her out. And then if you
19 don't understand any question that I ask just
20 stop and tell me, okay?

21 A: Okay.

22 Q: Great. Let me get some just -- just some
23 background information on you. What is your
24 current age?

25 A: 63.



- 1 Q: Okay. 63. And I'm just going to read the last
2 four digits of your social security number,
3 ?
- 4 A: Right.
- 5 Q: Okay. And do you still live at 322 Rice Road
6 in Newberry?
- 7 A: Right.
- 8 Q: Okay. And are you married?
- 9 A: Well we live together.
- 10 Q: Okay. And for how many years?
- 11 A: Forty.
- 12 Q: Okay. All right. So common law?
- 13 A: Uh-huh (affirmative response).
- 14 Q: Yes, ma'am, is that a yes?
- 15 A: Yes.
- 16 Q: Okay.
- 17 A: I forgot.
- 18 Q: That's all right.
- 19 A: Sorry.
- 20 Q: Do you have any kids?
- 21 A: No.
- 22 Q: And does your common law husband, does he work
23 anywhere?
- 24 A: No, he's disabled.
- 25 Q: All right. What's his disability?



1 A: Service -- from the army.

2 Q: Okay. How many years has he been disabled?

3 A: At least seven.

4 Q: Seven years?

5 A: Uh-huh (affirmative response).

6 Q: Okay. And do you take care of him?

7 A: Yes.

8 Q: What is his physical disability? What's the
9 nature of it?

10 A: He has four stents in his heart, he's diabetic,
11 he's had two knee surgeries so far.

12 Q: Okay. Does he get around on his own or is he
13 in a wheelchair or anything?

14 A: He uses a wheelchair if it's for long distance,
15 but ...

16 Q: And tell me how far you went in school?

17 A: Twelfth grade.

18 Q: So you have a high school diploma?

19 A: Yes.

20 Q: And what school was that?

21 A: McCartha High.

22 Q: And where is that?

23 A: Hollywood, Florida.

24 Q: Okay. When did you move to South Carolina?

25 A: 2001.



1 Q: Do you have a valid South Carolina driver's
2 license?

3 A: Yes.

4 Q: Do you have that with you today?

5 A: Yes.

6 Q: If you could get that out, I'll make that a
7 Defense Exhibit One and we can just wait until
8 we're done today to make a copy of it so we can
9 just continue ---

10 A: Okay.

11 Q: --- asking the questions.

12 A: Okay.

13 Q: But if you could just get that out from us,
14 please, thank you.

15 A: I've got to see if we can get it out.

16 Q: All right. Take your time.

17 A: It's kind of ---

18 MR. POPE: Do you want me to get it out?

19 A: It's kind of coming apart.

20 Q: We can get it out afterwards.

21 MR. POPE: Well I can copy it in the -- it looks
22 like it's visible. Do you want me to just copy
23 it on the machine?

24 MR. CHASE: That would be fine. Sure.

25 MR. POPE: I think we can read it.



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1 MR. CHASE: Okay. All right.

2 (Briefly Off the Record)

3 MR. POPE: Here you go.

4 MR. CHASE: Thank you. I appreciate that.

5 (Defendant's Exhibit Number One was marked for
6 identification purposes.)

7 MR. POPE: Here's a copy for you too, Mike.

8 MR. CHASE: Thank you, Tom.

9 Q: And have you ever filed for or received any
10 unemployment benefits ---

11 A: No.

12 Q: --- in any state?

13 A: No.

14 Q: Do you have any criminal convictions of any
15 type in any state?

16 A: No.

17 Q: Do you have a computer at your house?

18 A: No.

19 Q: Do you have any kind of what they call social
20 media page, like Facebook or ---

21 A: No.

22 Q: And make sure you let me finish asking the
23 questions because that will mess the court
24 reporter up.

25 A: Okay.



1 Q: And I appreciate that you want to get the
2 answer out there. Any other social networking
3 sites; like Twitter, My Space, anything like
4 that?

5 A: No.

6 Q: Do you have internet on your phone?

7 A: No.

8 Q: Do you know how to get on the internet on the
9 computer?

10 A: No.

11 Q: Have you ever had to use a computer on any of
12 your jobs?

13 A: Piggly Wiggly.

14 Q: What did you have to do on the computer there?

15 A: It was -- you had to do the inventory and you
16 had to order on it.

17 Q: And they trained you on that?

18 A: Yes.

19 Q: How many years of computer use at Piggly Wiggly
20 did you have?

21 A: Seven.

22 Q: And when were you hired by Piggly Wiggly?

23 A: I've got to go back.

24 Q: That's fine, take your time.

25 A: I think ---



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1 Q: Does 2006 sound correct?

2 A: Yeah, that sounds about right.

3 Q: Okay. Now what I want to do next is to ask you
4 about your work history and I want to -- what
5 I want to do is go all the way back to when you
6 left high school and then up to Piggly Wiggly.
7 So some people have lots of jobs, some only
8 have a few, but let's start back there when you
9 -- after you graduated high school, where did
10 you first start working then?

11 A: Sears and Roebuck.

12 Q: And how many years there?

13 A: A couple.

14 Q: What did you do there?

15 A: I worked at the candy department, sales.

16 Q: Okay. And after Sears?

17 A: It was Motorola.

18 Q: And what did you do for them?

19 A: I pulled parts for the radios.

20 Q: How long with them?

21 A: A couple of years because they had layoffs.

22 Q: Now were all these down in Florida?

23 A: Yes.

24 Q: Okay. And after Motorola?

25 A: Then I went to Rite Aid warehouse.



1 Q: And what did you at the warehouse?

2 A: Pulled the orders for the drug stores.

3 Q: And how long with them?

4 A: Probably three years because then they closed
5 that plant down.

6 Q: Okay. And after them?

7 A: Johnson and Evinrude engines.

8 Q: What did you do there?

9 A: Pulled orders.

10 Q: Okay. How long with them?

11 A: Eight years.

12 Q: And why did you leave them after eight years?

13 A: They closed that plant down.

14 Q: Okay. After that?

15 A: Publix.

16 Q: And what did you do for Publix?

17 A: Deli sales.

18 Q: Were you ever any kind of manager for ---

19 A: I had taken ---

20 Q: --- Publix?

21 A: --- the test for assistant.

22 Q: Did they make you an assistant?

23 A: No, you have to wait. I passed the test but
24 then you have to wait for the positions to
25 open.



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1 Q: Oh, okay. And how long did you work for
2 Publix?

3 A: Six.

4 Q: Six years?

5 A: Yes.

6 Q: And why did you leave them after six years?

7 A: I got injured on the right shoulder.

8 Q: How did you injure your right shoulder for
9 Publix?

10 A: They had pushed a cart behind me and it had
11 these -- they had sub ice tables and they had
12 like plastic rails and somebody had pushed the
13 cart behind me and the rails hung out the cart
14 and I didn't know it was there and when I
15 turned I tripped over it and tore this rotator
16 cuff.

17 Q: What year was that that you injured your right
18 shoulder?

19 A: Hold on, I've got to think. Because that was
20 -- it was before we come up here. It was 2010.
21 No -- 19 -- I'm sorry, 2000.

22 Q: So this happened down in Florida?

23 A: Right.

24 Q: What town in Florida?

25 A: Boca Raton.



1 Q: And how long were you out of work from that
2 right rotator cuff injury?

3 A: Let's see. It was done in October 2010, they
4 fixed it and then we moved up here because they
5 were going to open some stores up here in 2001.
6 So I'd say about six months.

7 Q: And it happened in 2000 so about six months
8 after that you were out of work?

9 A: Right.

10 Q: Okay. And did you get an impairment rating on
11 the right shoulder?

12 A: No.

13 Q: Did you get a workers' comp settlement from
14 that one?

15 A: No.

16 Q: You didn't?

17 A: (Shakes head negatively.)

18 Q: Okay. Why not?

19 A: We didn't -- I -- we didn't know about that.

20 Q: Oh. Was it paid under workers' comp though?

21 A: Yeah.

22 Q: You didn't have an attorney on that case?

23 A: No.

24 Q: Did they pay your time out of work?

25 A: Yes.



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1 Q: Well how did they resolve the case at the end?

2 A: The doctor said I could go back to work and
3 that was it.

4 Q: And they paid all your medical?

5 A: Yes.

6 Q: You didn't go to a hearing?

7 A: No.

8 Q: So you didn't go to court on it?

9 A: No.

10 Q: Did you have your deposition taken like we're
11 doing today?

12 A: No.

13 Q: So you -- did you return to work for Publix
14 then?

15 A: No, the Publix was too far for me where we
16 lived. So I went to work for Wal-Mart in
17 Greenwood.

18 Q: Because you had moved up here to South
19 Carolina?

20 A: Right.

21 Q: So did Publix offer you a job up here?

22 A: Yeah, I could take a job but they were way to
23 far. It was either Columbia or Greenville that
24 you had to go to.

25 Q: Okay. So what did you do at Wal-Mart?



1 A: I stocked shelves, pulled pallets. Did
2 modules.

3 Q: What's a module?

4 A: The items that are on the shelf, they change
5 them every season so you get all these tickets
6 and you have to move everything around off the
7 shelves.

8 Q: How long did you work for Wal-Mart?

9 A: Five.

10 Q: What store did you work at?

11 A: Greenwood.

12 Q: And why did you leave them?

13 A: Because I got the position at Piggly Wiggly.

14 Q: Okay. And did you have the same job the whole
15 time at Piggly Wiggly?

16 A: Yes.

17 Q: And what was your job title there?

18 A: Deli Manager, bakery.

19 Q: Had you ever been a manager or any type at any
20 prior job?

21 A: No.

22 Q: How many employees did you supervise in that
23 job?

24 A: Let's see. Towards the end we had about six.

25 Q: And what was your work schedule with Piggly



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1 Wiggly?

2 A: Forty-eight hours.

3 Q: Did you work any where else at the time that
4 you had this injury that we're here on today?

5 A: No.

6 Q: Now what are the injuries that you're claiming
7 in this case there we're here on today?

8 A: My clavicle, the shoulder, the arm and my
9 fingers.

10 Q: All on the left side, right?

11 A: Yes, sir.

12 Q: Now prior to this accident which happened on
13 November the 23rd of 2010, had you ever injured
14 your clavicle, your left shoulder or your left
15 arm or your left fingers?

16 A: No.

17 Q: And prior to this date of accident we're here
18 on today, have you ever seen any kind of
19 medical provider for your clavicle, your left
20 shoulder, your left arm or your left fingers --

21 -

22 A: No.

23 Q: --- in the past?

24 A: No.

25 Q: Make sure you wait until I'm ---



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1 MR. POPE: Yeah, kind of wait. Try to wait until he
2 finishes.

3 A: Okay.

4 MR. POPE: And he'll wait until you finish.

5 A: Okay.

6 Q: Were you under a doctors treatment for anything
7 or on any prescription medications at the time
8 of the accident in this case?

9 A: No.

10 Q: Never broke your left arm in the past or
11 anything?

12 A: No.

13 Q: Other than the prior workers' comp claim with
14 Publix, have you had any other prior on the job
15 injuries or workers' compensation claims?

16 A: No.

17 Q: Have you ever been a car or truck wreck?

18 A: No.

19 Q: Other than the Publix workers' comp claim, have
20 you had any other personal injury claims of any
21 type in the past?

22 A: No.

23 Q: Have you ever had your deposition taken in any
24 kind of lawsuit in the past?

25 A: No.



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1 Q: Who is your family physician?

2 A: Dr. Lovelace.

3 Q: And how long has Dr. Lovelace been your family
4 doctor?

5 A: Since -- probably 12 years.

6 Q: Has Dr. Lovelace ever seen you for any
7 complaints for your left shoulder prior to the
8 accident in this case?

9 A: No.

10 Q: Have you ever seen a chiropractor in the past?

11 A: No.

12 Q: Have you had any accidents or injuries of any
13 type after this accident that we're here on
14 today?

15 A: No.

16 Q: That brings me to -- I'm going to switch gears
17 now and ask you how the accident and your
18 injury happened on November 23rd of 2010.
19 Explain to me please how you got hurt that day?

20 A: I had to go to the freezer and get some frozen
21 pies to bake off and there was a pallet sitting
22 in front of my shelf and it was maybe an inch
23 high so I tried to reach it with my right arm
24 but I was a little short. And sometimes when
25 you switch you can reach it better so I



1 switched and I got the back end of the box and
2 I said, oh, good, I got the box. So as I
3 pulled forward then I heard -- I had this pain
4 going through my arm.

5 Q: So were you inside like a walk-in freezer?

6 A: Yeah, a walk-in freezer.

7 Q: Okay. So you were inside the freezer.

8 A: Uh-huh (affirmative response).

9 Q: And tell me about the pallet, I don't
10 understand the pallet. Tell me about that
11 again.

12 A: It has items on it, it's just a wood -- the
13 wood pallets and they -- they made a delivery
14 that day and it -- the shelf was like here
15 (indicating) and the pallet was that much
16 higher (indicating) than the shelf, about an
17 inch higher.

18 Q: Okay. So the pallet was in front of the shelf
19 ---

20 A: Yeah.

21 Q: --- you were trying to get to?

22 A: That I needed to get to, yeah.

23 Q: All right. So you had to -- did you have to
24 reach over the top of the pallet?

25 A: I had to reach over the top.



1 Q: And there were items on the pallet?

2 A: Right.

3 Q: Okay. And so you're trying to pull this box
4 forward?

5 A: Right.

6 Q: All right. And it had pies in it?

7 A: Yeah.

8 Q: How many pies were in the box?

9 A: Six pies in a box.

10 Q: Did you get the box out of there or when you
11 felt the pain did you stop?

12 A: I stopped because it hurt so bad.

13 Q: And did you -- did anybody witness this?

14 A: No.

15 Q: Did you report it immediately?

16 A: Yes.

17 Q: Who did you report it to?

18 A: The store manager.

19 Q: And who was that?

20 A: His first name was Tommy, I can't remember his
21 last name.

22 Q: And when did you start missing time from work?

23 A: I went to see Dr. Lovelace because he was the
24 company workers' comp doctor for them.

25 Q: Okay. And he also happened to be your family



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- 1 doc, right?
- 2 A: Uh-huh (affirmative response).
- 3 MR. POPE: Seeahray, when you say uh-huh ---
- 4 A: I mean, yes.
- 5 MR. POPE: Try to say yes.
- 6 A: I'm sorry. Yes.
- 7 Q: So you -- so you went to your doctor the next
- 8 day; is that right?
- 9 A: Right.
- 10 Q: Did you tell him anything about having any
- 11 right arm problems or was it just your left
- 12 arm?
- 13 A: Dr. Lovelace?
- 14 Q: Yeah.
- 15 A: Well he knew I had this done, the right arm.
- 16 Q: In the past?
- 17 A: In the past.
- 18 Q: Yeah. But you were there on -- just
- 19 complaining about your left side, correct?
- 20 A: Right.
- 21 Q: Okay. What prescription medicines are you on
- 22 now?
- 23 A: I take a depression pill and that's it.
- 24 Q: Okay. And who is prescribing that for you?
- 25 A: Dr. Lovelace.



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1 Q: When's the first time you were ever diagnosed
2 with any depression?

3 A: It's been over a year.

4 Q: Did you have any problems with depression prior
5 to this accident?

6 A: Yeah, I was depressed and I would cry a lot and
7

8 Q: And for what reasons in the past?

9 A: Just for everything that's happened. Because
10 I've always worked. Since I was 13 I've been
11 at work.

12 Q: Okay.

13 A: And I'm not used to sitting around and ---

14 Q: Well let me make sure you understand my
15 question. What I'm asking you is before this
16 accident on November 23rd of 2010, did you ever
17 have any problems with depression before that
18 date?

19 A: No, sir.

20 Q: Okay. Had you ever seen any doctor or been
21 prescribed any medication for any depression,
22 anxiety, any kind of psychological complaints
23 prior to the accident in this case?

24 A: No.

25 Q: When's the last time you've taken any pain



1 medication for your shoulder?

2 A: Six months ago.

3 Q: And when's the last time you've seen any of
4 your treating physicians for your injury?

5 A: I think it was July with Dr. Lee.

6 Q: Okay. And what did he do for you back in July?

7 A: He just told me that that was as far as he
8 could go for now.

9 Q: Has he recommended any new procedure for you or
10 anything?

11 A: No.

12 Q: So did he release you in July?

13 A: Yes, I think it was July.

14 Q: Did he give you any permanent restrictions?

15 A: He said I can't lift anything over two pounds.

16 Q: Okay. And you had a -- what they call a
17 functional capacity evaluation in July as well?

18 A: Yes.

19 Q: And you've stopped any physical therapy or
20 anything like that?

21 A: Yeah, it's all -- all done.

22 Q: And have you seen any other doctors for any of
23 your claimed injuries since Dr. Lee released
24 you in July?

25 A: No.



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1 Q: Has your attorney sent you to any doctors or do
2 you have any appointments with any, including
3 any kind of experts of any type?

4 A: He sent me to -- I don't know what you call it.
5 Someone that evaluates your -- you take these
6 tests and they see where they ---

7 Q: Okay. Yes, ma'am.

8 A: Yeah.

9 Q: A vocational expert?

10 A: Yeah.

11 Q: Okay. And who did you go to?

12 A: Joel -- I forgot ---

13 Q: Okay. Joel Leonard?

14 A: Yes.

15 Q: Okay. Did you have to go down to Columbia?

16 A: Yes.

17 Q: And when did you have that evaluation?

18 A: Oh, I can't remember the date.

19 MR. POPE: You don't have that? Excuse me.

20 MR. CHASE: I ---

21 MR. POPE: Because if you want I'll give you a copy.

22 MR. CHASE: Yeah, we can talk when we're done.

23 MR. POPE: Sure.

24 MR. CHASE: Thank you.

25 Q: And was that just recently that you went to



1 him?

2 A: Yeah, not too long ago.

3 Q: Okay. Like within the last month or so?

4 A: I think so.

5 Q: Okay. Did he say there were any jobs that you
6 could do anywhere?

7 A: No. He said he thought I was disabled.

8 Q: No do you -- do you have any health insurance?

9 A: No.

10 Q: All right. Tell me about your left shoulder,
11 what complaints do you have with it here at the
12 present time?

13 A: I still have pain up here at the clavicle and
14 the shoulder part. My hands swell up and they
15 get cold.

16 Q: Is that on both sides with your hands?

17 A: No, just the left.

18 Q: Okay.

19 A: And with my fingers I can't -- I push it down
20 but you see it curves back up (indicating) by
21 itself.

22 Q: Now tell me about your range of motion, any
23 problems with the motion of your shoulder?

24 A: I can only get it to there (indicating).

25 Q: Okay. You can't lift it above your shoulder



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1 level?

2 A: Huh-uh (negative response).

3 Q: Okay.

4 A: No, I can't.

5 Q: Okay. So you're really -- you're holding it
6 out pretty much level with the floor, no higher
7 than that?

8 A: Yeah, just about that.

9 Q: What happens if you try to raise it above that?

10 A: It won't go any higher. It just like -- it's
11 locked in.

12 Q: Are you right-handed?

13 A: Yes.

14 Q: What, if any, of your activities that you used
15 to do can you no longer do at all? What comes
16 to mind?

17 A: I can't knit because I can't hold the needles.

18 Q: Okay. What else?

19 A: If I do -- when I do my laundry I have to do
20 everything right-handed. Put it in to the
21 washer, put it in the dryer, everything right-
22 handed.

23 Q: All right.

24 A: Cooking is the same way. I can't lift a heavy
25 pot. My husband has to put the pot up for the



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1 stove but I can stand and stir it. Sweeping
2 the floor, I do right-hand. Vacuuming is
3 right-handed.

4 Q: Anything else come to mind that you used to do
5 that you can't do now?

6 A: Folding my clothes, I can't fold them real
7 well.

8 Q: What about your grocery shopping?

9 A: I do that but I do it all right-handed.

10 Q: You don't pick up any products on your left
11 side?

12 A: No.

13 Q: Can you push a grocery cart?

14 A: I can manage a grocery cart.

15 Q: Do you use both hands for that?

16 A: Yes. Just the left one just kind of just
17 steadies it so it doesn't go running in to
18 somebody.

19 Q: And do you do your grocery shopping by yourself
20 since your husband is disabled?

21 A: Right now, yeah. I just pick up light things
22 for us.

23 Q: I mean, you have to pick up all the things
24 though, right?

25 A: Right.



1 Q: And do you take -- do you take the bags from
2 the grocery cart and put them in your car?

3 A: Uh-huh (affirmative response). Right-handed.

4 Q: And then you take the bags from the car into
5 the house?

6 A: Right. Right-handed.

7 Q: Do you lift any grocery bags at all on your
8 left side?

9 A: If it's very light I can manage it, like a
10 magazine or paper or something like that, I can
11 do it with my left. But I don't ---

12 Q: All right. So you can do some light ones on
13 your left ---

14 A: Uh-huh (affirmative response).

15 Q: --- side?

16 A: Right.

17 Q: And do you cook the meals at the house?

18 A: Yes.

19 Q: How many nights do you cook?

20 A: Every night.

21 Q: Do you clean the house?

22 A: No, my husband usually does.

23 Q: I'm talking about -- do you do some?

24 A: I do some light stuff that I can handle.

25 Q: Okay. What part of it do you do?



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- 1 A: I can move the vacuum because I can do that
2 right-handed.
- 3 Q: Okay.
- 4 A: And I can dust because that's right-handed.
- 5 Q: What things are you claiming that you can't do
6 as far as cleaning the house?
- 7 A: I can't like clean the bathtub and stuff. It's
8 hard for me to do that because you have to
9 reach in so far.
- 10 Q: Who takes care of the yard?
- 11 A: My husband.
- 12 Q: He can do that even though he's disabled?
- 13 A: Yeah, he's not -- he's not doing it now because
14 it doesn't need to be done but he's the one
15 that takes care of the yard.
- 16 Q: Do you do anything in the yard?
- 17 A: No.
- 18 Q: Did you do anything before this accident in the
19 yard or not?
- 20 A: Not a lot.
- 21 Q: Okay.
- 22 A: I'd try to help him, but ---
- 23 Q: You didn't do much before?
- 24 A: No.
- 25 Q: Do you do any kind of recreation at all?



1 A: No.

2 Q: What kind of vehicle do you have?

3 A: I have a Sonic.

4 Q: Is that the only vehicle y'all have?

5 A: And he has a truck.

6 Q: Which one do you always drive?

7 A: I drive the Sonic because I can't drive the
8 truck no more.

9 Q: Do you do any volunteer work anywhere, at
10 church or community or anywhere else?

11 A: No.

12 Q: Do you attend church?

13 A: Not right now.

14 Q: Do you do anything for exercise right now?

15 A: No.

16 Q: You don't belong to any kind of exercise place,
17 gym, or anything like that?

18 A: No.

19 Q: Have you been on vacation anywhere this year?

20 A: No.

21 Q: When's the last time you went on a vacation?

22 A: Let's see. It had to be 2010.

23 Q: Do you live on any kind of land? Where do you
24 live?

25 A: We rent.



1 Q: Okay. Do y'all have any animals or pets or
2 anything?

3 A: Just a dog.

4 Q: Okay. A dog. All right. Who takes care of
5 the dog?

6 A: My husband does.

7 Q: Do you ever feed or water the dog?

8 A: I can feed him, yeah.

9 Q: What kind of dog do you have?

10 A: He's half pitbull, half lab.

11 Q: And do you -- do you take the dog for walks?

12 A: No. We -- he's got a shock collar on him and
13 he goes out the door.

14 Q: Do you ever take him on a leash though and walk
15 him?

16 A: No.

17 Q: Do you ever take him and walk him with a leash
18 with your left arm holding the leash?

19 A: No.

20 Q: How big of bags of dog food do y'all buy?

21 A: I don't buy dog -- we buy the cans.

22 Q: So you open that up and give it to the dog?

23 A: Yeah, I can pop that open with my right hand.

24 Q: Okay. Have you tried to go back to work
25 anywhere or find any jobs anywhere ---



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1 A: No.

2 Q: --- since the injury?

3 A: (Shakes head negatively.)

4 Q: Have you filed for social security disability?

5 A: No.

6 Q: Are you receiving any other kind of disability
7 payments or benefits at this time?

8 A: No.

9 Q: Do you have any tax liens of any type?

10 A: No.

11 Q: Have you ever had a repossession?

12 A: Not that I know of, no.

13 Q: Ever had a foreclosure?

14 A: No.

15 Q: Is there any medical care that you're seeking
16 at this time that my client hasn't authorized
17 or approved?

18 A: No.

19 Q: Okay. That's all I have, I believe. Thank
20 you.

21 A: Okay.

22 MR. POPE: Thank you, I don't have any questions.

23 (There being no further questions, the deposition
24 concluded at 10:40 a.m.)

25

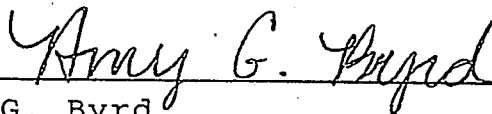


CERTIFICATE

This is to certify that the deposition of SEEAHRAY BRAILSFORD, consisting of thirty-one (31) pages, is a true and correct transcript of the testimony given by said deponent after being duly sworn; said deposition was reported by the method of Stenomask with Backup.

I further certify that I am neither employed by nor related to any of the parties in this matter or their counsel; nor do I have any interest, financial or otherwise, in the outcome of same.

IN WITNESS WHEREOF I have hereunto set my hand and seal on December 19, 2014.



Amy G. Byrd
Court Reporter

Notary Public for South Carolina
My Commission Expires: April 10, 2023



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BEFORE THE
SOUTH CAROLINA WORKERS' COMPENSATION COMMISSION
WCC FILE NO. 1019167

SEEAHRAY BRAILSFORD,	)	
	)	
CLAIMANT,	)	
	)	
VS.	)	TRANSCRIPT OF PROCEEDINGS
	)	
PIGGLY WIGGLY, INC.,	)	AUGUST 1, 2016
	)	
EMPLOYER,	)	
	)	
AND	)	
	)	
GREENBAX ENTERPRISES,	)	
INC.,	)	
	)	
CARRIER,	)	
	)	
DEFENDANTS.	)	

THIS HEARING WAS HELD BEFORE COMMISSIONER
T. SCOTT BECK, REPORTED BY SKYLET KEAN, COURT
REPORTER AND NOTARY PUBLIC IN AND FOR THE STATE OF
SOUTH CAROLINA; SAID PROCEEDINGS WERE HELD AT THE
SOUTH CAROLINA WORKERS' COMPENSATION COMMISSION,
1331 MAIN STREET, COLUMBIA, SOUTH CAROLINA, ON
MONDAY, AUGUST 1, 2016, COMMENCING AT 3:15 P.M.

SKYLET KEAN (803) 609-0134
fttpam@aol.com

APPEARANCES

FOR THE CLAIMANT:

SEEAHRAY BRAILSFORD, PRO SE'
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FOR THE DEFENDANTS:

MICHAEL E. CHASE, ESQUIRE
TURNER, PADGET, GRAHAM & LANEY, P.A.
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1 INDEX

3 SEEAHRAY BRAILSFORD

4 EXAMINATION BY THE COURT

7

5 CROSS-EXAMINATION BY MR. CHASE

15

15 EXHIBITS

16 D-1 - DEPOSITION OF SEEAHRAY BRAILSFORD

4

17 D-2 - SURVEILLANCE VIDEO DVD

4

PROCEEDINGS

THE COURT: Today's date is August 1st, 2016. This is Workers' Compensation File Number 1019167. The claimant in this matter -- would you pronounce your first name for me?

MS. BRAILSFORD: Seeahray.

THE COURT: Seeahray. The claimant in this matter is Seeahray Brailsford. The employer is Piggly Wiggly, Inc. The carrier is Greenbax Enterprise, Inc. Ms. Brailsford is here today pro se'. She has been advised of her right to counsel and has waived that right. The employer/carrier are represented today by Attorney Mike Chase. Date of accident in this matter is November 23rd, 2010. The average weekly wage is \$537.18 yielding a compensation rate of \$358.14. We are here today on Claimant's Form 50. There has also been a Form 21 filed in this matter. That Form 21 was dated January 25th, 2016; is that correct?

MR. CHASE: Yes. That's correct.

(DEFENDANT'S EXHIBITS NUMBER 1-2 WERE MARKED FOR IDENTIFICATION.)

THE COURT: And I am merging both of those pleadings into this proceeding today. I've received

1 APAs from the defendant in this matter as well as the
2 deposition testimony of Ms. Brailsford. That
3 deposition has been marked as Defendant's Exhibit
4 Number 1. I also have received a DVD entitled
5 surveillance dates 4/25/2013, 4/30/2013. That has
6 been marked as Defendant's Exhibit Number 2. I have
7 not received any APAs from the claimant in this
8 matter. Are there any objections to APAs,
9 jurisdiction, venue or any other matter? Mr. Chase?

10 MR. CHASE: None from the defense.

11 THE COURT: All right. Ms. Brailsford,
12 that means any objection to any of this stuff that's
13 been handed up to me, the fact that the Commission is
14 hearing your case and that we're hearing it in
15 Columbia, South Carolina? Any objection to any of
16 those things?

17 MS. BRAILSFORD: No.

18 THE COURT: Okay. Without objection the
19 Commission file becomes a part of the record with the
20 exception of self-serving declarations and
21 unstipulated medical reports.

22 We've had a rather extensive pre-hearing
23 conference in this matter and during that conference
24 the respective positions of both the parties was
25 discussed. From the standpoint of the claimant, Ms.

1 Brailsford asserts that she suffered an injury to her
2 left shoulder with effect to her left arm and hand.
3 She is here seeking an award of permanent partial
4 disability to her left shoulder, her left arm and her
5 left hand and she is seeking future medical care for
6 causally related maintenance, replacement or repair
7 of the prosthetic shoulder.

8 Ms. Brailsford, anything in addition to
9 that that you're here for me to decide today?

10 MS. BRAILSFORD: No.

11 THE COURT: Okay. With respect to the
12 defendants' position, they assert that Ms. Brailsford
13 achieved maximum medical improvement on July 29,
14 2014. There is a converted rating of 46.7 percent to
15 her left shoulder. The defendants assert this is a
16 single scheduled member injury to her left shoulder.
17 They are seeking an order stopping payment of
18 temporary total disability benefits, seeking a credit
19 for those benefits paid beyond July 29, 2014, and
20 assert that Ms. Brailsford is entitled to future
21 medical care but limited to lifetime repair,
22 maintenance or replacement of casually related
23 medical hardware.

24 Mr. Chase, anything in addition to that
25 with regard to the defendants' position you'd like to

1 get on the record or any other matter you're here to
2 litigate today, sir?

3 MR. CHASE: Nothing further. Thank you.

4 THE COURT: All right. Ms. Brailsford,
5 would you raise your right hand, ma'am?

6 SEEAHRAY BRAILSFORD,
7 AFTER BEING DULY SWORN TO TELL THE TRUTH, TESTIFIED
8 AS FOLLOWS:

9 EXAMINATION

10 BY THE COURT

11 Q. Please state your full name for the
12 record.

13 A. Seeahray Brailsford.

14 Q. Ms. Brailsford, I'd indicated to you
15 before we called the case that you're going to be
16 given the opportunity to talk about your case, talk
17 about the benefits that you're seeking, why you
18 believe you're entitled to those and why I should
19 award those to you. I'm going to let you just
20 basically talk to me. I'm going to ask if you would
21 keep your voice up. That recording device has to be
22 able to pick everything up you say and the court
23 reporter has to be able to hear everything you say as
24 well.

25 A. All right.

1 Q. Okay.

2 A. I'll do my best.

3 Q. Okay. I'll be happy to hear from you,
4 ma'am.

5 A. I was injured on the job in 2010 and I
6 reported it and I went to see Dr. Lovelace who
7 ordered the MRI. I had a bruise from here to -- from
8 the lower shoulder to past the elbow. And he was
9 really -- he told me he thought my shoulder was torn,
10 but he was real concerned about that bruising. So he
11 ordered the MRI and when I got home they had -- the
12 office called and said that workers' comp denied it
13 and they didn't know why. So then I had to go back
14 and see him again and then he tried again to get the
15 MRI. And he said, "No, they denied that" --

16 MR. CHASE: Commissioner, I'll place an
17 objection just for the record at this point for
18 hearsay on what that doctor actually said. We do
19 have medical records, full medical records submitted
20 in the matter.

21 THE COURT: Ms. Brailsford, the objection
22 is you can't testify to what the doctor said. You
23 can testify to what your understanding was of that
24 visit, but you can't testify to what he told you.
25 Okay?

1 THE WITNESS: Okay. And I had to wait.
2 So I finally got a phone call. It was after
3 Christmas to have the MRI done. Well, meanwhile, I'm
4 still working with one arm, trying to work with one
5 arm. And I get the MRI and that's when they said it
6 was torn really bad. So he wanted to send me for --
7 to an orthopedic doctor himself but apparently they
8 denied that and they sent me to Dr. Holmes. So that
9 wasn't until January. I didn't even see him until
10 then and the first surgery wasn't scheduled till
11 March of 2011. And when I made -- when the girl
12 called me about the surgery, she said, "It'll be
13 March." I said, "I gotta wait that long?" She said,
14 "Well, when did you have" --

15 MR. CHASE: The same objection,
16 Commissioner. Because she's testifying again to what
17 other people are saying which clearly would be
18 hearsay.

19 THE COURT: I'm going to sustain the
20 objection. You can't testify to what somebody else
21 said.

22 THE WITNESS: Okay. I had to wait till
23 March for it. And I got that done and I kept telling
24 Dr. Holmes there was something wrong. It wasn't
25 right. There was something wrong with the shoulder.

1 And I was going to physical therapy like I was
2 supposed to. I go down to see him and I'd complain
3 that I'm in really bad pain. My fingers would turn
4 blue and be ice cold and he had me do more therapy.
5 Every time I went down I'd tell him the same thing.
6 There's something wrong because I had the right one
7 done 16 years ago, but there's something wrong with
8 this one. And on the last day when I saw him he got
9 a little perturbed with me and he said -- well, he
10 told me that he didn't know what he was going to do
11 with me and that's when I told him I'm going to get a
12 second opinion. And he said, "Get all the opinions
13 you want." And that's when I went to see Dr. Lee.
14 Then he --

15 BY THE COURT

16 Q. Now, how did you get to
17 Dr. Lee? Who sent you to Dr. Lee?

18 A. Newberry Physical Therapy.

19 Q. Okay. And was this care provided by the
20 carrier? Did they pay for it? Did they pay the
21 bill?

22 A. For Dr. Lee?

23 Q. Yes.

24 A. Yes.

1 Q. Okay.

2 A. And then I finally got to see Dr. Lee.

3 And he took an X-ray of it and he put it up and he
4 said, "Well, I could see part of the problem, but" --

5 Q. Again, ma'am, you can't testify to what
6 the doctor told you.

7 A. Oh. Well, okay.

8 Q. I'm going to have to rely on those medical
9 records that are in this book here.

10 A. Okay. Well, he had to try -- he was going
11 to do it microscopic. But apparently when he went in
12 he couldn't do it that way. He had to cut me and he
13 had to redo everything, clean all the scar tissue out
14 from what I understand, and he had to redo the whole
15 thing again and said he couldn't guarantee this. So
16 I'm going to therapy --

17 Q. Now, is this the first time that --

18 A. This is the second time that --

19 Q. But was there a prosthetic put in at that
20 time?

21 A. No.

22 Q. Okay.

23 A. The last one.

24 Q. Okay.

25 A. So I kept going to therapy and I kept

1 telling him I'm still having a lot of problems with
2 it. And my fingers would just turn blue and be ice
3 cold and it was real swollen. So then he -- that's
4 when he had to come in and tell me. He says, "I'm
5 going to have to put a prosthetic in. I can't --
6 that's the last thing I can do for you."

7 So he did that and I had to wait several
8 months before I could start therapy again because he
9 wanted it to heal real good. And I was going to
10 therapy and doing the therapy and everything and I
11 got this pain one day and I couldn't figure out what
12 the pain was from. So I called his office and I went
13 down there and he took an X-ray and it said that
14 nothing had showed up then, but he was going to treat
15 it as a stress fracture -- fracture. And I had to
16 come back and then it showed up on the X-ray, a
17 crack. And then the next time I came back it had
18 gone all the way through. And he told me the only
19 thing, if it didn't heal --

20 BY THE COURT

21 Q. Again, ma'am.

22 A. Oh.

23 Q. I know it's hard to not do that, but...

24 A. Well, from what I understand, if it didn't
25 heal, he'd have to put a screw in it. So then I went

1 to see one of their second opinions and he agreed
2 with the treatment I was getting.

3 Q. Now, did they put a screw in it?

4 A. No. He was trying not to because he knew
5 I had so many surgeries. As it was, he was trying to
6 avoid that. And he ordered that bone stimulator
7 because he said sometimes that will -- might help
8 heal it faster. But it took a long time. Took seven
9 months to get that. The last time I was in the
10 office he -- well, it's going to heal the best way it
11 can without it.

12 Q. Okay. What impact has that injury had on
13 your daily life?

14 A. A lot. I can't do anything. I've worked
15 since I was 13. So this is very hard for me. I
16 can't vacuum. I can't do nothing. I can't hardly
17 fold -- I can't fold clothes. I only got one hand I
18 can barely use because I can't lift this one
19 (indicating) up.

20 Q. When did you last work? You said after
21 the injury you worked for a period of time?

22 A. Yeah. Well, I would work as soon as the
23 doctor said I could go back to work. Then I would
24 work and then I guess the healing process and
25 everything took longer on this third one because the

1 rotator cuff. Then they -- I got a letter in the
2 mail saying they let me go.

3 Q. And you've not worked anywhere else since
4 then?

5 A. No. Nobody is going to hire me.

6 Q. How old are you, ma'am?

7 A. Sixty-five.

8 Q. And what's your education level?

9 A. High school.

10 Q. You graduated from high school?

11 A. Uh-huh.

12 Q. Any other training that you've had?

13 A. No.

14 Q. Any technical skills?

15 A. No.

16 Q. You know how to use a computer?

17 A. No.

18 Q. Anything else you want to tell me about
19 this accident?

20 A. It's just like I was knitting and I can't
21 knit because I can't get my hands to load the needles
22 to knit. It won't -- it hurts too much. It won't
23 stay good. So I can't do that anymore. I can't do
24 anything anymore.

25 THE COURT: All right. I'm going to let

1 Mr. Chase ask you some questions. Okay?

2 THE WITNESS: Okay.

3 THE COURT: Mr. Chase.

4 MR. CHASE: Great. Thank you,
5 Commissioner.

6 CROSS-EXAMINATION

7 BY MR. CHASE

8 Q. Ms. Brailsford, you remember when I took
9 your deposition. I think that was back in 2014?

10 A. Yeah. But like I told you, my medicines
11 and all, that my mind's a little foggy, so...

12 Q. Okay. Yes, ma'am. Do you remember you
13 had your deposition --

14 A. Yeah.

15 Q. -- taken at some point?

16 A. I remember that.

17 MR. CHASE: Sure. If I could approach the
18 witness, Commissioner, and hand her.

19 THE COURT: Yes, sir.

20 BY MR. CHASE

21 Q. This is a copy of a page from your
22 deposition transcript, Ms. Brailsford.

23 A. Oh. I don't have my glasses.

24 Q. Okay.

25 A. Can you give me my glasses? Thank you.

1 Q. Ms. Brailsford, on this Page 30, this is
2 your deposition transcript.

3 A. Uh-huh.

4 Q. If you could read Line 14 to the Court,
5 please.

6 A. It said --

7 Q. We were talking at that time about your --
8 you have a dog or had a dog, a half pit bull, half
9 Labrador; right?

10 A. Right.

11 Q. Okay. Yes, ma'am. If you could read,
12 please, the question there asked of you on Line 14.

13 A. "Did you ever take him on a leash through
14 and walk him?" I said no.

15 Q. Okay. Yes, ma'am. Thank you. And then
16 if you could please read the question that was asked
17 of you on Line 17 and then --

18 A. "Did you ever take him and walk him with a
19 leash with your left arm holding the leash?" I said
20 no.

21 Q. Okay. Yes, ma'am. And we have sent you
22 previously the surveillance video. Of course, that
23 was taken. And you agree it does show you walking
24 your dog more than one time and with the leash in the
25 left hand where you're pulling the dog; right?

1 A. No, not my -- I don't remember the left
2 hand.

3 Q. But you've seen the surveillance video;
4 right?

5 A. No. We couldn't get it to work.

6 Q. Okay. It was presented to Mr. Pope, your
7 attorney; right?

8 A. I guess so.

9 MR. CHASE: Okay. That's all I have on
10 that particular issue, Commissioner.

11 BY MR. CHASE

12 Q. Ms. Brailsford, I just have a few more
13 questions of you. Now, your work history includes
14 you worked at a candy counter at Sears and Roebuck at
15 one time; right?

16 A. Yeah, a long time ago.

17 Q. Okay. Yes, ma'am. And you worked at
18 Motorola where you pulled some radio parts for a
19 while?

20 A. Right.

21 Q. And then you worked at a Johnson and
22 Evinrude Outboard Motor --

23 A. Right.

24 Q. -- factory; right?

25 A. Right.

1 Q. Where you pulled some parts there. And
2 then you worked at Publix. That was your first
3 grocery store --

4 A. Right.

5 Q. -- right?

6 A. Uh-huh.

7 Q. And worked there about six years?

8 A. Right.

9 Q. And then you worked at Wal-Mart for about
10 five years?

11 A. Right.

12 Q. Okay. And then with my client at Piggly
13 Wiggly you worked about five years there, almost six
14 years, didn't you?

15 A. It was almost seven, I think.

16 Q. Almost seven?

17 A. Yeah.

18 Q. Okay. I don't want to take that from you.
19 Thank you --

20 A. That's okay.

21 Q. -- for that. Have you applied for any
22 work at all since Dr. Lee let you go on July 29th of
23 2014? That's when he discharged you.

24 A. No.

25 Q. Okay. So even back in that time frame you

1 didn't you apply for anything at all?

2 A. No.

3 Q. Okay. And you have not been back to
4 Dr. Lee for your left shoulder since he released you
5 July 29th of 2014; correct?

6 A. Right.

7 Q. And you no longer take any prescription
8 medicines for your left shoulder that were prescribed
9 by Dr. Lee at this time; correct?

10 A. Right.

11 Q. And Ms. Brailsford, you don't owe any
12 medical bills, do you, for any of the treatment that
13 was rendered to your left shoulder by Dr. Holmes,
14 Dr. Lee, Dr. Fowble who did a second opinion,
15 Dr. Hess who did the third opinion and all the
16 treatment at Newberry Physical Therapy; correct?

17 A. Correct.

18 MR. CHASE: Okay. Thank you, ma'am. I
19 appreciate it.

20 THE COURT: Ms. Brailsford, based on the
21 questions Mr. Chase just asked you, is there anything
22 else you'd like to add?

23 THE WITNESS: No. It's just that this is
24 very depressing for me and I'm on depression pills
25 now.

1 THE COURT: And who prescribed those?

2 THE WITNESS: Dr. Lovelace.

3 THE COURT: And is there any doctor's
4 opinion that relates that to this injury?

5 THE WITNESS: I think he does because he
6 knows I get upset about it all the time about the
7 injury.

8 THE COURT: Now, you indicated at the call
9 of the case -- you didn't indicate to me you were
10 seeking any benefits for that; is that correct?

11 THE WITNESS: No.

12 THE COURT: Okay. Anything else you'd
13 like to tell me?

14 THE WITNESS: No. I think that's it. Is
15 that it? I think so.

16 THE COURT: Okay. I'll allow you to step
17 down, ma'am.

18 THE WITNESS: Okay.

19 THE COURT: Back and sit beside your
20 husband.

21 (WITNESS EXCUSED.)

22 THE COURT: Mr. Chase, any witnesses on
23 behalf the defendants?

24 MR. CHASE: No witnesses, Your Honor.
25 None.

1 THE COURT: That will conclude this
2 proceeding.

3 (WHEREUPON, THE HEARING WAS CONCLUDED AT 3:35 P.M.)
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SKYLET KEAN (803) 609-0134
fttpam@aol.com

1 CERTIFICATE OF REPORTER

2
3 STATE OF SOUTH CAROLINA4 COUNTY OF RICHLAND
5

6 I, SKYLET KEAN, COURT REPORTER AND NOTARY
7 PUBLIC, FOR THE STATE OF SOUTH CAROLINA, DO HEREBY
8 CERTIFY THAT SAID HEARING TRANSCRIPT IS A
9 STENOGRAPHIC REPORT AND WAS TRANSCRIBED THROUGH
10 COMPUTER-AIDED TRANSCRIPTION; THAT THE FOREGOING
11 TRANSCRIPT CONTAINS A TRUE RECORD OF SAID HEARING.
12

13 I FURTHER CERTIFY THAT I AM NEITHER ATTORNEY
14 NOR COUNSEL FOR, NOR RELATED TO NOR EMPLOYED BY ANY
15 OF THE PARTIES CONNECTED TO THE ACTION, NOR AM I
16 FINANCIALLY INTERESTED IN THE ACTION.
17

18 WITNESS MY HAND AT COLUMBIA, SOUTH CAROLINA,
19 THIS 15TH DAY OF AUGUST 2016.
20
21

22
23 SKYLET KEAN, COURT REPORTER
24 NOTARY PUBLIC FOR THE STATE OF
25 SOUTH CAROLINA
MY COMMISSION EXPIRES: 07/30/2024

SKYLET KEAN (803) 609-0134
fttpam@aol.com

SOUTH CAROLINA WORKERS' COMPENSATION COMMISSION

W.C.C. FILE NO: 1019167

SEEAHRAY BRAILSFORD,

Employee,

Claimant,

vs.

PIGGLY WIGGLY CAROLINA COMPANY,
INC.,

Employer,

AND

CONSTITUTION STATE SERVICE
COMPANY AS TPA FOR GREENBAX
ENTERPRISE INC,

Carrier,

Defendants.

NOTICE OF WITNESSES AND
WRITTEN MEDICAL REPORTS TO BE
INTRODUCED AS DIRECT EVIDENCE
ON BEHALF OF DEFENDANTS

TO: SOUTH CAROLINA WORKERS' COMPENSATION COMMISSION AND
SEEAHRAY BRAILSFORD, CLAIMANT:

YOU ARE NOTIFIED that the Defendants, pursuant to the provisions of the South
Carolina Workers' Compensation Act and Section 1-23-330 of the South Carolina Code of Laws

(Cum. Supp. 1988) submit the following medical records and other documents as evidence:

APA#	NAME OF PROVIDER/OTHER	DATE(S) OF RECORD(S)	PAGE NUMBERS
1	Oscar F. Lovelace, Jr., M.D. Lisa Heichberger, M.D.	11/24/10 – 5/19/11	DEF 0001 – DEF 0045
2	S. Wendell Holmes, Jr., M.D. Moore Orthopaedics	2/7/11 – 10/27/11	DEF 0046 – DEF 0084

3	Physicians Health and Rehab	12/28/10 – 7/16/12	DEF 0085 – DEF 0090
4	Newberry Physical Therapy & Sports Medicine Clinic, Inc.	3/1/11	DEF 0091 – DEF 0167
5	John Clavet, M.D. Moore Orthopaedics	7/15/11	DEF 0168 – DEF 0173
6	David Lee, M.D. Carolina Orthopaedic & Sports Medicine, P.A. Southeastern Orthopaedic and Sports Medicine	12/6/11 – 7/29/14	DEF 0174 – DEF 0230
7	Imagecare	1/13/12	DEF 0231 – DEF 0234
8	Coleman Fowble, M.D. Midlands Orthopaedics, P.A.	9/12/12	DEF 0235 – DEF 0237
9	Ryan Hess, M.D.	2/20/14	DEF 0038 – DEF 0240
10	Jacquelyn F. Van Dam, M.D.	5/12/14	DEF 0241 – DEF 0244

EXHIBITS

APA#	EXHIBITS	DATE(S) OF RECORD(S)
A	Global Options Report and DVD	4/25/13 4/30/13
B	Deposition Transcript of Claimant	12/10/14
C	Form 70 Mediator Report	1/17/15
D	Letter from Thomas Pope III, Esquire	3/20/15
E	Form 70 Mediator Report <i>report has been requested and will be produced upon receipt</i>	6/13/16

YOU ARE FURTHER NOTIFIED that you have the right to cross-examine or otherwise oppose this evidence and, should you desire to exercise this right, you are to promptly schedule

the deposition of any provider whose records are submitted, for the purposes of cross-examination, or otherwise promptly submit opposing medical records into evidence.

YOU ARE FURTHER NOTIFIED that these records, or photocopies of the same, will be provided to the South Carolina Workers' Compensation Commission for insertion in their file and for consideration as evidence on behalf of the Defendants.

YOU ARE FURTHER NOTIFIED that the following witnesses may be called on behalf of the Defendants: None.

A handwritten signature in black ink, appearing to read "Michael E. Chase", is written over a horizontal line.

Michael E. Chase, Esquire
Samuel V. Priddy IV, Esquire
TURNER, PADGET, GRAHAM & LANEY, P.A.
P.O. Box 1473
Columbia, SC 29202
(803) 227-4241
Attorneys for the Employer/Carrier

Columbia, SC

July 22, 2016

Patient Chart

Brailsford, Seeahray

28093

Date Printed: 09/14/11

Sex: F Age: 60 years

DOB:

X-Ray / Ultrasound

Date: 12/28/10 : 11:28am

Title: MRI LEFT SHOULDER

Providers: OFL

PHYSICIANS HEALTH AND REHAB

MRI OF THE LEFT SHOULDER:

REASON FOR EXAM: Shoulder pain from lifting injury one month ago.

TECHNIQUE: MRI of the left shoulder was performed using multipulse sequences in multiple planes.

FINDINGS: There is a moderate amount of fluid seen in the subacromial/subdeltoid bursa. There is degenerative arthritis of the AC joint with some bridging inferior osteophyte formation and some lateral inferior acromial spur formation. There appears to be some fluid extending through a defect at the anterior aspect of the supraspinatus tendon. This is seen on sagittal images #10, #11, and #12 and is consistent with a full thickness tear of the anterior aspect of the rotator cuff. This tear is approximately 10-15 mm in its transverse dimension. The infraspinatus tendon remains intact but does show some mild stress related edema.

The subscapularis tendon is intact. The long head of the biceps tendon is intact and located within the bicipital groove. Glenoid labrum is intact.

IMPRESSION:

1. Full thickness tear of the anterior rotator cuff which appears to involve almost the entire supraspinatus tendon. The tendon tear measures approximately 10-15 mm in transverse dimension. Moderately advanced degenerative arthritis of the AC joint noted.

T. Daniel Silvester, MD

Received on 12/29/10

SIGNED BY JANA F LIVINGSTON (JFL) 12/30/2010 11:34AM
REVISED BY OSCAR F LOVELACE, JR, MD (OFL) 01/01/2011 09:50PM
REVISED BY OSCAR F LOVELACE, JR, MD (OFL) 01/07/2011 12:58AM

Printed using Practice Partner®

Patient Chart***Brailsford, Seeahray***Date Printed: 09/14/11
28093 Sex: F Age: 60 years
DOB:**Progress Notes****Date:** 01/17/11 : 04:36pm**Title:** Followup/ Workmans Comp**Providers:** OFL
Nurse WWC**Location:** Prosperity**Current Medications:****Rx:** LORTAB 5/500 mg 1-2tab QID prn, 40, Ref: 0**Allergies:**
NKDA**SUBJECTIVE:**

59 years old female presented 01/17/2011 for followup and recheck of arm after MRI of the left arm and OT consultation 3X/week for 2 weeks ordered 12/27/10

Last seen 12/27/2010 for recheck of left arm after returning to work. She stated she returned to work on 12/20/2010 and stated she continues to experience some soreness and pain from this arm. She stated she is required to lift heavy boxes up to 50lbs per box and is concerned she may restrain this arm.

KLB informed Mrs. Brailsford on 01/03/11 that her left shoulder MRI showed a full thickness tear of her rotator cuff. She stated that she had follow up appointment on 01/10/11 and she had not started PT yet.

She reported that she has not started PT as of 01/17/2011 due to workmans compensation being slow to approve.

She continues to experience pain in left shoulder rating pain a 8/10 and she reported she has only been taking Lortab on occasion because she does not like the way it makes her feel. She stated she feels like her shoulder is getting "ligher."

Her nurse case manager is Sherri McCormick and you can call her at 1-800-759-6194 Ext 3650 and her Fax number is 1-866-376-0394.

OBJECTIVE:**Bp:** 128/70, Left Arm, Pulse: 76, Regular
Temperature: 98.6 F, Oral
Respirations: 20**General :** Pleasant female in no physical distress**CV:** RRR without murmur**Lungs:** clear bilaterally**Ext:** No edema, peripheral pulses intact including the left radial pulse. There no persisting point tenderness at the insertion > the origin of the left biceps muscle but she has tenderness in the upper arm and mild point tenderness at the medial epicondyle of the left arm**Motor:** Normal strength in upper extremities except for weakness judged as 3/5 to flexion at the left shoulder and elbow. Near normal ROM of the left shoulder but with pain on internal rotation of the left shoulder .**Sensation:** intact to light touch throughout.**Mental Status:** alert and oriented to person, place and time.**Affect appropriate:** good judgement.**Skin:** No rash or prominent lesions noted

Printed using Practice Partner®

Patient Chart

Brailsford, Seeahray

28093

Date Printed: 09/14/11

Sex: F Age: 60 years

DOB:

ASSESSMENT/PLAN:

Major Problem: ROTATOR CUFF (CAPSULE) : 840.4

Injury at work 11/23/10 with popping sound in left upper arm while pulling out a tray of frozen pies

Presented 11/29/10 with purpura, swelling in the upper arm and 3/5 weakness to flexion at the left elbow and shoulder as well as coolness in the left hand as compared to the right with intact left brachial and radial pulse

MRI of the left upper extremity from shoulder to forearm ordered 11/29/10 to assess possible bicep tendon rupture

Lortab 5/500 1-2 po QID prn pain 11/29/10

Improved strength (4/5) and less swelling noted in the LUE 12/01/10 still advised to proceed with MRI and wear sling for comfort until she returns for follow up with work excuse until that time.

Partial muscle tear VS partial biceps tendon rupture most likely diagnosis as ecchymosis still persisting but strength much improved 12/13/10

She will try to resume work 12/20/10 and report if she cannot perform her duties.

Returned 12/27/10 with difficulty performing her duties at work thus given light duty for 2 weeks until MRI of the left arm and OT consultation 3X/week for 2 weeks ordered 12/27/10

MRI of the left shoulder 12/28/10 showed full thickness tear of the anterior rotator cuff which appears to involve almost the entire supraspinatus tendon. The tendon tear measures approximately 10-15 mm in transverse dimension. Moderately advanced degenerative arthritis of the AC joint noted.

Referred to Dr. Owens 01/17/11 for probable rotator cuff repair

Her nurse case manager, Rosalind Neel, RN came with her to her appointment and was given copies of her office visit 01/17/11 and MRI report from 12/28/10

HEALTH MAINTENANCE

CPE 11/10/10

Tetanus Injection Given 10/25/07

Colonoscopy: ordered 10/25/07- no record of being done 10/06/10

PAP: Last in 2000

Mammogram: Last in 2000

Bone dexta WNL 11/10/10

FOLLOW UP in May 2011 for Review of Chronic Problems with labs for BMP, CBC, UA(796.2), FLP:(272.0) after consultation with Dr. Owens for evaluation of left rotator cuff tear or sooner as needed

Mammogram ordered 10/06/10

Need records from ortho (PBJ-Dr. Sheenhan) 11/09/10

SIGNED BY OSCAR F LOVELACE, JR, MD (OFL) 01/17/2011 05:18PM

REVISED BY OSCAR F LOVELACE, JR, MD (OFL) 01/17/2011 05:22PM

Printed using Practice Partner®

Patient Chart

Brailsford, Seeahray

28093

Date Printed: 09/14/11
Sex: F Age: 60 years
DOB:

Letters

01/17/11

Dear Dr. Owens :

Thank you for seeing Seeahray Brailsford in reference to left rotator cuff tear.

Enclosed are pertinent records.

1. Most recent office note 01/17/11.
2. Most recent comprehensive physical 11/10/10.

We ask that all information regarding this patient be faxed to us at 803-364-1160. It is not necessary to mail a hard copy as long as all information is faxed.

Sincerely,

Oscar F. Lovelace, Jr., MD

Appointment Date and Time

Patient Chart

Brailsford, Seeahray

28093

Date Printed: 09/14/11
Sex: F Age: 60 years
DOB: ---

Letters

01/17/11

Seeahray Brailsford
322 Rice Road
Newberry, SC 29108

To whom it may concern,

Please allow Seeahray to perform light duty work by restricting her use of the left upper extremity. She should not lift over 3 pounds with her left arm as she has a torn rotator cuff by MRI 12/28/10.

Sincerely,

Oscar F. Lovelace, Jr., MD

Printed using Practice Partner®

Moore Orthopaedic Clinic Outpatient Surgery Center
104 Saluda Pointe Drive, Suite 200
Lexington, South Carolina 29072
(803) 227-8177 Phone / (803) 227-8036 Fax

03/09/2011

SEEAHRAY BRAILSFORD 306690

Lexington ASC

PREOPERATIVE DIAGNOSIS: 1. LEFT ROTATOR CUFF TEAR.

POSTOPERATIVE DIAGNOSIS: 1. LEFT ROTATOR CUFF TEAR, OBLIQUE, 2.5 CM
2. IMPINGEMENT
3. BICEPS TENDON TEAR/SUPERIOR LABRAL TEAR
4. AC JOINT ARTHRITIS

PROCEDURE:

1. ARTHROSCOPIC ROTATOR CUFF REPAIR, 2 ANCHORS, 1 CONVERGENCE SUTURE
2. ARTHROSCOPIC SUBACROMIAL DECOMPRESSION
3. ARTHROSCOPIC DEBRIDEMENT BICEPS TENDON TEAR AND UPPER LABRAL TEAR
4. ARTHROSCOPIC DISTAL CLAVICLE RESECTION

SURGEON:

Silas Wendell Holmes Jr., M.D.

ANESTHESIA:

General plus regional.

FLUIDS:

Crystalloid.

ESTIMATED BLOOD LOSS:

Minimal.

DRAINS:

None.

Moore Orthopaedic Clinic Outpatient Surgery Center
104 Saluda Pointe Drive, Suite 200
Lexington, South Carolina 29072
(803) 227-8177 Phone / (803) 227-8036 Fax

03/09/2011

SEEAHRAV BRAILSFORD 306690

Lexington ASC

COMPLICATIONS:

None.

DISPOSITION:

PACU, then home.

DESCRIPTION OF PROCEDURE IN DETAIL: After informed consent was obtained, the patient was brought to the operating room. General anesthesia was induced. The patient was placed in the right lateral decubitus position. The left shoulder was prepped and draped in the usual sterile fashion. A standard posterior portal was created with a #11 blade and a blunt trocar. An anterior portal was made in the rotator interval. The glenohumeral joint survey showed normal joint surfaces. The biceps tendon was torn about 2 cm from its insertion, so this was a complete tear with a large intraarticular stump. This was debrided with a shaver, and I had to use biters to morselize it to be able to shave it out. The upper labrum was torn. Upper flaps of that were debrided as well. There was a full thickness tear of the supraspinatus. I could see a rent into the subacromial space. The subscapularis was in good condition.

Continued

Moore Orthopaedic Clinic Outpatient Surgery Center
104 Saluda Pointe Drive, Suite 200
Lexington, South Carolina 29072
(803) 227-8177 Phone / (803) 227-8036 Fax

03/09/2011

SEEAHRAY BRAILSFORD 306690

Lexington ASC

PROCEDURE (Continued): The subacromial space was entered. A lateral portal was created. There was thickened bursal tissue throughout. A bursectomy was done. She had changes consistent with chronic impingement with erosion of the coracoacromial ligament and soft tissue under the anterior acromion. There was an oblique tear of the rotator cuff, but this was avulsed anteriorly and an oblique tear posteriorly. I performed an acromioplasty removing soft tissue from the undersurface of the acromion and using a burr to create a smooth flat undersurface. The burr was used to create a smooth flat undersurface of the acromion and remove osteophytes from the AC joint. The AC joint was arthritic. An anterior portal was made in the distal clavicle. A resection was done. This was started anteriorly, worked posteriorly, then lateral to medial creating about a 1 ½ cm interval between the distal clavicle and the acromion and leaving the superior joint capsule of the AC joint intact.

Attention was turned to the rotator cuff repair. The insertion site was denuded of soft tissue. A convergence suture was placed posteriorly. This was a side-to-side suture with #2 Ultrabraid. An anterolateral anchor was placed, and this was passed in a Matlock type pattern with an Elite-Pass, and then a posterolateral incision was made at the corners of the avulsion site. These were passed in a Matlock type pattern as well.

The sutures were then tied, first the convergence suture followed by the anterolateral and then the posterolateral sutures. This gave excellent watertight appearance. This was stable to visualization and probing. Fluid was suctioned from the joint. The portals were closed with nylon sutures. Sterile dressings were applied. The patient was discharged to PACU in stable condition.

S. Wendell Holmes, Jr. M.D.

CC List:

SWH:ats34

DD: 03/09/2011 DT: 03/11/2011 09:44:43

98456

This document was electronically authenticated by S. Wendell Holmes, Jr. M.D. on 03/11/2011 16:08:23.

Name: Brallsford, Seeahray
Acct#: 306690
Date: 7/11/2011



Age: 60 Years



ePrescribing

Moore Orthopaedics is in the process of implementing ePrescribing in each of our offices.

ePrescribing is a federally mandated initiative that requires all physicians prescribe in this manner by 2011.

ePrescribing software sends prescriptions over the internet to your pharmacy in a safe, secure way, through the same technology used by credit card companies. This helps protect the privacy of your personal information.

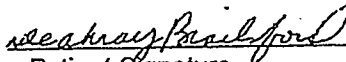
ePrescribing software also lets your doctor see important information - like drug interactions and your prescription history.

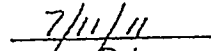
The benefit to you:

- Less confusion over handwritten prescriptions or unclear phone calls
- Reduced possibility of medical errors
- Less chance of adverse drug reactions
- Fewer trips to drop off at the pharmacy
- A safer, faster, easier way to get your prescription filled

Patient Consent

I agree that Moore Orthopaedics may request and use my prescription medication history from other healthcare providers or third party pharmacy benefit payors for treatment purposes.


Patient Signature


Date

DCN: 20110914270127701 Claim Number: ENH0532 Claimant Number: 001 Received Date: 3/30/2011 BCN: 0138168660

Moore Orthopaedic Clinic Outpatient Surgery Center
104 Saluda Pointe Drive, Suite 200
Lexington, South Carolina 29072
Phone / Fax

03/09/2011

SEEAHRAY BRAILSFORD 306690

Lexington ASC

INDICATIONS:

The patient is a 59-year-old female with left shoulder pain who requests a left interscalene nerve block for postop pain control.

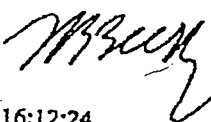
PLAN:

LEFT INTERSCALENE NERVE BLOCK

**DESCRIPTION
OF PROCEDURE:**

After informed consent and application of routine monitors, a moderate amount of IV sedation was administered and nasal cannula oxygen was applied. The skin above the collar bone was prepped in the usual fashion and 1 cc of 1% Lidocaine was used to infiltrate the skin. At which point, a 22-gauge B-Bevel block needle was introduced until adequate biceps twitches were elicited at 0.3 milliamps of current and 1 cc of 0.5% Ropivacaine was injected. The injection pressure was judged to be easy. The twitch was abolished. The patient reported no paresthesias and an additional 29 cc of 0.5% Ropivacaine was injected in divided doses. Towards the end of the injection, the patient became unresponsive and had some myoclonic movements of her feet. The injection was abruptly stopped. 100% oxygen was applied, the patient was hyperventilated and an additional 1 mg of Versed was injected IV. The patient's vitals were stable throughout. She was hyperventilated for a period of about two minutes, at which point, she was converted over to 100% non-breathing face mask, she regained consciousness shortly after placing her on face mask oxygen. The block set up adequately.

Robert Beesburg, M.D.



CC List:

RB:ats11

DD: 03/09/2011 DT: 03/09/2011 16:12:24
98026

DCN: 20110914270127701 Claim Number: ENH0532 Claimant Number: 001 Received Date: 3/30/2011 BCN: 0138168660

BRAUNSPORD, FEEAHRAY, MRN: 306690
 DOB: AGE: 59 F
 DOS: 03/09/2011
 DR: JAMES S. WENDELL

ants of Columbia, P.A.

MOORE
 Orthopaedics
 Outpatient Surgery Center

Continuous Anesthesia Start Time 1050	Continuous Anesthesia End Time 1212	Date 3/9/11
ASA 1 2 3 4 5 E	Surgeon Holmes	
Anesthetic: ☐ Local ☐ MAC	Anesthesiologist W. B. ...	
☐ General ☐ Spinal	CRNA Debra Edens	
☐ Type of Block	Diagnosis E50 Bradycardia	
ALLERGIES: 0	Procedure ESD Bradycardia	

TIME	1100	1130	1200	30	1300
Temp					
HR					
SpO2					
ETCO2					
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2720 Sunset Boulevard
West Columbia, SC 29169
803.791.2000

OPERATIVE REPORT

PATIENT: BRAILSFORD, SEEAHRAY	LOCATION: HIAA
ACCOUNT #: H00056629462	M.R. #: M000478745
ADMITTED: 02/15/12	D: 02/15/12 1209
DISCHARGED:	T: 02/15/12 1338
PHYSICIAN: LEE, DAVID K MD	DATE OF BIRTH:

DATE OF PROCEDURE: February 15, 2012.

PREOPERATIVE DIAGNOSIS(ES)

1. Left shoulder pain.
2. Failed distal clavicle excision with persistent acromioclavicular joint arthritis.

INTRAOPERATIVE FINDINGS

1. Failed rotator cuff repair with retraction to the glenoid.
2. Failed distal clavicle excision with persistent acromioclavicular joint arthritis.

PROCEDURE(S) PERFORMED

1. Left shoulder diagnostic and operative arthroscopy.
2. Left shoulder arthroscopic debridement of the labrum and greater tuberosity.
3. Mini-open revision rotator cuff repair.
4. Platelet-rich plasma injection into the rotator cuff repair site.
5. Open distal clavicle excision.

SURGEON: David Lee, MD.

ANESTHESIA: General endotracheal anesthesia.

ESTIMATED BLOOD LOSS: 5 cc.

COMPLICATIONS: None.

DRAINS AND PACKS: None.

DISPOSITION: To the Recovery Room and then discharged home.

TECHNIQUES OF SURGERY: After informed consent was obtained and the correct limb was identified, the patient was taken back to the Operating Room arena. After adequate general anesthesia was induced, the patient was intubated by the anesthesia staff without difficulty. One gram of Ancef was given intravenously. A timeout was taken at the point and the correct limb was confirmed and the checklist was reviewed. She was then positioned onto the operating table in the right lateral

OPERATIVE REPORT - H00056629462
PAGE 1 OF 2

decubitus position. Her left upper extremity was then prepped and draped in usual sterile fashion using DuraPrep. The left hand was placed in 10 pounds of in-line traction using the shoulder positioner. A standard posterior portal was then created with a #11 blade. The arthroscope and sheath were introduced into the glenohumeral joint and the above findings were identified. The massive tear was identified. Again, there was retraction of the glenoid surface. An anterolateral portal was then created. Using a full-radius shaver, the free edges of the rotator cuff as well as the greater tuberosity were all debrided back. Remaining suture material was all removed, and after discussing the findings with the family they consented to proceeding with the open rotator cuff repair and platelet-rich plasma injection.

Next, attention was focused to the mini-open. The anterolateral portal was then extended in a longitudinal fashion for a total of 4 cm. Dissection was carried down bluntly. The deltoid was then split in line with its fibers. The greater tuberosity was identified. This was prepared to a healthy bleeding bone bed using a high-speed bur. Next, the rotator cuff was mobilized without difficulty and was tagged with 0 Vicryl sutures for manipulation. Next, two Arthrex 4.5 mm Bio-Composite Corkscrew suture anchors were then placed. These sutures were then passed through the free edge of the rotator cuff in a modified Mason-Allen configuration. The wound was then copiously irrigated with normal saline. The rotator cuff was then held reduced and the sutures were tied with alternating half-knots. This provided for stable fixation of the rotator cuff. Next, attention was focused to the distal clavicle.

A 4 cm longitudinal incision was made over the AC joint and dissection was carried down bluntly. The deltotrapezial fascia was then split in line with its fibers. She still had significant osteophyte formation along the acromion as well as the distal clavicle. Using an oscillating saw, the distal 1 cm of the clavicle was excised. This was then smoothed using a rongeur on both the acromion as well as the clavicular surfaces. The wound was then copiously irrigated with normal saline. The deltotrapezial fascia was then repaired using 0 Vicryl in the interrupted mattress fashion. The subcutaneous layer was closed using 2-0 Vicryl and the skin was reapproximated using skin staple.

Next, platelet-rich plasma was injected along the rotator cuff repair site after the wound was irrigated with normal saline. The deltoid was then reapproximated using 0 Vicryl in the interrupted mattress fashion. Platelet-poor plasma was injected and then the subcutaneous layer was closed using 2-0 Vicryl. The skin was reapproximated using skin staples. A sterile Xeroform ABD dressing was applied throughout and this was all fixed with Hypafix tape. The posterior portal site was closed with 3-0 Nylon in simple fashion. The extremity was placed in an abduction pillow for comfort. She was awakened and extubated in the Operating Room and taken to the Recovery Room in stable condition with no apparent complications.

Electronically signed by
David K. Lee, MD 02/20/2012 03:03 P

David K. Lee, MD

cc: David K. Lee, MD

T: 02/15/2012 01:38 P/dnm

OPERATIVE REPORT - H00056629462
PAGE 2 OF 2

LEXINGTON MEDICAL CENTER

2720 Sunset Boulevard
West Columbia, SC 29169

ANATOMIC PATHOLOGY REPORT

Name : BRAILSFORD, SEEAHR AY Loc: HIAA Room:
Unit #: M000478745 Age: 60 Sex : F
Acct #: H00056629462 Doc:

Pat: BRAILSFORD, SEEAHRAY (M000478745) Age/Sex: F Loc: (HIAA)

CoPath COLL: 02/15/12 00:00 REC: 02/15/12 13:21 PHYS: Lee, David K., MD
Inpatient Surgical Pat Bone, fragments, other tha

(NOTE)

Patient Name: BRAILSFORD, SEEAHRAY
MR#: M000478745
Specimen #L12-2020
Date Finalled: 2/17/2012

Specimen(s) Received
Distal clavicle bone.

Clinical Information
Left shoulder pain. (pn)

Gross Description

Received is a 2.0 x 1.1 x 0.3 cm yellow-tan fragment of bone. This is totally submitted in one cassette for decal. WT:pn 02/15/12

Microscopic Description

The cartilage varies in thickness and shows areas of thinning and hypertrophy. Fissuring is also present. Some of the bone is osteopenic. The trabeculae are surrounded by mostly acellular marrow with areas of fat necrosis, organizing chronic granulation tissue, and cystic degeneration. Subchondral granulation tissue and osteoid production are noted. There is no evidence of osteomyelitis or malignancy.

Finding/Reviews/Notes:

Patient: H00056629462 BRAILSFORD, SEEAHRAY

Page 1 of 2

Diagnostic Opinion:

BONE (DISTAL CLAVICLE), EXCISION:
OSTEOARTHRITIC DEGENERATION AND OSTEOPENIA WITH REPARATIVE CHANGES.
(715.91)

EJM:pn 02/17/12 (CLAG)

END OF REPORT

Patient: H00056629462

BRAILS FORD, SEEAHRAY

Page 2 of 2



2720 Sunset Boulevard
West Columbia, SC 29169
803.791.2000

OPERATIVE REPORT

PATIENT: BRAILSFORD,SEEHARRY	LOCATION: HNT5P2
ACCOUNT #: H00061096970	M.R. #: M000478745
ADMITTED: 10/22/12	D: 10/22/12 0934
DISCHARGED: 10/24/12	T: 10/22/12 1011
PHYSICIAN: LEE,DAVID K MD	DATE OF BIRTH:

DATE OF PROCEDURE: October 22, 2012.

PREOPERATIVE DIAGNOSIS: Left rotator cuff arthropathy.

POSTOPERATIVE DIAGNOSIS(ES): Same.

PROCEDURES DONE

1. Left reverse total shoulder arthroplasty.
2. Left shoulder injection of platelet-rich plasma.

IMPLANTS: The DePuy Global XTEND reverse total shoulder, size 12 press fit humeral stem with a standard 38 plus 3 mm cup and a standard metaglene, all press fit.

SURGEON: David K. Lee, MD.

ANESTHESIA: General endotracheal anesthesia.

ESTIMATED BLOOD LOSS: 50 mL.

COMPLICATIONS: None.

DRAINS, PACKS: None.

DISPOSITION: To the Recovery Room and transferred to the floor.

TECHNIQUES OF SURGERY: After informed consent was obtained and the correct limb was identified, the patient was taken back to the Operating Room arena. After adequate general anesthesia was induced, the patient was intubated by the Anesthesia staff without difficulty. Ancef 1 gm was given intravenously. Timeout was taken at this point. Correct limb was confirmed. Checklist was reviewed. She was then positioned on the operating table in the supine position. Her left upper extremity was then prepped and draped in the usual sterile fashion using DuraPrep. A 6 cm longitudinal incision was made over the anterolateral aspect of the shoulder. Dissection was carried down using electrocautery Bovie. Full thickness skin flaps were then created. The interval between the anterior and lateral heads of the deltoid was then utilized. A small portion of the anterior acromion was osteotomized.

OPERATIVE REPORT
PAGE 1 OF 2

DEF 0190

DCN: WC1232503010397001 Claim Number: ENH0532 Claimant Number: 001 Received Date: 11/19/2012 BCN: 0147890237

Diagnostic Opinion:

BONE, LEFT SHOULDER, EXCISION:

- SEVERE DEGENERATIVE JOINT CHANGE.
- OSTEOPENIA.

JJV:sk 10/24/12 (CLAG)

END OF REPORT

Patient: H00061096970 BRAILSFORD,SEEHRAY

Page 2 of 2

LEXINGTON MEDICAL CENTER

2720 Sunset Boulevard
West Columbia, SC 29169

ANATOMIC PATHOLOGY REPORT

Name : BRAILSFORD, SEEAHR AY Loc: HNT5P2 Room: 589
Unit #: M000478745 Age: 61 Sex : F
Acct #: H00061096970 Doc: LEE, DAVID K MD

Pat: BRAILSFORD, SEEAHRAY (M000478745) Age/Sex: F Loc: 589 (DISC)

CoPath COLL: 10/22/12 00:00 REC: 10/22/12 10:37 PHYS: Lee, David K., MD
Inpatient Surgical Pat Humeral head, other than f

(NOTE)

Patient Name: BRAILSFORD, SEEAHRAY
MR#: M000478745
Specimen #L12-13282
Date-Finalled: 10/24/2012

Specimen(s) Received
Left shoulder bone

Clinical Information
Left shoulder osteoarthritis (bt)

Gross Description

Received is a portion of humeral head measuring 4.5 x 4.0 x 1.5 cm. The articular surface is focally roughened. The cut surface shows firm trabeculated marrow and is free of mass lesions. RS-2 for decal. TM:sk 10/22/12

Microscopic Description

Sections of left shoulder bone demonstrate fragments of articular cartilage and underlying medullary bone, including marrow. The cartilage shows severe degenerative joint change. The underlying marrow shows areas of hematopoiesis with apparent trilineage maturation. Further evaluation is precluded. The associated bony trabeculae appear thinned (osteopenic). No other abnormalities are identified.

Finding/Reviews/Notes:

Patient: H00061096970 BRAILSFORD, SEEAHRAY

Page 1 of 2

DEF 0192

DCN: WC1232503010379001 Claim Number: ENH0532 Claimant Number: 001 Received Date: 11/19/2012 BCN: 0147915596

Diagnostic Opinion:

BONE, LEFT SHOULDER, EXCISION:

- SEVERE DEGENERATIVE JOINT CHANGE.
- OSTEOPENIA.

JJV:sk 10/24/12 (CLAG)

END OF REPORT

Patient: H00061096970 BRAILSFORD,SEEAHRAY

Page 2 of 2



SE Orthopaedic and Sports Medicine
146 N Hospital Drive (LMP2)
West Columbia, SC 29169
(803) 936-7966

Patient: SEEAHRAY BRAILSFORD
322 RICE ROAD
NEWBERRY, SC 29108

DOS: 07/29/2014
DOB:
Gender: F
MR#: T386387
Provider: David K. Lee M.D.

History of Present Illness

Shoulder Problem: PATIENT IS HERE FOR RESULT OF FUNCTIONAL CAPACITY EXAM.

Physical Exam

Physical Exam: Exam of the LEFT shoulder demonstrates mild discomfort to palpation laterally. She has passive elevation to 150°. External rotation to 60°. Abduction to 80°. Neurovascular exam is normal.

Plan

Plan: Overall she is relatively comfortable from the LEFT reverse total shoulder arthroplasty. The FCE results were reviewed with the patient. At this point she has reached MMI. Referencing the fifth edition to the AMA guide, table 16-27 is a 24% impairment and an additional 4% impairment for the restricted range of motion. This equals a 28% impairment to the LEFT upper extremity. This equals a 46.7% impairment to the LEFT shoulder. We will defer to the FCE for the permanent restrictions. I will see her on a when necessary basis.

Signatures

Electronically signed by : David Lee, M.D.; Aug 17 2014 12:09PM EST



SE Orthopaedic and Sports Medicine
146 N Hospital Drive (LMP2)
West Columbia, SC 29169
(803) 936-7966

Patient: SEEAHRAY BRAILSFORD
322 RICE ROAD
NEWBERRY, SC 29108

DOS: 07/29/2014
DOB
Gender: F
MR#: T386387
Provider: David K. Lee M.D.

07/29/2014

SEEAHRAY BRAILSFORD IS UNDER MY MEDICAL CARE

DIAGNOSIS: []

THE PATIENT HAD AN APPOINTMENT IN THE OFFICE TODAY

She IS NOW ABLE TO RESUME LIGHT DUTY WORK ON 7/29/14

DEFER TO FCE

THE PATIENT HAS REACHED MAXIMUM MEDICAL IMPROVEMENT.

David Lee, MD

Electronically signed by : Tracy Pittman, ; Jul 29 2014 9:38AM EST

MIDLANDS ORTHOPAEDICS, P.A. • 1910 Blanding Street, COLUMBIA SC 29201-3520

**BRILSFORD, SHEEAHRAY (id #2068487, dob:
Encounter Summary****Patient**

Name BRILSFORD, SHEEAHRAY (61, F) ID# 2068487 Appt. Date/Time 09/12/2012 09:05AM

DOB**Provider**

COLEMAN FOWBLE, MD

Service Dept.

Blanding Street

Insurance

Med 0: ST PAULS TRAVELERS

Employer Name: GRREENBAX
ENTERPRISES

Case #: 026cbenh05832m

Case Injury Date : 11/23/2010

Prescription: SURESCRIPTS LLC - This

patient could not be found on the
payor's files. Either the patient is
ineligible or demographic information
included in the inquiry (e.g., member
ID) does not match the payor's files.**Chief Complaint**

Left Shoulder Pain

Patient comes in today for a second opinion on her left shoulder. Patient has previously seen Dr. David Lee for this matter.

Problems

- Rotator cuff syndrome of shoulder and allied disorders* (726.1)
- Complete rupture of rotator cuff (727.61)

Patient's Providers

Insurance Adjuster (Worker's Comp): INSEZ ERVIN: Ph (800) 759-6194, Fax (877) 389-4687

Medications

No medications reported

AllergiesReviewed allergy history (no data recorded) without changes
NKDA**Past Medical History**

Reviewed past medical history.

Surgical HistoryReviewed patient surgical history (as of 09/12/2012) without changes
• Shoulder Arthroscopy - 02/2012**Family History**

Reviewed family history (as of 09/12/2012) without changes

Mother - Arthritis

- Cancer

Father - Arthritis

- Cancer

Social History

Reviewed Social History & made changes

Ortho

Alcohol intake: None.

Marital status: Married.

Diet: Regular.

Chewing tobacco: none.

Cigar/Pipe Use: N.

Non-smoker.

Smoking Status: Never smoker.

Are you currently employed?: N.

Vitals

BP: 158/80

Ht: 5 ft 4 in

Wt: 189 lbs

MIDLANDS ORTHOPAEDICS, P.A. • 1910 Blanding Street, COLUMBIA SC 29201-3520

BRAILSFORD, SHEEHRAY (id #2068487, dob: .

BMI: 32.4

Pulse: 80 bpm

HPI

Shoulder

Reported by patient.

Hand Dominance: right

Location: left

Quality: aching; stabbing; throbbing; sharp; dull; worsening

Severity: pain level 8/10; worst pain 10/10

Duration: 2 years

Timing: abrupt

Context: work injury

Alleviating Factors: nothing helps

Aggravating Factors: standing

Associated Symptoms: numbness; tingling; swelling

Previous Surgery: surgical procedure: (Rotator cuff repair); date: (02/2012)

Prior Imaging: MRI

Previous Injections: none

Previous PT: helped a little

Work Related: yes

Working: no

Mrs. Brailsford is a right-hand-dominant 61-year-old female who had a left rotator cuff repair in March of 2011 after a Worker's Comp. injury. She had a very taut time initially with her rehabilitation. In February of 2012 she had a second open procedure by a different physician. He told her there was a lot of scar tissue and damage to the shoulder at that time. Again, she had a very difficult postoperative course and when she failed to respond a third MRI was done in July of this year. She has been told by Dr. David Lee that she needs a reverse total shoulder. She was sent here by Worker's Comp. for an independent medical evaluation. She complains of terrible range of motion and constant pain including significant pain at night.

ROS

Patient reports snoring.

Physical Exam

Patient is a 61-year-old female.

The left shoulder has no edema or swelling. Cervical spine is non-tender with full active ROM. There is no palpable cervical or supraclavicular adenopathy. There is no separation of the AC joint on observation, no palpable AC tenderness, and no pain with cross body abduction and manipulation of the AC joint. The patient has positive Hawkins and Neer impingement signs. There is mild tenderness over the biceps tendon proximally as well as the deltoid insertion. There is no obvious biceps rupture. The patient has active abduction approximately 80°, forward elevation approximately 100°, external rotation 30° with significant pain, and internal rotation to iliac crest at the mid axillary line. Passive ROM produces much less pain and mildly improved ROM. The contralateral side has full active and passive ROM. The rotator cuff has weakness with external rotation against resistance. Lift-off testing of subscapularis is negative. Apprehension testing shows no guarding to anterior translation of the humeral head with the shoulder abducted 90°. Patient has no visible sulcus sign. In the supine position, the patient has a negative Jobe relocation test. There are no clinical signs of instability. Radial pulse is palpable bilaterally. Radial, median, and ulnar nerves are intact grossly both sensory and motor. The ipsilateral elbow and wrist have full pain free ROM.

Results / Interpretations

EXTERNAL RESULT

I reviewed the MRI and the report from last July. She has a large supraspinatus tear with over 2 cm of retraction. There is also atrophy and fatty infiltration of the muscle belly.

Assessment / Plan

Unfortunately, this is not going to be a repairable lesion. With the atrophy and fatty infiltration there is no way to mobilize the tendon and it is essentially nonfunctional. At 60+ years of age with this much damage, I would think her best result will be with a reversed total shoulder. This we'll not give her normal function. However, it should give her good pain relief with some improvement in her range of motion. She will never been to do any significant overhead lifting with a reversed total shoulder. Also, she will probably be limited overall to about a 15 or 20 pound lifting limit.

1. COMPLETE RUPTURE OF ROTATOR CUFF (727.61)

2. ROTATOR CUFF SYNDROME OF SHOULDER AND ALLIED DISORDERS* (726.1)

Return to Office

None recorded.

Encounter Sign-Off

DEF 0237

MIDLANDS ORTHOPAEDICS, P.A. • 1910 Blanding Street, COLUMBIA SC 29201-3520

BRILSFORD, SHEEAHAY (id #2068487, dob:

Encounter signed-off by Coleman Fowble, MD, 09/12/2012.

Encounter performed and documented by Coleman Fowble, MD

Encounter reviewed & signed by Coleman Fowble, MD on 09/12/2012 at 9:43am

THE STATE OF SOUTH CAROLINA
In the Court of Appeals

APPEAL FROM THE SOUTH CAROLINA
WORKERS' COMPENSATION COMMISSION
APPELLATE PANEL

Appellate Case No. 2017-001027
W.C.C. File No. 1019167

RECEIVED
MAR 19 2018
SC Court of Appeals

Seeahray Brailsford, Employee, Claimant, ...Appellant,

v.

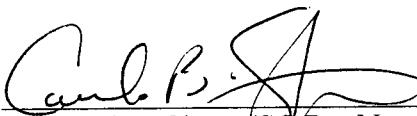
Piggly Wiggly Carolina Company, Inc., Employer, and Constitution
State Service Company as TPA for Greenbax Enterprise Inc., Carrier, ... Respondents.

CERTIFICATE OF COUNSEL

The undersigned hereby certifies that the Supplemental Record on Appeal
contains all material proposed to be included by any of the parties and not any other material.

March 19, 2018

By:



Michael E. Chase (SC Bar No. 15230)
Carmelo B. Sammataro (SC Bar No. 69746)
TURNER PADGET GRAHAM & LANEY, P.A.
Post Office Box 1473
Columbia, SC 29202
Phone: (803) 254-2200
Fax: (803) 799-3957

ATTORNEYS FOR RESPONDENTS