

THE STATE OF SOUTH CAROLINA
In The Court of Appeals

APPEAL FROM SOUTH CAROLINA
Workers' Compensation Commission

Appellate Case No. 2020-001220

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SC Court of Appeals

Paul Misuraca,

Employee, Respondent,

v.

Charleston County,

Employer,

&

SC Association of Counties SIF,

Carrier, Appellants.

RECORD ON APPEAL

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BEFORE THE SOUTH CAROLINA
WORKERS' COMPENSATION COMMISSION
WCC FILE NO. 1701642

Paul Misuraca,
Employee,
Claimant,

vs.

Charleston County,

and Employer,

SC Association of Counties SIF,

Carrier,
Defendants.

INTERIM ORDER

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 Deborah Hutto on June 27, 2019

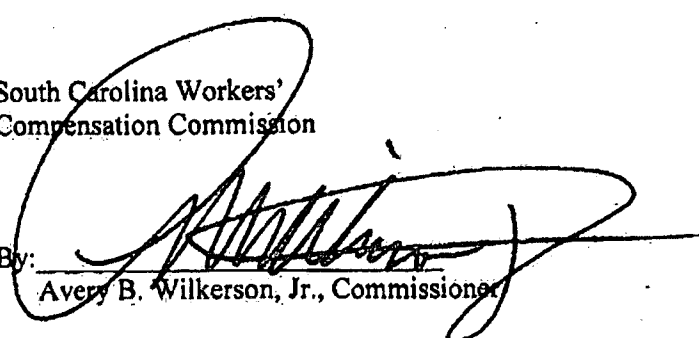
This case was scheduled for a hearing on June 24, 2019, at 10:15 A.M., in Mount Pleasant, South Carolina, before the undersigned Commissioner. The purpose of the hearing was to determine if employer/carrier may stop payment, and if so, to determine if claimant is entitled to any further benefits, and whether employer/carrier is entitled to a credit for payment of temporary benefits after the date of maximum medical improvement. At the time of the hearing, temporary compensation payments were not current. Therefore, the undersigned Commissioner issues the following Order:

NOW, THEREFORE, IT IS HEREBY ORDERED that Defendants shall become current on temporary total compensation payments and continue such payments until benefits can be suspended/terminated in accordance with the Act or by agreement of the parties;

IT IS FURTHER ORDERED that this case shall be reset for a hearing before the undersigned Commissioner on July 25, 2019, at 12:45 p.m. in Goose Creek, South Carolina;

AND IT IS SO ORDERED.

South Carolina Workers'
Compensation Commission

By: 

Avery B. Wilkerson, Jr., Commissioner

Dated: 6-27-2019
Columbia, South Carolina

BEFORE THE
SOUTH CAROLINA WORKERS' COMPENSATION COMMISSION

WCC FILE NO. 1701642

Paul Misuraca,	)
Employee,	)
Claimant,	)
	)
vs.	)
	)
Charleston County,	)
	)
Employer,	)
and	)
	)
SC Association of Counties SIF,	)
	)
Carrier,	)
Defendants.	)

DECISION & ORDER

HEARING:

Held in Goose Creek, South Carolina on July 25, 2019.

APPEARANCES:

Claimant represented by Catherine D. Meehan, Esquire of Charleston, South Carolina.

Defendants represented by William H. Lyon, Esquire of Willson Jones Carter & Baxley, P.A., Mount Pleasant, South Carolina.

PURPOSE OF HEARING:

To determine the issues as set forth on the Form 21.

DECISION AND ORDER:

By Avery B. Wilkerson, Jr., Commissioner

FILED:

November 25, 2019

I. APA SUBMISSIONS

Under the Administrative Procedures Act, the following records were submitted into evidence by the Defendants at the time of the hearing:

<u>APA/EXHIBIT</u>	<u>NAME OF PHYSICIAN/OTHER</u>	<u>DATE OF REPORT</u>	<u>PAGE</u>
APA #1	Carolina Center for Occupational Health	2/16/2017 – 2/19/2019	1 – 21
APA #2	Dr. William S. Corey - LowCountry Orthopedics	3/3/2017 – 3/21/2017	22 – 36
APA #3	Imaging Reports	2/28/2017 – 4/24/2018	37 – 40
APA #4	Dr. Chris Kestner-SC Orthopedics & Sports Med.	8/1/2018 – 5/18/2019	41 – 52
EXH A	Letter of Resignation	2/19/2019	53
EXH B	Accident/Injury Report	2/16/2017	54 – 58
EXH C	SCWCC Form 17	2/12/2017	59 – 60
EXH D	Correspondence re: 2 nd Opinion	6/27/2018	61

¹Under the Administrative Procedures Act, the following records were submitted into evidence by the Claimant at the time of the hearing:

<u>APA/EXHIBIT</u>	<u>NAME OF PHYSICIAN/OTHER</u>	<u>DATE OF REPORT</u>	<u>PAGE</u>
APA #5	Dr. William Corey- Lowcountry Orthopaedics	4/18/17-5/7/18	62-116
APA #6	Island P.T., LLC	3/5/18	117-118
APA #7	Dr. Christopher Kestner- SC Sports Med. & Ortho.	9/27/18-1/4/19	119-135
APA #8	Dr. Bright McConnell, III Charleston Sports Medicine	6/3/19	136-140
APA #9	Tri-County Radiology North Charleston	4/13/18	141-142
EXH E	County of Charleston – Personnel Records	Various	176-195
EXH F	Paul Misuraca – Pictures		196-198

II. STIPULATIONS

Counsel for the respective parties stipulated at the time of the hearing to the following issues:

1. That the Claimant's accident occurred on February 16, 2017;
2. The Claimant's average weekly wage was \$1,144.26 with a corresponding compensation rate of \$762.88;
3. Notices were timely and properly served upon all parties of interest;
4. Venue, set in Berkeley County, is proper as agreed by all parties;

¹ During the pre-hearing conference Claimant withdrew APA submissions #10-11 (pages 143-175) and Exhibit "G" (pages 199-206).

5. That the South Carolina Workers' Compensation Commission has jurisdiction over the parties and issues involved;
6. Claimant reached maximum medical improvement for his admitted left ankle injury on February 8, 2019;

Without objection, the Commission's file was made a part of the record in this matter with the exception of any self-serving declaration or unstipulated medical reports.

III. STATEMENT OF THE CASE

A hearing in this matter was held before the undersigned Commissioner on July 25, 2019, pursuant to Defendants Form 21 hearing request. Defendants admitted an injury to the left ankle and denied all other alleged injuries. Defendants asserted that Claimant reached maximum medical improvement on February 8, 2019, and requested an order stopping temporary total compensation benefits. Defendants further sought a determination of permanent disability compensation as well as a credit for temporary total compensation paid after Claimant reached maximum medical improvement on February 8, 2019. Defendants took the position that Claimant's permanent disability did not exceed the impairment rating assigned by the authorized treating physician, and that his inability to work was due to pre-existing conditions unrelated to the February 16, 2017 workplace accident.

Defendants further requested the Hearing Commissioner determine whether Claimant sustained compensable injuries to his back and depression as these injuries were alleged in Claimant's Form 50, dated May 31, 2019, as well as Claimant's Form 58-Pre-Hearing Brief. During the pre-hearing discussion, Claimant withdrew his claim for benefits with regard to the alleged back and depression injuries without prejudice.

Claimant admitted he reached maximum medical improvement on February 8, 2019 for the

admitted left ankle injury. Claimant contended that his disability for the left ankle was much greater than the impairment rating assigned by the authorized treating physician, Dr. Kestner, as he was not cleared to return to work after a fit for duty evaluation by authorized treating physician, Dr. Barry Weissglass. Claimant further maintained that Defendants were only entitled to a credit for TTD benefits back to July 3, 2019, when TTD payments were made current and not back to the date of maximum medical improvement as TTD benefits were stopped improperly in February 2019.

Claimant asserted that testimony should be limited to the left leg injury as that was the only admitted body part and Defendants requested a hearing "to determine PPD and address termination of temporary disability payments." Defendants objected to any limitation of Claimant's testimony.

IV. EVIDENCE OF THE CASE

The Claimant is 60 years old. He is married with six children. He has an Associates degree and served six years in the Army and twenty years in the Navy Reserve. He retired from the military in 2015. Claimant testified the majority of his work experience is in law enforcement, and he has worked for the Charleston County Sheriff's office in various capacities the last 35 years. (H.T. p. 25-26)

At the time of the February 16, 2017 workplace accident, Claimant was performing security in the family courts for Charleston County. His job duties included standing, restraining persons, if necessary, and protection of courtroom personnel. (H.T. p. 26) Claimant testified he did not have any problems with his left ankle prior to the February 2017 workplace accident and was able to perform all the physical requirements of his job. (H.T. p. 28).

Claimant was injured on February 16, 2017, during an altercation with another individual. Specifically, Claimant fell while restraining the suspect. He felt immediate pain in his left leg when he stood up and noticed his left ankle was swollen (H.T. p. 28). Claimant was initially seen at

Charleston Center of Occupational Health (CCOH) for medical treatment. (H.T. p. 29). He was subsequently referred to Dr. William Corey at LowCountry Orthopedics for further treatment. (H.T. p. 30).

Claimant had pain and swelling in his left ankle when initially saw Dr. Corey on March 3, 2017 (H.T. p. 30). Dr. Corey placed Claimant out of work. (H.T. p. 32) After eight months of asking about surgery, Claimant finally underwent surgery on his left ankle with Dr. Corey on November 7, 2017. The surgical procedure performed was a repair of nonunion left distal fibula and small bone grating from calcaneus. (APA #5) Claimant continued to have pain in his left ankle after surgery and could not stand on his left leg. (H.T. p. 35) Claimant requested a second opinion evaluation because of his continued pain in the left ankle and inability to bear weight. (H.T. p. 36)

Dr. Chris Kestner performed at second opinion evaluation. Claimant wanted to see Dr. Kestner for a second opinion as he believed Dr. Kestner was one of the best doctors in town; however, he testified he was not fully pleased with the care he received from Dr. Kestner. (H.T. p. 47-48) Claimant continued to have pain and was unable to bear weight when seen by Dr. Kestner. (H.T. p. 37) Dr. Kestner recommended removal of the prior surgical hardware. On September 27, 2018, Dr. Kestner performed hardware removal, excision of nonunion and repair of lateral ligaments surgery on Claimant's left ankle. Dr. Kestner removed the prior hardware, but implanted new hardware in the left ankle, specifically, a Smith & Nephew 3.5mm suture anchor (APA #7) After surgery, Claimant went through a course of physical therapy but continued to have difficulty walking post surgery. (H.T. p. 38) Claimant was released from treatment by Dr. Kestner in February 2019. (H.T. p. 38) According to Dr. Kestner's February 8, 2019 medical note, Claimant reported no issues or limitations as far as his ankle was concerned. (APA p. 46) However, Claimant did not recall making such statements to Dr. Kestner. (H.T. p. 46)

Claimant was seen by Dr. Bright McConnell for an independent medical evaluation on June 3, 2019 (APA #8). Claimant testified, at the time he saw Dr. McConnell, he could not fully walk and could not run because putting his full weight on the left ankle caused pain in the heel area of his left foot and on top and on the sides of his left foot. (H.T. p. 39-40) Claimant testified he limps as a result of not being able to fully bear weight on the left leg. Dr. McConnell noted in his report the Claimant has some occasional soreness along the distal fibular, stiffness in his ankle, but no instability or giving way. (APA #8). Dr. McConnell's note also indicates Claimant walked with a nonantalgic gait pattern. (APA #8) Claimant stated that he developed a limp after being seen by Dr. McConnell. (H.T. p. 50) In his report, Dr. McConnell noted the Claimant had not returned to work as a deputy sheriff, secondary to disability retirement through the VA. (APA 8) Claimant did not receive medical treatment from the VA Hospital for his work-related ankle injury and is not receiving VA disability benefits for his ankle. (H.T. p. 52)

Claimant was also seen by Dr. Barry Weissglass for a fit for duty evaluation on February 19, 2019. (H.T. p. 41; APA # 1) Claimant understood that he could not return to work and perform the duties of a police officer because he could not run or jump so he would be unable to run after suspects, run in emergency situations, fight with someone like he did at the time of this injury. (H.T. p. 42) Dr. Weissglass's February 19, 2019 note states: "Work Related?: Yes Work Status/Fitness for Duty: unable to work due to work related injury." (APA #1, p. 20.) Further, Dr. Weissglass noted "it is unlikely that he would be able to tolerate the stresses that would be placed on his ankle in the performance of his duty." Claimant discussed other health conditions, aside from his left ankle injury, which impacted his ability to work when seen by Dr. Weissglass, but his fit for duty evaluation was only for his left ankle and Dr. Weissglass indicated he was unable to work due to his work-related injury. (H.T. p. 64-65)

Claimant continues to have daily pain in his left ankle. (H.T. p. 43) He has pain in his heel and on the top of his foot. (H.T. p. 43.) He has pulsing pain when walking a little or when laying in bed. (H.T. p. 43) Claimant testified he “really can’t do nothing.” He lives with the pain now, and he cannot walk as far as he used to, cannot run, cannot lift, cannot jump, and has more pain in his ankle now than when he was in therapy and using a scooter post surgery. (H.T. p. 44) Claimant testified he does not believe he can return to his job as a deputy because he cannot run, jump, or safely perform his job duties, which could risk his safety or others’ safety. (H.T. p. 45) Claimant is not taking any prescription medications for his left ankle injury, but he takes Ibuprofen or Aleve as needed. (H.T. p. 50)

Claimant resigned from Charleston County on February 19, 2019, the same date Dr. Weissglass did not clear Claimant to return to work as a result of his work-related left ankle injury. (H.T. p. 50, 59-60, 65; APA #1, p. 20) Claimant submitted a letter of resignation but did not see any need to mention in the letter he could not perform the functions of his job due to his ankle injury. (H.T. p. 51) Claimant applied for Social Security Disability benefits prior to his resignation from Charleston County. (H.T. p. 53). Claimant stated he is currently receiving Social Security Disability benefits for his left ankle and it could be for his migraines, back injury, depression, hearing loss, anxiety, panic attacks, and left knee as well. (H.T. p. 53) Claimant was approved and began receiving social security disability benefits prior to his resignation from Charleston County. (H.T. p. 58)

A record such as was necessary for a decision was made of the proceeding and after careful consideration and study of all the evidence, the following findings of fact are accordingly made.

V. FINDINGS OF FACT

IT IS FOUND AS A FACT:

1. The Hearing Commissioner issued instructions to the parties for preparing a proposed

Decision and Order on August 7, 2019.

2. That Employee, Employer, and Carrier are subject to and bound by the terms and provisions of the South Carolina Workers' Compensation Act, as amended, with Paul Misuraca as Employee-Claimant and Charleston County as Employer and SC Association of Counties SIF as Carrier, Defendants.
3. That Claimant's average weekly wage is \$1,144.26, resulting in a compensation rate of \$762.88.
4. That Claimant was an employee of the above-named Employer on and prior to February 16, 2017, on which date he did sustain a compensable injury by accident to the left ankle arising out of and in the course of his employment, and proper notice was given to Employer.
5. That this is a WCC Form No. 21 hearing only. On the Form 21, Defendants requested a hearing only to determine permanent partial disability to the admitted left leg and address termination of temporary total disability benefits.
6. That a hearing was scheduled on June 24, 2019. Claimant objected to the hearing going forward as temporary total disability benefits were not current and had been terminated without authorization. An interim order was issued on June 27, 2019 ordering Defendants to become current with temporary total disability benefits and rescheduling the hearing for July 25, 2019. Defendants complied with the Order and brought Claimant up to date on temporary total disability benefits at the time of the hearing on July 25, 2019.
7. That Claimant is presently receiving temporary total compensation and payments are up to date.
8. That Defendants requested the Hearing Commissioner to address whether Claimant sustained compensable injuries to the back and depression as alleged in Claimant's Form 50

and Claimant's Form 58-Pre-Hearing Brief. This was a Form 21 hearing only to address only the single member, the left leg and left ankle. See Russell v. Walmart Stores, Inc., Op. No. 27875 (S.C. April 3, 2019) and Tucker v. SCDOT, Op. No. 27906 (S.C. July 24, 2019).

9. That during the pre-hearing conference, Claimant withdrew his claim for benefits for the alleged and denied back and depression injuries without prejudice. Claimant also withdrew APA submissions #10 and #11 as well as Exhibit "G" Defendants objected to the Claimant amending his pre-hearing brief and withdrawing the alleged back and depression injuries. However, the hearing Commissioner allowed the hearing to go forward on Defendants Form 21 only, addressing only those issues pled on the Form 21, dated May 1, 2019, and the Defendants' Form 58, Prehearing Brief – determination of permanent partial disability to the admitted left leg and left ankle only and termination of temporary total disability benefits.
10. That Claimant is a 35 year employee of Charleston County. He Served in the military and spent 6 years in the Army and 16 years in the Navy. He served in Iraq. He is honest.
11. That Claimant underwent two surgeries on his left ankle and has retained hardware in the left ankle and is entitled to lifetime repair/replacement of the retained left ankle hardware.
12. That the authorized treating physician, Dr. Christopher Kestner, placed Claimant at maximum medical improvement on February 8, 2019. By WCC Form No. 14B, dated March 30, 2019, he assigned a 5% impairment to the left leg/2% whole person impairment. Dr. Kestner released Claimant to work with no restrictions.
13. That Claimant was seen by Dr. Bright McConnell on June 3, 2019 for an independent medical evaluation. Dr. McConnell also determined Claimant had reached maximum medical improvement and assigned a 10% impairment to the left leg/4% whole person.
14. That Claimant reached maximum medical improvement for the left leg and left ankle on

- February 8, 2019, as indicated by the medical reports in the records and stipulated by counsel.
15. That based on the greater weight of the evidence all ratings were taken into consideration. They don't indicate the true disability. Claimant's testimony represents a clear view of his actual disability. Claimant has limitations walking, running, moving, and daily limitations.
 16. That Claimant is entitled to 48.75 weeks of permanent partial disability compensation at the rate of \$762.88, representing twenty five percent (25%) permanent partial disability to the left leg, as a result of the February 16, 2017 workplace accident.
 17. Defendants are entitled to a credit for the overpayment of temporary total compensation since July 3, 2019, the date that temporary total compensation was brought current and reinstated, against the award for permanent partial disability ordered herein.
 18. That there is no evidence in the record that any additional medical treatment would tend to lessen the period of Claimant's disability. Claimant has retained hardware in the left ankle and is entitled to lifetime repair/replacement of the surgical hardware.

VI. CONCLUSIONS OF LAW

Accordingly, as provided in § 42-17-40, SC Code Ann. (1976), as amended, it is the determination of this Commission that:

1. Under § 42-1-130, Claimant was a covered employee at the time in question; and under § 42-1-140, Defendant/Employer was a covered employer under the Act.
2. Under § 42-1-160, Claimant did sustain an injury to his left ankle by accident arising out of and in the course and scope of his employment on February 16, 2017.
3. Under §§ 42-9-10 and 42-1-120, Claimant was entitled to receive temporary total disability benefits.
4. Under § 42-9-260, the Defendants terminated temporary total disability benefits without

authorization in February 2019; however, Defendants are not assessed as penalty for improperly terminating benefits as benefits were brought current.

5. Under § 42-15-60, Claimant was entitled to medical, surgical, hospital and other authorized treatment until February 8, 2019, the date on which Claimant reached maximum medical improvement for his left ankle and left leg, but not thereafter, there being no evidence that any additional medical treatment would tend to lessen the period of his disability.
6. Under § 42-15-60, Claimant is entitled to lifetime repair/replacement of the surgical hardware in his left ankle.
7. Under § 42-9-30, Claimant has sustained twenty five (25%) permanent partial disability to the left leg. From such award, Defendants are entitled to a credit for the overpayment of temporary total compensation since July 3, 2019.

VII. ORDER/AWARD

IT IS HEREBY ORDERED that Claimant reached maximum medical improvement for his left leg on February 8, 2019 and Defendants are entitled to stop payment of temporary total benefits;

IT IS FURTHER ORDERED that as a result of Claimant's accidental injury occurring on February 16, 2017, he has sustained twenty five (25%) permanent partial disability to the left ankle, for which he is entitled to 48.75 weeks of compensation, at the compensation rate of \$762.88 per week;

IT IS FURTHER ORDERED that Defendants are entitled to a credit or offset for temporary total compensation paid since July 3, 2019;

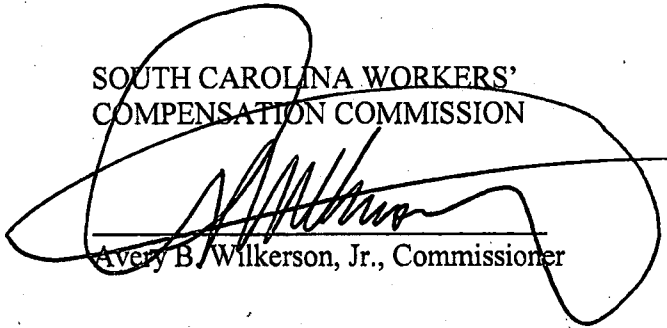
IT IS FURTHER ORDERED that Claimant reached maximum medical improvement for the left leg on February 8, 2019, and as such Defendants are not liable for any additional medical,

surgical, hospital or other medical treatment for Claimant's left leg after said date with the exception of the retained surgical hardware in Claimant's left ankle for which Defendants are responsible for lifetime maintenance/replacement;

No hearing costs are assessed in this instance.

IT IS SO ORDERED.

SOUTH CAROLINA WORKERS'
COMPENSATION COMMISSION



Avery B. Wilkerson, Jr., 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 Deborah Hutto on November 25, 2019

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

WCC FILE NO.:1701642

PAUL MISURACA, Employee/Claimant,

Respondent

vs.

CHARLESTON COUNTY, Employer/Defendant

and

**SC ASSOCIATION OF COUNTIES SIF,
Carrier/Defendant.**

Appellants

**Appellate Panel Review
Columbia, South Carolina
March 16, 2020**

**Appellate Panel Decision and Order filed
on August 3, 2020.**

**Catherine D. Meehan, Esquire, of Steinberg Law Firm, L.L.P., on behalf of
Claimant/Respondent.**

**William H. Lyon, Esquire, of Willson Jones Carter & Baxley, P.A., on behalf of
the Defendants/Appellant.**

STATEMENT OF THE CASE

This claim was heard by Commissioner Avery B. Wilkerson, Jr. on July 25, 2019 in Goose Creek, South Carolina. On November 25, 2019, Commissioner Wilkerson made the following findings of facts and conclusions of law and issued the following order:

FINDINGS OF FACT

IT IS FOUND AS A FACT:

1. The Hearing Commissioner issued instructions to the parties for preparing a proposed Decision and Order on August 7, 2019.
2. That Employee, Employer, and Carrier are subject to and bound by the terms and provisions of the South Carolina Workers' Compensation Act, as amended, with Paul Misuraca as Employee-Claimant and Charleston County as Employer and SC Association of Counties SIF as Carrier, Defendants.
3. That Claimant's average weekly wage is \$1,144.26, resulting in a compensation rate of \$762.88.
4. That Claimant was an employee of the above-named Employer on and prior to February 16, 2017, on which date he did sustain a compensable injury by accident to the left ankle arising out of and in the course of his employment, and proper notice was given to Employer.
5. That this is a WCC Form No. 21 hearing only. On the Form 21, Defendants requested a hearing only to determine permanent partial disability to the admitted left leg and address termination of temporary total disability benefits.
6. That a hearing was scheduled on June 24, 2019. Claimant objected to the hearing going forward as temporary total disability benefits were not current and had been terminated without authorization. An interim order was issued on June 27, 2019 ordering Defendants to become current with temporary total disability benefits and rescheduling the hearing for July 25, 2019. Defendants complied

with the Order and brought Claimant up to date on temporary total disability benefits at the time of the hearing on July 25, 2019.

7. That Claimant is presently receiving temporary total compensation and payments are up to date.

8. That Defendants requested the Hearing Commissioner to address whether Claimant sustained compensable injuries to the back and depression as alleged in Claimant's Form 50 and Claimant's Form 58-Pre-Hearing Brief. This was a Form 21 hearing only to address only the single member, the left leg and left ankle. See Russell v. Walmart Stores, Inc., Op. No. 27875 (S.C. April 3, 2019) and Tucker v. SCDOT, Op. No. 27906 (S.C. July 24, 2019).

9. That during the pre-hearing conference, Claimant withdrew his claim for benefits for the alleged and denied back and depression injuries without prejudice. Claimant also withdrew APA submissions #10 and #11 as well as Exhibit "G" Defendants objected to the Claimant amending his pre-hearing brief and withdrawing the alleged back and depression injuries. However, the hearing Commissioner allowed the hearing to go forward on Defendants Form 21 only, addressing only those issues pled on the Form 21, dated May 1, 2019, and the Defendants' Form 58, Prehearing Brief – determination of permanent partial disability to the admitted left leg and left ankle only and termination of temporary total disability benefits.

10. That Claimant is a 35 year employee of Charleston County. He Served in the military and spent 6 years in the Army and 16 years in the Navy. He served in Iraq. He is honest.

11. That Claimant underwent two surgeries on his left ankle and has retained hardware in the left ankle and is entitled to lifetime repair/replacement of the retained left ankle hardware.

12. That the authorized treating physician, Dr. Christopher Kestner, placed Claimant at maximum medical improvement on February 8, 2019. By WCC Form No. 14B, dated March 30, 2019, he assigned a 5% impairment to the left leg/2% whole person impairment. Dr. Kestner released Claimant to work with no restrictions.

13. That Claimant was seen by Dr. Bright McConnell on June 3, 2019 for an independent medical evaluation. Dr. McConnell also determined Claimant had reached maximum medical improvement and assigned a 10% impairment to the left leg/4% whole person.

14. That Claimant reached maximum medical improvement for the left leg and left ankle on February 8, 2019, as indicated by the medical reports in the records and stipulated by counsel.

15. That based on the greater weight of the evidence all ratings were taken into consideration. They don't indicate the true disability. Claimant's testimony represents a clear view of his actual disability. Claimant has limitations walking, running, moving, and daily limitations.

16. That Claimant is entitled to 48.75 weeks of permanent partial disability compensation at the rate of \$762.88, representing twenty five percent (25%) permanent partial disability to the left leg, as a result of the February 16, 2017 workplace accident.

17. Defendants are entitled to a credit for the overpayment of temporary total compensation since July 3, 2019, the date that temporary total compensation was brought current and reinstated, against the award for permanent partial disability ordered herein.

18. That there is no evidence in the record that any additional medical treatment would tend to lessen the period of Claimant's disability. Claimant has retained hardware in the left ankle and is entitled to lifetime repair/replacement of the surgical hardware.

CONCLUSIONS OF LAW

Accordingly, as provided in § 42-17-40, SC Code Ann. (1976), as amended, it is the determination of this Commission that:

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

2. Under § 42-1-160, Claimant did sustain an injury to his left ankle by accident arising out of and in the course and scope of his employment on February 16, 2017.

3. Under §§ 42-9-10 and 42-1-120, Claimant was entitled to receive temporary total disability benefits.

4. Under § 42-9-260, the Defendants terminated temporary total disability benefits without authorization in February 2019; however,

Defendants are not assessed as penalty for improperly terminating benefits as benefits were brought current.

5. Under § 42-15-60, Claimant was entitled to medical, surgical, hospital and other authorized treatment until February 8, 2019, the date on which Claimant reached maximum medical improvement for his left ankle and left leg, but not thereafter, there being no evidence that any additional medical treatment would tend to lessen the period of his disability.

6. Under § 42-15-60, Claimant is entitled to lifetime repair/replacement of the surgical hardware in his left ankle.

7. Under § 42-9-30, Claimant has sustained twenty five (25%) permanent partial disability to the left leg. From such award, Defendants are entitled to a credit for the overpayment of temporary total compensation since July 3, 2019.

ORDER/AWARD

IT IS HEREBY ORDERED that Claimant reached maximum medical improvement for his left leg on February 8, 2019 and Defendants are entitled to stop payment of temporary total benefits;

IT IS FURTHER ORDERED that as a result of Claimant's accidental injury occurring on February 16, 2017, he has sustained twenty five (25%) permanent partial disability to the left ankle, for which he is entitled to 48.75 weeks of compensation, at the compensation rate of \$762.88 per week;

IT IS FURTHER ORDERED that Defendants are entitled to a credit or offset for temporary total compensation paid since July 3, 2019;

IT IS FURTHER ORDERED that Claimant reached maximum medical improvement for the left leg on February 8, 2019, and as such Defendants are not liable for any additional medical, surgical, hospital or other medical treatment for Claimant's left leg after said date with the exception of the retained surgical hardware in Claimant's left ankle for which Defendants are responsible for lifetime maintenance/replacement;

No hearing costs are assessed in this instance.

IT IS SO ORDERED.

The Defendants/Appellants filed a WCC Form No. 30, Request for Commission Review, on December 6, 2019 asserting nine (9) grounds for review. The Defendants/Appellants asserted the Hearing Commissioner erred as a matter of law in allowing Claimant/Respondent to amend his Form 58 Pre-Hearing Brief at the time of the hearing and in permitting Claimant/Respondent to withdraw his claim for benefits with regard to the alleged back and depression injuries at the time of the hearing. The Defendants/Appellants contended the Hearing Commissioner erred as a matter of fact and law in finding the only issues for determination at the hearing were termination of temporary total disability benefits and permanent partial disability to the left ankle. The Defendants/Appellants contended the Hearing Commissioner erred as a matter of law and fact by limiting the scope of cross-examination to Claimant's left ankle injury thereby violating Defendants' due process rights. The Defendants/Appellants asserted the Hearing Commissioner erred as a matter of law and fact in finding Claimant sustained twenty-five percent (25%) permanent partial disability to the left leg and in finding that Defendants were only entitled to a credit for temporary total disability benefits paid since July 3, 2019 as opposed to the date of maximum medical improvement on February 8, 2019. Finally, the Defendants/Appellants asserted the Hearing Commissioner erred as a matter of law and fact by issue a decision and directives for a proposed order without reviewing or considering Defendants' APA and evidentiary submissions.

In response to the Defendants/Appellants' WCC Form No. 30, the Claimant/Respondent contended the Hearing Commissioner correctly allowed the Claimant/Respondent to defer litigation of the additional denied body parts, the back and depression/psychological overlay, because the Defendants did not amend their WCC Form No. 21 or WCC Form No. 58 to request a determination of compensability for the denied body parts. The Claimant/Respondent also contended the Hearing Commissioner correctly found the sole issue for determination at the hearing was the admitted left leg injury because the Defendants failed to plead any additional issues on their WCC Form No. 21 or WCC Form No. 58. The Claimant/Respondent asserted the Hearing Commissioner correctly found that the Defendants/Appellants were only entitled to a credit for temporary total disability benefits back to July 3, 2019 because the Defendants unlawfully terminated Claimant's temporary total disability benefits without Commission approval on February 19, 2019 and they were not current on temporary disability payments until July 3, 2019, after they filed their WCC Form No. 21 and after the first hearing was held on July 24, 2019. Finally, the Claimant/Respondent asserted the Hearing Commissioner correctly awarded 25% permanent partial disability to the left leg based on the substantial evidence in the record.

In an application for review pursuant to S.C. Code Ann. § 42-17-50, the Appellate Panel shall review the Award, and, if good grounds be shown therefore, reconsider the evidence, receive further evidence, rehear the parties or their representatives and, if proper, amend the award by making its own Findings of Fact

and its own Conclusions of Law consistent with or inconsistent with those of the Hearing Commissioner.

After careful review of the Request for Review in the instant case, including review of the entire record and upon consideration of the memoranda and arguments of the parties, the Appellate Panel has determined all of the Hearing Commissioner's Findings of Facts and Conclusions of Law are correct as stated and fully affirms the Hearing Commissioner's Order.

Accordingly, the Hearing Commissioner's Findings of Fact and Conclusions of Law are adopted in their entirety as set forth below and the Hearing Commissioner's Order of November 25, 2019 is sustained in its entirety.

FINDINGS OF FACT

IT IS FOUND AS A FACT:

1. The Hearing Commissioner issued instructions to the parties for preparing a proposed Decision and Order on August 7, 2019.
2. That Employee, Employer, and Carrier are subject to and bound by the terms and provisions of the South Carolina Workers' Compensation Act, as amended, with Paul Misuraca as Employee-Claimant and Charleston County as Employer and SC Association of Counties SIF as Carrier, Defendants.
3. That Claimant's average weekly wage is \$1,144.26, resulting in a compensation rate of \$762.88.
4. That Claimant was an employee of the above-named Employer on and prior to February 16, 2017, on which date he did sustain a compensable injury by

accident to the left ankle arising out of and in the course of his employment, and proper notice was given to Employer.

5. That this is a WCC Form No. 21 hearing only. On the Form 21, Defendants requested a hearing only to determine permanent partial disability to the admitted left leg and address termination of temporary total disability benefits.
6. That a hearing was scheduled on June 24, 2019. Claimant objected to the hearing going forward as temporary total disability benefits were not current and had been terminated without authorization. An interim order was issued on June 27, 2019 ordering Defendants to become current with temporary total disability benefits and rescheduling the hearing for July 25, 2019. Defendants complied with the Order and brought Claimant up to date on temporary total disability benefits at the time of the hearing on July 25, 2019.
7. That Claimant is presently receiving temporary total compensation and payments are up to date.
8. That Defendants requested the Hearing Commissioner to address whether Claimant sustained compensable injuries to the back and depression as alleged in Claimant's Form 50 and Claimant's Form 58-Pre-Hearing Brief. This was a Form 21 hearing only to address only the single member, the left leg and left ankle. See Russell v. Walmart Stores, Inc., Op. No. 27875 (S.C. April 3, 2019) and Tucker v. SCDOT, Op. No. 27906 (S.C. July 24, 2019).

9. That during the pre-hearing conference, Claimant withdrew his claim for benefits for the alleged and denied back and depression injuries without prejudice. Claimant also withdrew APA submissions #10 and #11 as well as Exhibit "G" Defendants objected to the Claimant amending his pre-hearing brief and withdrawing the alleged back and depression injuries. However, the Hearing Commissioner allowed the hearing to go forward on Defendants' Form 21 only, addressing only those issues pled on the Form 21, dated May 1, 2019, and the Defendants' Form 58, Prehearing Brief – determination of permanent partial disability to the admitted left leg and left ankle only and termination of temporary total disability benefits.
10. That Claimant is a 35-year employee of Charleston County. He Served in the military and spent 6 years in the Army and 16 years in the Navy. He served in Iraq. He is honest.
11. That Claimant underwent two surgeries on his left ankle and has retained hardware in the left ankle and is entitled to lifetime repair/replacement of the retained left ankle hardware.
12. That the authorized treating physician, Dr. Christopher Kestner, placed Claimant at maximum medical improvement on February 8, 2019. By WCC Form No. 14B, dated March 30, 2019, he assigned a 5% impairment to the left leg/2% whole person impairment. Dr. Kestner released Claimant to work with no restrictions.

13. That Claimant was seen by Dr. Bright McConnell on June 3, 2019 for an independent medical evaluation. Dr. McConnell also determined Claimant had reached maximum medical improvement and assigned a 10% impairment to the left leg/4% whole person.
14. That Claimant reached maximum medical improvement for the left leg and left ankle on February 8, 2019, as indicated by the medical reports in the records and stipulated by counsel.
15. That based on the greater weight of the evidence all ratings were taken into consideration. They don't indicate the true disability. Claimant's testimony represents a clear view of his actual disability. Claimant has limitations walking, running, moving, and daily limitations.
16. That Claimant is entitled to 48.75 weeks of permanent partial disability compensation at the rate of \$762.88, representing twenty five percent (25%) permanent partial disability to the left leg, as a result of the February 16, 2017 workplace accident.
17. Defendants are entitled to a credit for the overpayment of temporary total compensation since July 3, 2019, the date that temporary total compensation was brought current and reinstated, against the award for permanent partial disability ordered herein.
18. That there is no evidence in the record that any additional medical treatment would tend to lessen the period of Claimant's disability. Claimant has

retained hardware in the left ankle and is entitled to lifetime repair/replacement of the surgical hardware.

CONCLUSIONS OF LAW

Accordingly, as provided in § 42-17-40, SC Code Ann. (1976), as amended, it is the determination of this Commission that:

1. Under § 42-1-130, Claimant was a covered employee at the time in question; and under § 42-1-140, Defendant/Employer was a covered employer under the Act.
2. Under § 42-1-160, Claimant did sustain an injury to his left ankle by accident arising out of and in the course and scope of his employment on February 16, 2017.
3. Under §§ 42-9-10 and 42-1-120, Claimant was entitled to receive temporary total disability benefits.
4. Under § 42-9-260, the Defendants terminated temporary total disability benefits without authorization in February 2019; however, Defendants are not assessed as penalty for improperly terminating benefits as benefits were brought current.
5. Under § 42-15-60, Claimant was entitled to medical, surgical, hospital and other authorized treatment until February 8, 2019, the date on which Claimant reached maximum medical improvement for his left ankle and left leg, but not thereafter, there being no evidence that any additional medical treatment would tend to lessen the period of his disability.

6. Under § 42-15-60, Claimant is entitled to lifetime repair/replacement of the surgical hardware in his left ankle.
7. Under § 42-9-30, Claimant has sustained twenty five (25%) permanent partial disability to the left leg. From such award, Defendants are entitled to a credit for the overpayment of temporary total compensation since July 3, 2019.

ORDER

Based on the above Findings of Fact and Conclusions of Law, it is,

ORDERED the Hearing Commissioner's Order filed in the above-captioned matter on November 25, 2019 is hereby affirmed in its entirety by the Appellate Panel and the same shall constitute the Decision and Order of the Appellate Panel.

AND IT IS SO ORDERED!

S.C. WORKERS' COMPENSATION COMMISSION



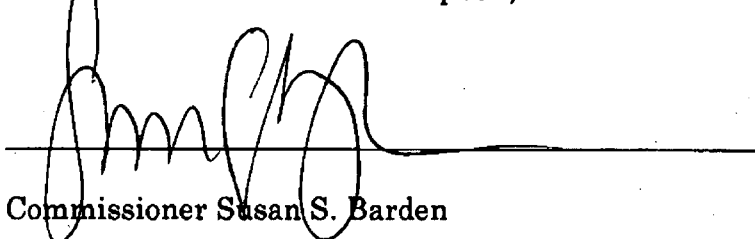
Commissioner Gene McCaskill

FULL AFFIRMATION

CONCUR:



Commissioner R. Michael Campbell, II



Commissioner Susan S. Barden

Columbia, South Carolina

Order Served via E-Mail:

William H. Lyon Wilson Jones Carter & Baxley <u>Whlyon@wilaw.net</u>	Catherine D. Meehan Steinberg Law Firm <u>cmeehan@steinberglawfirm.com</u> David T. Pearlman Steinberg Law Firm <u>dpearlman@steinberglawfirm.com</u>

CERTIFICATE OF SERVICE

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

By Eugenia Hollmon on August 3, 2020

SOUTH CAROLINA WORKERS' COMPENSATION COMMISSION

W.C.C. FILE #1701642

PAUL MISURACA,	)	
	)	
CLAIMANT,	)	SC WORKERS' COMPENSATION COMMISSION
	)	
VS.	)	HEARING OF
	)	
CHARLESTON COUNTY,	)	PAUL MISURACA
	)	
EMPLOYER,	)	VS
AND	)	
	)	CHARLESTON COUNTY
SC ASSOCIATION OF	)	
SELF-INSURANCE FUND	)	
CARRIER.	)	

This is the Transcript of the South Carolina Workers' Compensation Hearing of Paul Misuraca versus Charleston County, taken before Gloria Davis, a Court Reporter and Notary Public in and for the State of South Carolina, commencing at the hour of 11:24 A.M., Thursday, July 26, 2019, at Goose Creek Magistrate Office, 303 B. North Goose Creek Boulevard, Goose Creek, South Carolina.

COPY

REPORTED

BY

GLORIA DAVIS

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APPEARANCES

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FOR THE EMPLOYER/CARRIER:
William H. Lyon, Esquire
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421 Wando Park Boulevard, Suite 100
Mount Pleasant, SC 29464

ALSO PRESENT:

*Reporter's Note: -- Indicates incomplete thought or sentence, trailing off or interruption by speakers.

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I N D E X

WITNESSES

All Witnesses:	Page
Mr. Misuraca for Claimant	
Direct Examination by Ms. Meehan	24:11
Cross-Examination by Mr. Lyon	46:6
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Recross-Examination by Mr. Lyon	60:10
Further Redirect by Ms. Meehan	65:6
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STIPULATIONS

Commissioner Wilkerson: Today's date is the 25th day of July, 2019. We're here in reference to Workers' Comp file number 1701642. The Claimant in today's case is Paul -- is it Mishare --

Mr. Misuraca: Misuraca, sir.

Commissioner Wilkerson: -- Misuraca.

Mr. Misuraca: Yes, sir.

Commissioner Wilkerson: Represented by Catherine D. Meehan. The Employer is Charleston County; the Carrier is South Carolina Association of Counties Self-insurance Fund represented by William H. Lyon. The date of accident was 2/16/2017. The average weekly wage is one thousand, one hundred and forty-four dollars and twenty-six cents (\$1,144.26); thus the comp rate would be seven sixty-two, eighty-eight (\$762.88). We are here to determine if the Employer Carrier may stop payment and, if so, determine if Claimant is entitled to any future benefit. Carrier also request credit for temporary total paid in excess of award. Are there any objections to the APAs, jurisdiction, venue or any other items? I think there is because we had a very lengthy pre-hearing

1 conference but -- so, Mr. Lyon, I think there was
2 an objection. --

3 Mr. Lyon: Yes, Your Honor.

4 Commissioner Wilkerson: -- in reference to a
5 report that was coming in or may be coming in?

6 Mr. Lyon: Correct. It's Claimant's Exhibit
7 G, the vocational report of David Price; we'd
8 object to it coming in under regulation 67-611 and
9 612 as being untimely.

10 Commissioner Wilkerson: Okay.

11 Mr. Lyon: And --

12 Commissioner Wilkerson: And what -- I'm
13 sorry. You've got a -- I think the -- in our
14 pre-hearing, I think it was done yesterday and you
15 just a copy of it this morning --

16 Mr. Lyon: -- correct, Your Honor, the --

17 Commissioner Wilkerson: -- is my
18 understanding?

19 Mr. Lyon: -- the evaluation was done
20 yesterday and a copy of the report was actually
21 provided this morning.

22 Commissioner Wilkerson: Okay. Ms. Meehan?

23 Ms. Meehan: Commissioner, we are withdrawing
24 -- excuse me -- that submission, as well as
25 several other submissions that are included in our

1 APAs currently as we -- we're not proffering those
2 submissions at this time as we are only going
3 forward on the left leg. So, I will take out the
4 APA submissions that we are withdrawing.

5 Commissioner Wilkerson: Which ones would
6 those be?

7 Ms. Meehan: So, let me tell you the ones
8 we're going to keep in.

9 Commissioner Wilkerson: Oh, that will be
10 easier.

11 Ms. Meehan: I think that might be easier for
12 me.

13 Commissioner Wilkerson: I'm fine. I'm happy
14 with that; keep in, I'm -- that's good.

15 Ms. Meehan: So, we will be submitted APA
16 number 5, APA number 6, 7, 8, 9 and Exhibits E and
17 F.

18 Commissioner Wilkerson: Okay. And every --

19 Ms. Meehan: And I just want to make clear
20 that the only reason we're withdrawing the other
21 submissions is that -- because we're only going
22 forward on the left ankle today and we are not
23 waiving any rights to alleged injuries to
24 additional body parts.

25 Commissioner Wilkerson: -- so, the -- the

1 additional body parts that were on the 58 you're
2 withdrawing all of those as well?

3 Ms. Meehan: Yes, sir.

4 Commissioner Wilkerson: Okay. Except the
5 left leg or the left ankle?

6 Ms. Meehan: Yes, sir.

7 Commissioner Wilkerson: Okay. Just to make
8 sure I'm making -- taking my notes -- and/or
9 ankle. Okay. All right. Please. I'm sorry.

10 Mr. Lyon: Commissioner, I --

11 Commissioner Wilkerson: Well, I -- at this
12 point, I think we're just on the initial part
13 about the objections; so, since she has withdrawn
14 them, then that objection doesn't need to be noted
15 because she has withdrawn what you did not want to
16 come in I don't to rule on it is -- when I say
17 that, okay?

18 Mr. Lyon: -- correct.

19 Commissioner Wilkerson: And then, she is
20 amending, based on what she had, the -- the APAs
21 that she is going to submit today; so, then that
22 would not be an issue. Is there any -- before we
23 get past that issue, are there any objections to
24 the APAs, jurisdiction, venue or any other items
25 from your client's perspective, on what Mr. Lyon

1 is going to submit?

2 Ms. Meehan: No, Your Honor.

3 Commissioner Wilkerson: Okay. Okay, so
4 without objection, we've got that done, the
5 Commission's file becomes part of the record with
6 the exception of self-serving declarations and
7 unstipulated medical reports. I know, Mr. Lyon,
8 you need to put some information on the record as
9 well, of which I will allow you to do now. So,
10 please, I was -- go ahead.

11 Mr. Lyon: Thank you, Your Honor. Our
12 position is the Claimant sustained an admitted
13 injury to the left ankle only and reached maximum
14 medical improvement on February the 8th of 2019; I
15 won't speak for Counsel but I -- I believe she
16 will stipulate to the date of maximum medical
17 improvement. We are requesting a determination of
18 permanent disability, the Claimant's entitlement
19 to permanent disability compensation, as well as a
20 credit for temporary total benefits paid after the
21 date of MMI. The Claimant has filed a Form 50
22 alleging injuries to the back and psychological,
23 an aggravation of -- of both and initially pled it
24 on their form 58 but has since withdrawn. We are
25 asking the Commission to address compensabilities

1 of the denied injuries to the back and
2 psychological under the recent cases of Russell
3 versus Walmart and Tucker versus SC DOT, as well
4 as Frederick versus Wellman, which is 682 SE 2nd
5 576. It would be our position that --

6 Commissioner Wilkerson: Do you have those
7 particular cases with you?

8 Mr. Lyon: -- I do.

9 Commissioner Wilkerson: Are you going to
10 submit those?

11 Mr. Lyon: I do.

12 Commissioner Wilkerson: Okay. Thank you.

13 Mr. Lyon: I do not have the Wellman case
14 with me --

15 Commissioner Wilkerson: Okay.

16 Mr. Lyon: -- it's a -- I think a 2009 case.

17 Commissioner Wilkerson: If you'd just submit
18 that to my office --

19 Mr. Lyon: Sure.

20 Commissioner Wilkerson: -- whenever, yes.
21 I'm sorry. Go ahead. I apologize. I'm taking
22 notes.

23 Mr. Lyon: And so, it would be our position
24 that those issues, the compensability issues, are
25 ripe for determination before the Commissioner --

1 Commissioner Wilkerson: Thank you.

2 Mr. Lyon: -- today. So, we would ask for
3 you to make those compensability findings today
4 and should you find those injuries compensable,
5 award permanent disability compensation for those
6 alleged injuries.

7 Commissioner Wilkerson: Okay. Now, you want
8 me to find those but you're not going to let her
9 report in; help me understand that from a legal
10 perspective.

11 Mr. Lyon: I don't -- the report doesn't go
12 to the injuries; it's -- it's an exhibit.

13 Commissioner Wilkerson: I understand.

14 Mr. Lyon: It's a -- it's a vocational
15 report; it's not a medical report.

16 Commissioner Wilkerson: But that would go to
17 disability, would it not, potentially?

18 Mr. Lyon: It would go to disability.

19 Commissioner Wilkerson: Okay. Okay.

20 Mr. Lyon: But I think under -- the -- the
21 regulation it doesn't come in.

22 Commissioner Wilkerson: No, I -- I don't
23 disagree with that.

24 Mr. Lyon: Sure.

25 Commissioner Wilkerson: But --

1 Mr. Lyon: Sure.

2 Commissioner Wilkerson: -- but you're asking
3 me to find the rest of these issues but not
4 allowing her to provide a defense, for no better
5 term, of what you're asking me to do on your
6 behalf; so, help me with that.

7 Mr. Lyon: Well, Commissioner, I've only
8 objected to the vocational evaluation of David
9 Price; I didn't object to any of the other --

10 Commissioner Wilkerson: Okay.

11 Mr. Lyon: -- APA submissions --

12 Commissioner Wilkerson: Okay. All right.

13 Mr. Lyon: -- that -- that were withdrawn by
14 Counsel.

15 Commissioner Wilkerson: Okay. Thank you.
16 So, help me also understand a little bit about MMI
17 is February the 8th, 2019?

18 Mr. Lyon: Correct.

19 Commissioner Wilkerson: Okay. And there is
20 a prior order in the file that I signed dated 6/27
21 that -- it's an interim order and it says
22 temporary total compensations were not current;
23 therefore the undersigned Commissioner issued the
24 following order. So, help me understand how the
25 law applies on you all's behalf to a 21 being

1 filed in May but temporary total wasn't paid
2 underneath the Statute; help me with that.

3 Mr. Lyon: Sure, Commissioner.

4 Commissioner Wilkerson: And does that also
5 not potentially open that back up for discussion
6 now that it's up to date since it was now not paid
7 properly; help me with that from a legal
8 perspective?

9 Mr. Lyon: Right. Well, like you said, the
10 benefits are up to date as of today, so there --
11 there is no underpayment or back payment owed;
12 payments are current. As far as the credit issue,
13 the benefits that were paid were post-MMI; so, our
14 position would be that we are entitled to a credit
15 from the permanent disability award under those.
16 The case I would rely on would be Curiel versus
17 Environmental Services --

18 Commissioner Wilkerson: Right.

19 Mr. Lyon: -- which the Court of Appeals
20 found benefits -- temporary benefits paid post-MMI
21 are not proper and the -- a Defendant is entitled
22 to a credit of those benefits.

23 Commissioner Wilkerson: Sure. Anything
24 else, Mr. Lyon?

25 Mr. Lyon: No, Your Honor.

1 Commissioner Wilkerson: Okay. Thank you.
2 Ms. Meehan, on behalf of your client?

3 Ms. Meehan: Thank you, Commissioner.
4 Commissioner, as stated, we are withdrawing the
5 other body parts that were listed on the Form 58
6 and it's our position that we should not go
7 forward on those body parts today as Defense
8 Counsel's 21 was only to address the left ankle
9 injury. So, it's our position that only the --
10 going forward on the left ankle injury is the only
11 body part that should be addressed today. That
12 said, we did withdraw certain APA submissions,
13 which were not proffered only because we were not
14 going forward on those body parts today and only
15 going forward on the left ankle. We preserve any
16 right to argue for injuries to other body parts as
17 a result of this accident that occurred on
18 February 16th, 2017, at a later time as we are
19 only going forward on the Defendant's 21 on the
20 left leg injury today. In terms of the credit, we
21 would argue that there is no credit due to the
22 Defendants. We -- temporary compensation was not
23 current as of the last set hearing on June 24th,
24 2019. The temporary total has been brought
25 current at the date of this hearing, on July 25th,

1 2019, but we would argue that there is no credit
2 due to the Defendants back to the date of MMI as
3 the benefits were stopped improperly. We did not
4 argue for the -- the penalty that could have been
5 applied at that time for the benefits that were
6 not paid. So, we would argue that if any credit
7 is given it should only be back to the date that
8 the Claimant -- that payments were made current,
9 if any credit at all is -- is awarded.

10 Commissioner Wilkerson: So, when -- when
11 were they made current?

12 Ms. Meehan: Well, that's a good question.

13 Commissioner Wilkerson: It would be -- it
14 would have been after --

15 Ms. Meehan: It --

16 Commissioner Wilkerson: -- June the --

17 Ms. Meehan: -- probably --

18 Commissioner Wilkerson: -- 24th --

19 Ms. Meehan: -- right.

20 Commissioner Wilkerson: -- but I don't know
21 what day.

22 Mr. Lyon: I --

23 Ms. Meehan: It may have been the day of or
24 the day after.

25 Mr. Lyon: -- yes, I know I sent a letter to

1 Catie; I mean, I have the date -- there is a
2 letter in the file with the date --

3 Commissioner Wilkerson: That's okay.

4 Mr. Lyon: -- and I can get that.

5 Commissioner Wilkerson: I'll leave that
6 open. Yes, because I --

7 Mr. Lyon: Yes.

8 Commissioner Wilkerson: -- I've got a
9 circle; that tells me I've got to fill something
10 in. Okay.

11 Ms. Meehan: So, yes, after June 24th, 2019

12 --

13 Commissioner Wilkerson: That's fair.

14 Ms. Meehan: -- the payments were made
15 current. And, Your Honor, again, just -- we are
16 only going forward on the left leg injury today
17 but that does not mean that we waive any arguments
18 to either litigate or mediate future body parts or
19 other body parts in the future.

20 Commissioner Wilkerson: Is the only accepted
21 body part the left ankle/left leg?

22 Ms. Meehan: At this time, yes.

23 Commissioner Wilkerson: Okay. So, when the
24 21 would have been filed on 5/1 -- Defendants
25 request hearing to determine PPD and address

1 temporary total disability payments; if that's the
2 only body part accepted then the 21 would be only
3 on the left ankle and left leg?

4 Ms. Meehan: Right.

5 Commissioner Wilkerson: My reading of it.
6 I'm going to --

7 Ms. Meehan: Right. The --

8 Commissioner Wilkerson: -- okay.

9 Ms. Meehan: -- that's correct.

10 Commissioner Wilkerson: I just wanted to --
11 I wasn't sure if there were other body parts
12 accepted. Okay. Okay.

13 Ms. Meehan: And, one more thing,
14 Commissioner, in respect to the left leg, it's our
15 position that the disability is much greater than
16 the impairment rating that was assigned by the
17 treating physician. Mr. Misuraca was unable to
18 return to work. He was released at MMI for the
19 left ankle but as part of the procedure with the
20 Sheriff's Office he had to undergo a fit for duty
21 examination from the County doctor and that was
22 performed by Dr. Wiseglass on February 19th, 2019,
23 and Dr. Wiseglass indicated, it is unlikely that
24 he would be able to tolerate the stresses that
25 would be placed on his ankle in the performance of

1 his duty; that's APA -- Defendant's APA, page --
2 APA, page 20. Also, on that page, Dr. Wiseglass
3 indicated he was unable to work due to
4 work-related injury and he also indicated he still
5 has some stiffness and discomfort; this would
6 impede his ability to run and respond in the case
7 of any emergency situation. So, it is our
8 position that Mr. Misuraca's disability from this
9 accident is much greater than the impairment
10 rating that was assigned and he has been unable to
11 return to work and -- and actually, you know, was
12 not cleared fit for duty by Dr. Wiseglass and as a
13 result, he has retired from the Sheriff's Office
14 after thirty-five (35) years of service. We also
15 -- I just lost my train of thought, sorry. So,
16 it's our position that the disability is much
17 greater. We also would ask for maintenance of the
18 hardware; on the 14-B Dr. Kestner indicates there
19 is still retained hardware in the left leg. So,
20 we would ask for the lifetime maintenance of that.

21 Commissioner Wilkerson: Anything in
22 reference to what Ms. Meehan has put on the
23 record?

24 Mr. Lyon: Yes, Your Honor. Just to point
25 out --

1 Commissioner Wilkerson: Sure.

2 Mr. Lyon: -- that we believe the Claimant's
3 current inability to work is not due to his ankle
4 injury. He was released by the treating
5 Orthopedist to return to work without restriction.
6 His current inability to work is due to the other
7 alleged injuries to the back and psychological,
8 which we contend are not part of this claim. In
9 terms of the future medical, I believe the
10 hardware was removed but I'm not -- I'm not going
11 to make a -- a big issue; it's either in there or
12 it's not. But aside from that, we would contend
13 Claimant is not entitled to any -- any other
14 future medicals as none was recommended.

15 Commissioner Wilkerson: Okay. If hardware
16 is still in him, do you agree --

17 Mr. Lyon: Yes. If -- if hardware is in
18 there --

19 Commissioner Wilkerson: -- that you still
20 would be responsible for it?

21 Mr. Lyon: -- absolutely.

22 Commissioner Wilkerson: I don't know what
23 the medical shows.

24 Mr. Lyon: Yes, absolutely.

25 Commissioner Wilkerson: That's fine. Okay.

1 Okay. Anything else we need to put on the record?

2 Ms. Meehan: Just for clarification. So, the
3 hardware -- there is still hardware and that's --
4 the operative note is APA, page 119, just for
5 reference, which indicates that there is hardware,
6 so --

7 Commissioner Wilkerson: And it's my
8 understanding the Claimant has agreed to mediation
9 but the Defense has not agreed to mediate the
10 case; is that fair?

11 Ms. Meehan: -- correct, Your Honor.

12 Commissioner Wilkerson: Okay.

13 Ms. Meehan: The Claimant agreed to have his
14 temporary total disability benefits stopped and to
15 mediate the case but the Defense has not agreed to
16 that.

17 Commissioner Wilkerson: Okay. That's fine.

18 Mr. Lyon: And -- and --

19 Commissioner Wilkerson: All that needs to be
20 on the record, so.

21 Mr. Lyon: -- sure. And our position on that
22 is --

23 Commissioner Wilkerson: Sure.

24 Mr. Lyon: -- that it's a single scheduled
25 injury only --

1 Commissioner Wilkerson: Sure.

2 Mr. Lyon: -- not subject to mediation. And
3 I guess just for clarification --

4 Commissioner Wilkerson: I don't disagree
5 with that.

6 Mr. Lyon: -- yes.

7 Commissioner Wilkerson: And I don't disagree
8 with that.

9 Mr. Lyon: And I -- just for clarification, I
10 do believe there is a stipulation as to the date
11 of MMI; is that accurate?

12 Ms. Meehan: For the left ankle.

13 Mr. Lyon: Okay.

14 Commissioner Wilkerson: Okay. Anything else
15 before we start?

16 Ms. Meehan: I just want to make one more
17 clarification. Your Honor, the testimony today
18 will be directed solely to -- or regarding the
19 left leg; we are not going to address any of the
20 other body parts but we preserve our argument --

21 Commissioner Wilkerson: Sure.

22 Ms. Meehan: -- to raise those at a later
23 date.

24 Commissioner Wilkerson: Okay. Anything else
25 before we start?

1 Mr. Lyon: But with respect to limiting the
2 testimony, I mean, I think I've got a right to ask
3 about the other conditions since they have, you
4 know, stated his inability to work is due solely
5 to the ankle injury and our position is it's due
6 to other unrelated injuries.

7 Commissioner Wilkerson: But we're only here
8 on the left leg and ankle.

9 Mr. Lyon: Right. But it still goes to the
10 --

11 Commissioner Wilkerson: If we think we're
12 going to --

13 Mr. Lyon: -- it still goes to the
14 disability.

15 Commissioner Wilkerson: -- not -- no,
16 because you're saying that the disability is just
17 to a single body part and you're saying you're not
18 subject to mediation because it's a single body
19 part.

20 Mr. Lyon: Right.

21 Commissioner Wilkerson: You can't -- you
22 can't investigate on the stand unless you're
23 agreeing to mediate or there's a potential other
24 body part coming in; there's no need to go into it
25 because you -- you all's position is that it's a

1 single body, so it should be awarded and move on
2 the down the highway with it.

3 Mr. Lyon: Well, I -- again --

4 Commissioner Wilkerson: So --

5 Mr. Lyon: -- I think it goes to the issue of
6 disability in terms of the testimony that we can
7 illicit from the Claimant.

8 Commissioner Wilkerson: -- you can ask the
9 question, now, whether he answers it or not, I
10 can't -- I can't make him answer it; he may take
11 the 5th at that point in time --

12 Mr. Lyon: Right.

13 Commissioner Wilkerson: -- because we're not
14 here for that, okay?

15 Mr. Lyon: I just want to make clear I'm --
16 I'm not stipulating to limiting the testimony in
17 any --

18 Commissioner Wilkerson: No, I understand.

19 Mr. Lyon: -- way.

20 Commissioner Wilkerson: That's fair.

21 Mr. Lyon: That's all I'm trying to do.

22 Commissioner Wilkerson: That's fair. No,
23 that's fair. I'm fine with that. Okay. Anything
24 else?

25 Ms. Meehan: No, Your Honor.

1 Commissioner Wilkerson: Okay. So, are you
2 going to direct or cross?

3 Mr. Lyon: I'll rely on the medicals and
4 reserve the right to cross.

5 Commissioner Wilkerson: Okay. That's fine.
6 So, at this time, sir, I'm going to get you to
7 raise your right hand --

8 Mr. Misuraca: Do you want me to stand up,
9 Judge?

10 Commissioner Wilkerson: -- I'm going to have
11 the Court Reporter swear you in.

12 Mr. Misuraca: Your Honor, do you want me to
13 stand up?

14 Commissioner Wilkerson: Oh, no, sir. You
15 can sit there; you're fine with that.

16 Mr. Misuraca: Okay.

17 Whereupon;

18 Paul Rollins Misuraca, being duly sworn and cautioned
19 to speak the truth, the whole truth and nothing but the
20 truth, testified as follows:

21 Court Reporter: Please state your full
22 name for the record.

23 Witness: Paul Rollins Misuraca.

24 Court Reporter: Thank you, sir.

25 Witness: Yes, ma'am.

1 Commissioner Wilkerson: Is it okay if
2 she leads him through the preliminary stuff

3 --

4 Mr. Lyon: Sure.

5 Commissioner Wilkerson: -- that we
6 always have to get on the record?

7 Mr. Lyon: Sure.

8 Commissioner Wilkerson: Okay. Thank
9 you.

10 **DIRECT EXAMINATION**

11 **By Ms. Meehan:**

12 Q. Mr. Misuraca, you're currently married; is that
13 correct?

14 A. Yes, ma'am.

15 Q. Do you have any children?

16 A. Yes, ma'am.

17 Q. How many?

18 A. Six (6) total but three (3) with another marriage
19 and three (3) that I have living at home now.

20 Q. Three (3) children live in the household with you?

21 A. Yes, ma'am.

22 Q. Okay. How old are you?

23 A. Sixty (60).

24 Q. How far did you go in school?

25 A. Two (2) years of college, Associates degree.

1 Q. And it's my understanding you were in the
2 military; is that correct?

3 A. Yes, ma'am.

4 Q. How many total years of service?

5 A. Six (6) years in the Army and I've -- I got out
6 with a -- a --

7 Witness: -- excuse me, Commissioner,
8 but sometimes with my medicine it's not like
9 my memory is --

10 A. -- honorable discharge; that's what I was thinking
11 about, honorable discharge.

12 Q. Six (6) years in the Army --

13 A. And then, twenty (20) -- I mean, I'm sorry,
14 sixteen (16) more years -- I swore back in in 2000 in
15 the Navy.

16 Q. -- okay.

17 A. The Navy Reserve.

18 Q. All right. And what year did you get out?

19 A. I retired in 2015.

20 Q. Okay. What types of jobs have you held in the
21 past?

22 A. Thirty-five (35) years with the Charleston County
23 Sheriff's Office as a Master Deputy, Summerville Police
24 Department for two (2) years and then the -- the
25 military; that's it.

1 Q. So, it's fair to say the majority of your work
2 experience has been in law enforcement?

3 A. Yes. That's all, just law enforcement.

4 Q. Okay. Did you hold various positions during your
5 time with the Sheriff's Office?

6 A. Yes.

7 Q. What was your position that you held at the time
8 of your work-related accident in February, 2017?

9 A. I worked Court Security in Family Court.

10 Q. All right. And what were your job duties?

11 A. To secure the courtroom and protect the Judge and
12 also bystanders, jurors, inmates and also -- our duties
13 were also to watch the gallery and also a lot of
14 standing, stooping and also maintain peace and also, I
15 had to, if need be, restrain prisoners or, you know,
16 take down a prisoner or arrest somebody if we had to.

17 Q. Okay. And you touched on some of the physical
18 requirements of the job but tell me generally what --
19 what were your duties physically?

20 A. Most of the time it was standing and less sitting
21 because we couldn't sit because we had to stand and be
22 alert.

23 Q. All right. And you said you had to be able to
24 restrain people if necessary?

25 A. Yes.

- 1 Q. would that be all genders?
- 2 A. Yes.
- 3 Q. Okay. All sizes of people?
- 4 A. All sizes, all genders, everything.
- 5 Q. Typically, how many Officers were in a courtroom?
- 6 A. Most of the time it was two (2) in Family Court
- 7 but if we were shorthanded or people called in sick it
- 8 was just one (1) person; you were by yourself
- 9 sometimes.
- 10 Q. All right. Who was your supervisor at the time of
- 11 your accident in February, 2017?
- 12 A. Sergeant Wrigley.
- 13 Q. All right. Prior to February, 2017, had you ever
- 14 had any problems with your left ankle?
- 15 A. Not the left ankle, no.
- 16 Q. Okay. Any problems with your left leg at all?
- 17 A. Yes.
- 18 Q. Tell me about that.
- 19 A. I had a knee injury, a torn meniscus, and then
- 20 injured it in -- in Iraq.
- 21 Q. Okay. Following those injuries, did you -- were
- 22 you able to return to full duty?
- 23 A. Yes.
- 24 Q. Able to perform all your job duties?
- 25 A. Yes.

1 Q. And prior to February, 2017, were you able to
2 perform all the physical requirements of the job with
3 the Sheriff's Office?

4 A. Yes.

5 Q. All right. Now, this is an admitted accident to
6 the left leg but just tell me, briefly, what happened
7 on February 16th, 2017.

8 A. We had a -- a little -- a subject that was in the
9 gallery -- a little -- talking out loud and I told him
10 to be quiet twice. He didn't and I told -- I asked the
11 Judge to remove him; so, we removed him. Talking loud
12 out there, a little orderly -- disorderly swearing and
13 cussing. We brought him back in, he started fighting
14 with me. I grabbed him, another Deputy grabbed him;
15 all three (3) of us went through the swinging arms and
16 we all fell on top of him -- well, both of us fell on
17 top of him. And I felt a little pain at the time but I
18 don't know if I hit the swinging arms or if it -- he
19 fell on top of me; I don't know, I just felt pain
20 there. After we got him restrained, we stood up, I
21 went to the back and I felt pain and looked at it; it
22 was swollen a little bit. And, of course, they sent me
23 to CCSO -- CC --

24 Q. CCOH?

25 A. -- Dr. Wiseglass, yes.

1 Q. Okay.

2 A. CCOH.

3 Q. And you indicated felt pain there, where are you
4 referring to feeling pain?

5 A. My left ankle.

6 Q. Okay. So, you were sent to CCOH the day of the
7 injury?

8 A. Yes, ma'am.

9 Q. And you indicated you were having pain and
10 swelling in the left ankle?

11 A. Yes.

12 Q. Did you treat with CCOH on several occasions?

13 A. Yes.

14 Q. And what treatment did CCOH provide?

15 A. Well, they looked at it, they wrapped it and they
16 took an x-ray and they took me off duty at that time;
17 that's all they did. They put me in a brace and I
18 think it was crutches they gave me.

19 Q. Okay. Did they make a referral to a specialist?

20 A. Not at the time. I asked them, I said -- I said,
21 look, I want to get an MRI done and they didn't do it
22 at the time. And the doctor told me -- I can't
23 remember her --

24 Mr. Lyon: Objection, hearsay.

25 Commissioner Wilkerson: You can't tell

1 me what the doctor said.

2 witness: -- okay..

3 A. The MRI was dismissed at the time and I can't
4 remember if it was done the following week, that
5 Wednesday or Thursday, and then I didn't know it was
6 broken until I seen Dr. Corey.

7 Q. Okay. So, you did have an MRI performed?

8 A. Yes.

9 Q. Okay.

10 A. A couple of days after that.

11 Q. And then, you mentioned Dr. Corey; you were
12 referred to Dr. Corey?

13 A. Yes.

14 Q. When is the first time that you saw Dr. Corey?

15 A. I can't remember the exact date.

16 Q. Okay.

17 A. It was a week after I seen -- I -- oh, I seen Dr.
18 Wiseglass -- or not Dr. Wiseglass but a female doctor
19 at Wiseglass' office.

20 Q. All right. What symptoms were you having when you
21 saw Dr. Corey?

22 A. A lot of pain and swelling in my ankle.

23 Q. All right. And what treatment, just generally,
24 did Dr. Corey provide?

25 A. I went to him and he looked at it, took the wrap

1 off and he basically looked in front of me --
2 apparently, he already had the -- the screen where it
3 was broken and he looked at -- up at me and he said,
4 what took you so long to get here? And I said, CCOH.
5 He says, your foot is broken and I said -- well, your
6 ankle is broken and I said, I didn't know. And he
7 showed me the screen and he said the fibula was broken
8 and it was broken, like, at an angle; instead of a
9 clean break, it was broken at an angle.

10 Q. Okay.

11 Commissioner Wilkerson: So, let me ask
12 a question. The date of accident is not
13 disputed; that's February the 16th, '17.

14 When was this -- I don't have any APAs yet.
15 But when was this -- when was this doctor --

16 Witness: It was, like, ten (10) days
17 afterwards.

18 Commissioner Wilkerson: -- okay. I was
19 just trying to figure out. I don't have the
20 stuff before me. So, ten (10) days, okay.

21 Ms. Meehan: I can give you the exact
22 date.

23 Commissioner Wilkerson: That's fine.
24 That's okay. Just -- just some APA numbers.

25 Ms. Meehan: Yes. It looks like

1 Defendant's APA 2. The first visit was March
2 3rd --

3 Commissioner Wilkerson: Okay.

4 Ms. Meehan: -- 2017.

5 Commissioner Wilkerson: Okay. I'm good
6 with that.

7 Ms. Meehan: Okay.

8 Q. So, you said Dr. Corey performed x-rays; did he
9 provide other treatment?

10 A. Yes. At that time he automatically -- well, not
11 him, one of his employees put a cast on me --

12 Q. Okay.

13 A. -- and it stayed like that for about eight (8) --
14 eight (8) to ten (10) weeks; something like that.

15 Q. All right. Did he prescribe medications?

16 A. Yes. But they didn't help.

17 Q. Did he keep you out of work at that time?

18 A. Yes. He kept me out of work; no work what --
19 whatsoever. I had stayed home not doing nothing and,
20 of course, I just basically laid around and not did
21 nothing and kept my foot up.

22 Q. Okay. And then, at some point doctor -- did Dr.
23 Corey perform surgery?

24 A. Yes. He -- I'm sorry, he performed surgery before
25 the cast. He performed surgery on my left ankle on the

1 outside; I can show it to you if you all would like.

2 Q. Okay.

3 Commissioner Wilkerson: I don't --

4 Witness: No? I'm sorry.

5 Commissioner Wilkerson: -- I don't need

6 -- I don't need to see it --

7 Ms. Meehan: Okay.

8 Commissioner Wilkerson: -- as long as

9 it's in the record that he performed the
10 surgery --

11 Witness: Right here (indicating) --

12 Commissioner Wilkerson: -- on the ankle

13 --

14 Witness: -- the left ankle.

15 Commissioner Wilkerson: -- because --

16 yes.

17 Witness: Do you want to see it, sir?

18 Commissioner Wilkerson: I don't -- I
19 don't need to see it because it's -- if it's
20 in the medical reports is all I'm looking
21 for.

22 Witness: Okay. There's pictures in
23 there too.

24 Commissioner Wilkerson: Yes.

25 A. But anyways, he performed the surgery and he -- he

1 said he had to put some hardware in there. I said,
2 okay. So, I went to surgery, I don't remember when; I
3 can't remember the date. He did the surgery, put
4 hardware in there, then he put me in a cast. I stayed
5 in the cast for between six (6) and eight (8) weeks. I
6 went back to him and had medicine and -- and he said,
7 to keep my foot up. And -- and that's all I did was
8 lay in the bed and kept my foot up and tried to keep
9 the swelling down because it was really hurting bad.
10 So, the pain was so severe it was like the cast was
11 pushing on the -- the swelling. And it's -- and that
12 was it for that time.

13 Q. Okay. How long did you continue to treat with Dr.
14 Corey?

15 A. Oh, wow. I went back-and-forth with him for
16 probably -- oh, I'm sorry, let me -- let me back up a
17 little bit. It was eight (8) months before he decided
18 to do the surgery. I went back-and-forth with him
19 because he was -- he wanted it to -- to kind of like
20 heal itself. And I kept on asking him from -- from
21 month one if -- I said -- I said, Doc, do you want to
22 do the surgery; can you do the surgery? He said, no,
23 it's healing.

24 Mr. Lyon: Objection, hearsay.

25 Commissioner Wilkerson: You can't tell

1 me what the doctor said.

2 A. Well, I asked him to do the surgery and it wasn't
3 done. I asked him again monthly; it wasn't done.
4 Finally, on the eighth (8th) month he decided -- the
5 sixth (6th) month to do the surgery. At that time he
6 sent me to another doctor; I can't remember his name
7 but it was an Endocrinologist. He wanted to check my
8 levels for sugar, I believe vitamin D and something
9 else. I went to this doctor; he assigned me a vitamin
10 D pill for two (2) months, to take one (1) pill, a
11 fifty thousand (50,000) units of vitamin D, which I'm
12 taking. I went back to him on the second -- on the
13 second month; he didn't even recheck my blood to check
14 if it was up to date. He just said, okay, you're
15 released for surgery. I went back to Corey and that's
16 when he performed the surgery on the eighth (8th)
17 month.

18 Q. Okay. And then, did you continue treating with
19 Dr. Corey?

20 A. I treated -- I continued treating with Dr. Corey,
21 even after he took the -- the cast off. It was so
22 painful I couldn't stand on it. He put me in a boot
23 for another eight (8); twelve (12), fourteen (14),
24 sixteen (16) weeks after that. It just -- it seemed
25 like it wouldn't heal and I couldn't put no pressure on

1 my leg -- my ankle or my leg whatsoever.

2 Q. So, how did you get around?

3 A. He gave me a -- a scooter that I had to put my
4 knee -- I had to prop my knee up on it and wheel myself
5 around with my right foot because I couldn't put no --
6 no bearing pressure on my left ankle; I couldn't walk
7 on it. He kept on telling me -- sorry. They were
8 wanting me to walk on it but I couldn't and they didn't
9 believe me. And they -- they were -- he wanted me to
10 get rid of the scooter and walk on it and start putting
11 pressure on it and I couldn't and it was like they
12 couldn't -- they didn't believe me and --

13 Q. So, at some point you asked for a second opinion?

14 A. -- at that point -- between that and a few other
15 things, I asked for a second opinion.

16 Q. And is that when you began treating with Dr.
17 Kestner?

18 A. Well, it was about a year and a half later.

19 Q. From the date of the initial accident you mean?

20 A. Right. From the --

21 Q. Okay.

22 A. -- yeah, from the surgery and everything else.

23 Q. So, you began treating with Dr. Kestner and you
24 said you were having continued pain and inability to
25 weight bear at that time?

1 A. Yes. And I even showed him in his office --
2 office when I took the boot off that I couldn't walk on
3 my heel; I had -- I mean, I couldn't walk on my foot
4 like normal and I still can't because when I put
5 pressure on this, I limp a little bit and I also have
6 pressure on the heel and on the front part right here
7 (indicating).

8 Q. And what kind of treatment did Dr. Kestner
9 provide?

10 A. Dr. Kestner said -- after he had taken a couple of
11 x-rays and looking at it, he said he was going to go in
12 there and remove the hardware and hopefully I would
13 feel better after that.

14 Q. And did he perform surgery?

15 A. Yes, he did.

16 Q. And is --

17 A. He went through the same scar; that's why you
18 don't see a double scar there but also Dr. Corey also
19 did a bone -- what do you call it? He removed bone
20 from my heel and I guess restructured it somewhere
21 else.

22 Q. A graft?

23 A. A graft, yes.

24 Q. Okay.

25 A. But Dr. Kestner went down the same scar and

1 removed all the hardware but he told me he had to put
2 another piece of hardware, like a small screw, to hold
3 something in place. And when he told me, also, he said
4 there was a ligament -- a ligament just hanging there;
5 that's why I was having a whole lot of pain. I guess
6 he removed that and then he had to put a little small
7 screw to hold something in place there.

8 Q. And did Dr. Kestner have you out of work as well?

9 A. Yes, completely.

10 Q. Did you do some physical therapy?

11 A. I did a lot of physical therapy. I did a lot of
12 physical therapy when I was even had the pain with Dr.
13 Corey and the -- the Physical Therapist also had in her
14 -- in her notes that I needed the scooter to walk
15 because she even stated that -- in the notes that --
16 that I couldn't walk without the scooter; I needed to
17 walk -- the scooter to walk with because of the pain
18 was unbearable.

19 Q. Okay. Did Dr. Kestner release you at some point
20 from his care?

21 A. Yes.

22 Q. When was that?

23 A. I can't remember, ma'am.

24 Q. Okay. Was it this year?

25 A. Yeah. March, February, somewhere around there.

1 Q. Okay.

2 A. March or February.

3 Q. All right. Have you seen any other providers for
4 your left leg?

5 A. Yes. I can't remember his name, Dr. McConnell or
6 McCon --

7 Q. Okay. And you -- so, you saw Dr. McConnell; what
8 -- what symptoms were you having when you saw him?

9 A. -- the same that I just described with my leg,
10 with my ankle, I mean. That I can't fully walk on it.
11 When I put a lot of pressure on it -- I can't run at
12 all; I can't run. I can walk short distances, like, I
13 can walk from probably here to Family Dollar and I have
14 to sit down or get off of it because the pain on my
15 ankle, like I said when I walk -- even when I walk I
16 have to walk -- it's like I have to put a little -- I
17 can't walk too heavy on it; I can't put my full weight
18 on it because I limp on it a little bit and when I do,
19 I have the pain here (indicating).

20 Q. And you're pointing to --

21 A. In my heel -- in my foot.

22 Commissioner Wilkerson: In the heel?

23 Witness: In the heel, sir.

24 Commissioner Wilkerson: That's the heel
25 area?

1 Witness: Yes, sir.

2 Commissioner Wilkerson: Okay.

3 Witness: In the heel. I'm sorry.

4 Commissioner Wilkerson: No, that's
5 okay.

6 A. In my heel, when I walk on it, and it generates
7 around to the front right here (indicating).

8 Q. -- the front of your -- top of your foot?

9 A. On the top and on the sides.

10 Q. Okay.

11 A. And then, of course, the area where the scar is
12 at, it still hurts and I -- I don't know if that's
13 going to take long to heal or not but that's where it
14 hurts, right there (indicating) --

15 Q. On the outer --

16 A. -- on that side of the scar, right there
17 (indicating).

18 Q. -- on the outer side of --

19 A. On the outer side --

20 Q. -- your scar?

21 A. -- yeah.

22 Q. Okay.

23 A. And it mostly hurts here (indicating) and on the
24 heel, especially when I'm walking.

25 Q. Okay. All right. I -- did you return to Dr.

1 wiseglass as some point for a fit for duty evaluation?

2 A. Yes.

3 Q. All right. And it looks like that was in February
4 of this year; does that sound correct?

5 A. Yes. But also before that I -- I also applied for
6 -- that's why I applied, I was -- I also applied for
7 Workman's -- well, not Workman's Comp but Social
8 Security Disability.

9 Q. Okay. All right. And when you returned to Dr.
10 Wiseglass, was the purpose of that evaluation a fit for
11 duty?

12 A. Yes. It was to -- to determine whether to go back
13 to work or not.

14 Q. And did he clear you to return back to work?

15 A. No. He told me that --

16 Mr. Lyon: Objection, hearsay.

17 Commissioner Wilkerson: You can't tell
18 me what he said.

19 Q. You can't tell me what --

20 A. -- the statement said that --

21 Mr. Lyon: Objection, hearsay.

22 Commissioner Wilkerson: You can't tell
23 me what the statement -- what --

24 Q. -- you -- you -- what's your understanding of --

25 Commissioner Wilkerson: -- yes.

1 Q. -- of his -- what he said?

2 A. -- that my -- with me being able not to be able to
3 perform the duties of a Police Officer or a Deputy no
4 longer; that I cannot work no more because of no
5 running or jumping or not being able to run or perform
6 the duties.

7 Q. And in --

8 A. And myself, me, myself, and he said the same
9 thing, that -- that -- or perform the duties of a
10 Deputy I'm looking at also, if I can't perform the
11 duties of -- duties of a Deputy I might get myself
12 killed or someone else killed.

13 Q. -- and in what kinds of situations as a Deputy
14 would you need to run?

15 A. Running after suspects, running after somebody to
16 help somebody, running after somebody inside a burning
17 or running -- you know, anything.

18 Q. So, emergency situations?

19 A. Anyway -- anything emergency situations. Fighting
20 with somebody, like I did and how I got this done; I
21 can't --

22 Q. And that's pretty important?

23 A. -- I can't do it anymore.

24 Q. That's a pretty important part of your job?

25 A. Of course. That -- that ankle may save my life; I

1 can't let it save my life no more.

2 Q. You've talked about some of the problems that
3 you're having; you continue to have pain in your left
4 leg?

5 A. Yes.

6 Q. How often are you having pain?

7 A. It's daily.

8 Q. Okay.

9 A. It's every day when I walk a little bit or even
10 when I'm laying in bed, I finally just stay -- stay in
11 bed and lay in bed and it just -- it just pulses. So,
12 I just kind of -- I try to keep it up as much as I can.

13 Q. And did you have any of that pain in your left
14 ankle prior to your work accident on February --

15 A. No.

16 Q. -- 16 --

17 A. Huh-uh.

18 Q. -- 2017?

19 A. No.

20 Q. You mentioned that you also have pain into your
21 heel and the top of your foot?

22 A. Yes.

23 Q. And walking exacerbates that pain?

24 A. Yes.

25 Q. How does this injury affect your daily living?

1 A. Well, I really can't do nothing. I can't walk as
2 far as I used to. I -- I live with the pain now just
3 like any other thing but I -- I just -- I can't do
4 certain things that I can do. I can't run no more. I
5 can't, you know, walk no more that's far. I mean, I
6 can't lift things; I mean, it puts all this added
7 weight on my ankle and I can't do it. I would --
8 there's more pain now than I was when I was with a boot
9 and a wheelie, the little scooter.

10 Q. And you have --

11 A. I didn't have no pain when I was on the scooter
12 because it was up and propped up.

13 Q. -- right.

14 A. Now that I'm walking on it, it hurts more.

15 Q. Okay. Have you worked at all since the work
16 accident?

17 A. No.

18 Q. And I think you said this earlier but do you think
19 that you would be able to return to your job as a
20 Deputy?

21 A. No.

22 Q. And that's because you can't run --

23 A. Right.

24 Q. -- and safely perform job duties?

25 A. I can't even jump. I wouldn't be -- I -- I'd be

1 scared to jump or run on something like this; I
2 wouldn't know what would happen with it.

3 Ms. Meehan: Okay. Mr. Misuraca, that's
4 all the questions I have for you. Please
5 answer any questions the Defense Counsel may
6 have.

7 Commissioner Wilkerson: Let me make
8 sure I understand. He --

9 Ms. Meehan: Okay.

10 Commissioner Wilkerson: -- he has been
11 -- he was written out of work from, for
12 argument purposes, the day of the accident
13 until he went back in 2019. So, for about a
14 two (2) year period?

15 Ms. Meehan: Right. And then --

16 Commissioner Wilkerson: Okay. I just
17 wanted to --

18 Ms. Meehan: -- he never went back. He
19 wasn't --

20 Commissioner Wilkerson: -- okay. I
21 just wanted to make sure.

22 Ms. Meehan: -- right.

23 Commissioner Wilkerson: Not in -- yes.
24 And I'll look at the APAs later. So, that's
25 fine. I just wanted to make sure I got that

1 right, okay? All right. Thank you. Yes,
2 please answer any and all questions that
3 Defense Attorney, Mr. Lyon, may have, okay?

4 Mr. Lyon: Thank you, Your Honor.

5 CROSS-EXAMINATION

6 By Mr. Lyon:

7 Q. Mr. Misuraca, my name is Will Lyon; I represent
8 Charleston County.

9 A. Yes, sir.

10 Q. You indicated a certain point in time, I believe
11 in February of 2019, Dr. Kestner released you from his
12 care?

13 A. Yes.

14 Q. And you were doing well at that time?

15 A. It was okay but it was still hurting.

16 Q. All right. Do you recall telling Dr. Kestner that
17 you were having no issues with your ankle and had no
18 limitations as far as your ankle was concerned?

19 A. Had no what?

20 Q. No limitations as far as your ankle was concerned?

21 A. I don't recall telling him that, no.

22 Q. All right.

23 Mr. Lyon: This is on page 48 of the
24 APAs, Commissioner.

25 Commissioner Wilkerson: Okay.

- 1 Q. And you wanted to see Dr. Kestner, correct, for a
2 second opinion --
- 3 A. Yes.
- 4 Q. -- because you believed him to be one of the best
5 doctors --
- 6 A. Yes.
- 7 Q. -- in town?
- 8 A. Yes.
- 9 Q. Okay.
- 10 A. And that was -- there was a witness also in there
11 that -- one of the PAs that were with me during -- at
12 the -- at the time.
- 13 Q. Okay. And so, ultimately, your ankle improved
14 through your treatment with Dr. Kestner; did it not?
- 15 A. Somewhat.
- 16 Q. Okay. And you were pleased with the care you
17 received from Dr. Kestner?
- 18 A. What?
- 19 Q. You were pleased with the care you got from Dr.
20 Kestner?
- 21 A. Not fully.
- 22 Q. Was any of the treatment Dr. Kestner recommended
23 for you, was it ever denied or -- or not provided to
24 you?
- 25 A. I wouldn't say it wasn't denied but it seemed like

1 to me it wasn't proper, meaning there was times when I
2 went back in there that I felt that he didn't believe
3 me and because of that he never touched my foot at
4 times. I would tell him it's still in pain, he don't
5 even look at it; he just says, okay, see you in four
6 (4) weeks, writes it down and then I leave. And to me
7 that's not -- that's nothing.

8 Q. And, again, you actually wanted to see Dr.
9 Kestner; I mean, he was your choice for -- for a second
10 opinion?

11 A. Yes.

12 Q. Okay. You also mentioned seeing Dr. McConnell?

13 A. Yes.

14 Q. And I believe you saw Dr. McConnell in June of
15 this year?

16 A. I believe it was June; I'm not sure. I mean, I
17 can't remember dates right now.

18 Commissioner Wilkerson: Which APA is
19 that?

20 Mr. Lyon: The McConnell report?

21 Commissioner Wilkerson: Claimant's?

22 Mr. Lyon: Claimant's page 136.

23 Commissioner Wilkerson: Okay. That's
24 fine.

25 Q. And if I understand your testimony, just a minute

1 ago you had testified that you continue to have
2 constant pain in your ankle?

3 A. In my ankle now, yes.

4 Q. Okay. It's there twenty-four/seven (24/7)?

5 A. Yeah.

6 Q. All right. And has that been true since Dr.
7 Kestner released you?

8 A. Yes. After that it started getting a little bit
9 more pain, a little bit more pain and now it's like
10 just -- it's constant every day now.

11 Q. Have you reviewed Dr. McConnell's report following
12 your evaluation?

13 A. Vaguely. I remember just him writing something in
14 there and that was it. It was -- I don't know. I
15 can't remember what the percentage was or whatever, but
16 --

17 Q. Well, did you actually get a copy of -- of the
18 report that was completed after your evaluation?

19 A. -- I think I did, yeah.

20 Q. And did you review it?

21 A. I looked at it briefly and put it away.

22 Q. Okay. So, then, are you aware that he noted that
23 you were only having occasional discomfort and
24 intermittent discomfort in your ankle?

25 A. My -- yes, probably.

1 Mr. Lyon: And that's on page 138 of the
2 APAs.

3 Q. Again, you had testified earlier that -- that you
4 walk with a limp or there is some limping?

5 A. Very little. Yeah, you can see it because I --
6 I'm trying to stay off of the pain; that's why.

7 Q. All right. Again, on page 138 of the APAs, Dr.
8 McConnell noted that on observation of his gait pattern
9 he walks essentially with a non-antalgic gait?

10 A. That was at the time, yeah.

11 Q. Okay. So, when you saw Dr. McConnell you didn't
12 have any limp --

13 A. Probably not --

14 Q. -- is that correct?

15 A. -- if he stated that but it got worse.

16 Q. And you're not taking any medications specifically
17 for your ankle injury, are you?

18 A. No. Just Ibuprofen, like at a time; if I have a
19 little bit of pain I'll take Ibuprofen or something,
20 whatever, or Aleve.

21 Q. And you ultimately resigned from Charleston
22 County; you submitted a letter of -- of resignation?

23 A. Resignation, yes.

24 Q. And in your letter of resignation you didn't
25 mention anything about your ankle injury preventing you

1 from -- from returning to work at the Sheriff's Office,
2 did you?

3 A. No. There was no need to.

4 Q. But from your testimony earlier, you indicated
5 that -- that you, personally, don't believe you could
6 work as a Deputy due to your ankle injury?

7 A. Correct.

8 Q. All right.

9 A. I cannot perform the duties as a Deputy with this
10 bad ankle like this.

11 Q. Did you ever treat at the VA Hospital for your
12 ankle?

13 A. I don't believe that should be part of this
14 testimony.

15 Q. I'm just asking, after this accident did you ever
16 receive any treatment on your ankle --

17 A. No.

18 Q. -- from the VA Medical Center?

19 A. No.

20 Q. Okay. And having reviewed Dr. McConnell's report,
21 you're aware he put in his note, Patient states he has
22 not returned to work as a Sheriff's Deputy secondary --
23 secondary to disability retirement through the VA; is
24 that something you told Dr. McConnell?

25 A. I'm sorry; repeat it again.

1 Q. Sure. Patient states he has not returned to work
2 as a Sheriff's Deputy secondary to disability
3 retirement through the VA; is that something you told
4 Dr. McConnell?

5 A. I don't remember.

6 Q. All right. Do you dispute it if it's -- if it's
7 something --

8 A. I don't remember.

9 Q. -- I -- I'm asking you do you dispute that if it's
10 in his note?

11 A. If it's in his notes probably. I don't remember,
12 sir. I honestly don't remember but the VA has nothing
13 to do with my ankle; they haven't treated it or
14 anything.

15 Q. All right. And you're not getting any VA
16 Disability benefits for your ankle, are you?

17 A. None, whatsoever.

18 Q. Now, after this accident, you applied for Social
19 Security Disability benefits?

20 A. After the accident?

21 Q. After your work accident.

22 A. No, it was after -- way after it was -- it was --
23 I can't remember when.

24 Q. Sure. At some point after your accident --

25 A. Yeah.

1 Q. -- you applied for Social Security. And presently
2 you are receiving Social Security Disability benefits?

3 A. Yes.

4 Q. All right. And is that for your left ankle?

5 A. Yes.

6 Q. All right. Is it for any other conditions or
7 injuries?

8 A. It could have been from -- from my -- I think they
9 -- I put in for the disabilities of my -- also from the
10 VA, yes.

11 Q. Oh, what are those disabilities?

12 A. My migraines, my -- my back injury, my anxiety, my
13 panic attacks, my depression. What else? There's
14 other -- other things also. My left knee and my
15 hearing, loss of hearing --

16 Q. Okay.

17 A. -- tinnitus.

18 Q. And in terms of your Social Security Disability
19 benefits, were you receiving those at the time you
20 resigned from Charleston County?

21 A. I received them from the time when I got accepted
22 from them.

23 Q. That's what I meant. Were you getting a check --

24 A. Yes.

25 Q. -- at the time you resigned from Charleston

1 County?

2 A. Yes.

3 Q. All right. So, if you had gone back to work as a
4 Deputy with Charleston County, would that have impacted
5 the amount of Social Security Disability you got?

6 A. It would have been actually -- I don't know; I'd
7 have to look at the -- I'd have to look at the figures
8 but as far as take home pay, I think at the time at the
9 County I was taking home -- after taxes, I was taking
10 home probably two thousand and -- and forty-eight
11 dollars (\$2,048.00) a month. Monthly, I take home two
12 thousand, three hundred forty-seven dollars (\$2,347.00)
13 or something like that.

14 Q. In Social Security Disability?

15 A. Yeah.

16 Q. And you also have VA Disability benefits --

17 A. Yes.

18 Q. -- as you mentioned earlier? Do you have any
19 other health conditions, which would impact your
20 ability to return to work as a Deputy Sheriff?

21 A. Probably the --

22 Ms. Meehan: I'm going to object to this
23 line of questioning as we're not addressing
24 other body parts but --

25 Commissioner Wilkerson: The only body

1 parts is the left foot or left leg.

2 Mr. Lyon: I think it goes to the
3 disability.

4 Ms. Meehan: Well, I -- I mean, I would
5 argue that we're only talking --

6 Commissioner Wilkerson: You said it's a
7 single member --

8 Ms. Meehan: -- disability related --

9 Commissioner Wilkerson: -- so, it can't
10 go to disability --

11 Ms. Meehan: -- to the left leg.

12 Commissioner Wilkerson: -- if it's a
13 single member. If it's -- if it's -- if it's
14 multiple body parts I would agree with you,
15 that it may go to the disability but you have
16 indicated it's a single member case. So,
17 we're here for the single member; it doesn't
18 matter.

19 Mr. Lyon: Well, I think if he has other
20 disabling conditions, which impact his
21 ability to work, that would flow into the
22 disability award for the --

23 Commissioner Wilkerson: But --

24 Ms. Meehan: That --

25 Mr. Lyon: -- left leg.

1 Ms. Meehan: -- that would go to earning
2 capacity --

3 Commissioner Wilkerson: -- but you
4 didn't ask --

5 Ms. Meehan: -- and single member.

6 Commissioner Wilkerson: -- yes. Yes,
7 that wouldn't go to what we're here today
8 for.

9 Mr. Lyon: All right.

10 Commissioner Wilkerson: Yes. I'm not
11 saying it doesn't; it's just not what we're
12 here today for.

13 Q. Mr. Misuraca, did you sustain any injuries aside
14 from your left ankle as a result of your accident on
15 February 16th, 2017?

16 Ms. Meehan: Again, I'm going to object.
17 We're only going forward --

18 Commissioner Wilkerson: Single member.
19 You --

20 Ms. Meehan: -- on the left ankle.

21 Commissioner Wilkerson: -- we're here
22 on your behalf.

23 Ms. Meehan: We're going forward, I
24 think --

25 Commissioner Wilkerson: You -- you have

1 designated that --

2 Mr. Lyon: Commissioner, I think that's
3 a proper question. I --

4 Commissioner Wilkerson: -- well, I
5 don't -- not on your 21. Look -- look what
6 your 21 says. What does your 21 say we're
7 here for? Look at it.

8 Mr. Lyon: -- well, I -- and I
9 understand, Commissioner, but --

10 Commissioner Wilkerson: I didn't -- I
11 didn't fill it out. What does it say?
12 That's my question to you; what does your 21
13 say?

14 Mr. Lyon: -- well, and I think --

15 Commissioner Wilkerson: That's what
16 we're here for.

17 Mr. Lyon: -- I understand,
18 Commissioner. I just want to put on the
19 record that we've asked for all injuries to
20 be addressed, all alleged injuries.

21 Commissioner Wilkerson: I asked you a
22 question that hasn't been answered.

23 Mr. Lyon: I'm sorry, Commissioner.

24 Commissioner Wilkerson: What is on your
25 21?

1 Mr. Lyon: A request to determine
2 permanent disability compensation.

3 Commissioner Wilkerson: For the single
4 member.

5 Mr. Lyon: For the --

6 Commissioner Wilkerson: That's the only
7 thing that is accepted; that's the only thing
8 we're here for. That's what you asked for;
9 that's what the hearing is held today for.
10 If you had alleged other body parts,
11 everything that came forward, then you have
12 an opportunity to open that question but you
13 didn't ask for that. You said stop pay for
14 the PPD and/or -- that's what we're here for
15 and -- and you all have only accepted the
16 left ankle; that's it. That's what we're
17 here for is the left ankle and foot; I'll
18 give you that, okay?

19 Q. Mr. Misuraca, just to be clear, you were already
20 receiving Social Security Disability benefits at the
21 time you resigned from Charleston County?

22 A. Yes, before.

23 Q. Okay.

24 A. Yes, sir.

25 Q. All right.

1 Mr. Lyon: No further questions, Your
2 Honor.

3 Ms. Meehan: Just briefly, Commissioner.

4 REDIRECT EXAMINATION

5 By Ms. Meehan:

6 Q. Mr. Misuraca, you indicated you saw Dr. Wiseglass
7 for a fit for duty in February or March. I'm going to
8 show you Defendant's APA, page 16, and the date of that
9 evaluation is February 19th, 2019; does that refresh
10 your memory as to when you saw --

11 A. Yes.

12 Q. -- Dr. Wiseglass?

13 A. Yes.

14 Q. And is that the date that you saw Dr. Wiseglass
15 for your fit for duty evaluation, February 19th, 2019?

16 A. Yes.

17 Q. Okay. And you were asked about a resignation
18 letter that you submitted; I'll show you that.

19 Ms. Meehan: That's Defendant's APA,
20 page 53.

21 Q. Is this the letter that you submitted with your
22 resignation?

23 A. Yes, ma'am.

24 Q. And this letter is also dated February 19th, 2019?

25 A. Yes.

1 Q. That was the date you saw Dr. Wiseglass --

2 A. Yes.

3 Q. -- when he did not clear you to return to --

4 A. Right.

5 Q. -- work?

6 A. The same date.

7 Ms. Meehan: That's all the questions
8 that I have.

9 RECROSS-EXAMINATION

10 By Mr. Lyon:

11 Q. Mr. Misuraca, in the same report Counsel just
12 asked you about from Dr. Wiseglass --

13 Commissioner Wilkerson: Still on page
14 16; is that fair?

15 Mr. Lyon: -- yes, sir.

16 Commissioner Wilkerson: Okay.

17 Mr. Lyon: I think -- is it on page 16
18 of your APAs, Catie?

19 Ms. Meehan: Yes. Of yours --

20 Mr. Lyon: Okay.

21 Ms. Meehan: -- yes.

22 Commissioner Wilkerson: Of yours, yes.

23 Mr. Lyon: Okay.

24 Q. Starting on page 16 --

25 Mr. Lyon: -- I'm looking at page 20,

1 Commissioner.

2 Commissioner Wilkerson: Okay.

3 Q. Did you mention any other health conditions to Dr.
4 Wiseglass that impacted your ability to return to work?

5 Ms. Meehan: I'm going to object again.

6 Mr. Lyon: She opened the door for it;
7 she asked about the report.

8 Commissioner Wilkerson: She asked about
9 page 16 --

10 Ms. Meehan: I asked about --

11 Commissioner Wilkerson: -- she didn't
12 ask about page 20.

13 Ms. Meehan: -- right.

14 Mr. Lyon: She asked about --

15 Commissioner Wilkerson: I'm telling --
16 that's what I told you before we started,
17 we're on such a narrow line of what we're
18 trying to accomplish here.

19 Mr. Lyon: -- so, I'm -- I'm -- I can't
20 ask him about the contents --

21 Commissioner Wilkerson: You can ask --

22 Mr. Lyon: -- of the rest of the report?

23 Commissioner Wilkerson: -- you can ask
24 him about the last medical appointment.

25 Mr. Lyon: And that's what it is; it's

1 all in the same report.

2 Commissioner Wilkerson: You can ask
3 about the last medical report.

4 Mr. Lyon: That's what I'm doing.

5 Commissioner Wilkerson: Yes.

6 Mr. Lyon: This is -- this is the same
7 report Catie just asked him about.

8 Commissioner Wilkerson: Okay. Well, I
9 don't know because I don't have your APAs.

10 Witness: Can I see it?

11 Commissioner Wilkerson: I can't rule on
12 it because I don't have -- I still don't have
13 your APAs. I don't have anybody's APAs.

14 Mr. Lyon: Right. This is a --

15 Commissioner Wilkerson: I'll take you
16 all for your word that it's the same report.

17 Mr. Lyon: -- it is --

18 Commissioner Wilkerson: Okay.

19 Mr. Lyon: -- the same report.

20 Commissioner Wilkerson: If it's the
21 same -- that's fine.

22 Mr. Lyon: All right.

23 Q. Mr. Misuraca, my question was, when you last saw
24 Dr. Wiseglass did you mention any other health
25 conditions, aside from your left ankle, that prevented

1 you from working?

2 Ms. Meehan: And I would just like to
3 preserve my objection.

4 Commissioner Wilkerson: I understand.
5 I mean, he can answer that question because
6 --

7 Witness: I'm trying to find out where
8 it's at.

9 Mr. Lyon: Sure. And I can direct you.
10 It's on the last page of the note there.

11 Ms. Meehan: It's going to be your
12 second to the last page, actually.

13 Witness: Okay.

14 Ms. Meehan: You just need to answer it.

15 Q. And if you look at the bottom where the paragraph
16 starts, additionally, that's what I'm referring to.

17 A. Okay.

18 Commissioner Wilkerson: Page 20, the
19 bottom of page 20.

20 Witness: Yes, sir.

21 Witness: Right here (indicating)
22 additional? I'm just trying to see if I'm on
23 the right page.

24 Mr. Lyon: Here I can -- I'll show you,
25 Mr. Misuraca. Correct. Yes, sir. That's

1 where I'm referring to.

2 Witness: Okay.

3 Mr. Lyon: It's in my question -- do you
4 need me to repeat the question?

5 Witness: That's it, right there?

6 Ms. Meehan: You just need to answer his
7 question.

8 Witness: Yeah. I'm just saying that's
9 where he's going right there (indicating).

10 Mr. Lyon: Okay.

11 Ms. Meehan: If that's where he just
12 pointed out.

13 A. Yes. It says this one has very significant lumbar
14 spine and cervical pain -- pain -- spine arthritis.

15 Q. Okay. So, did you discuss other health conditions
16 that impacted your ability to work with Dr. Wiseglass?

17 Ms. Meehan: Same objection. You can
18 still answer it.

19 Commissioner Wilkerson: You can still
20 answer the question. I understand the
21 objection. That's for the appeal purpose.

22 A. A little bit, yes.

23 Q. Okay.

24 Mr. Lyon: No further questions, Your
25 Honor.

1 Commissioner Wilkerson: Anything else?

2 Ms. Meehan: Possibly.

3 Commissioner Wilkerson: And I'll need
4 to get you all's APAs before you leave.

5 FURTHER REDIRECT EXAMINATION

6 By Ms. Meehan:

7 Q. When you saw Dr. Wiseglass on February 19th, 2019,
8 was that for a fit for duty for your left ankle?

9 A. Yeah. It was only for my left ankle.

10 Q. And that's what is written here (indicating) as
11 chief complaint, correct?

12 A. Yes.

13 Q. And on page 20, Dr. Wiseglass has work-related,
14 yes; is that correct?

15 A. Yes.

16 Q. Works status fitness for duty: Unable to work due
17 to work-related injury; is that correct?

18 A. Yes.

19 Q. And that was your understanding --

20 A. Yes.

21 Q. -- at that time?

22 A. And also, I'd like to -- I'd like to point out
23 that at the time I was working my back was still -- I
24 was still injured with my back and I was still working.

25 Ms. Meehan: No further questions.

1 Mr. Lyon: Just for clarifications
2 purposes.

3 FURTHER RECROSS-EXAMINATION

4 By Mr. Lyon:

5 Q. You mentioned at the time you were working you
6 were still working with your -- with you back?

7 A. Meaning, I wasn't there -- I wasn't there to see
8 wiseglass for my back; I was there for my ankle, not my
9 back.

10 Q. Okay. Well, and I'm just for clarification. When
11 you say you were working with your back, you didn't
12 return to work after this accident at any point, did
13 you?

14 A. No.

15 Q. Okay. So, you -- you mean you were working before
16 the accident, even with back issues?

17 A. Yes.

18 Q. Okay.

19 A. But it was for my ankle.

20 Q. Okay.

21 Mr. Lyon: That's all I have. Thank
22 you.

23 Ms. Meehan: Nothing further.

24 Commissioner Wilkerson: Okay. Any
25 other witnesses?

1 Ms. Meehan: No other -- well, none from
2 the Claimant.

3 Commissioner Wilkerson: You don't have
4 any witnesses? I think Will said they didn't
5 have any. This concludes our hearing. Let
6 me meet with the attorneys for a few minutes.
7 Thank you all.

8 (THERE BEING NO FURTHER QUESTIONS, THE HEARING CONCLUDED AT
9 12:24 P.M.)

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25

STATE OF SOUTH CAROLINA)
)
 COUNTY OF BERKELEY) CERTIFICATE

Be it known that I took the foregoing South Carolina Workers' Compensation Commission Hearing of Paul Misuraca, vs. Charleston County;

That I was then and there a Notary Public in and for the State of South Carolina-At-Large;

That by virtue thereof I was duly authorized to administer an oath;

That the witness was first duly sworn to testify the truth, the whole truth, and nothing but the truth, concerning the matter in controversy aforesaid;

The foregoing transcript of 67 typewritten pages represents a true, accurate and complete transcription of the testimony so given at the time and place aforesaid to the best of my skill and ability;

That I am not related to nor an employee of any of the parties hereto, nor a relative or employee of any attorney or counsel employed by the parties hereto, nor interested in the outcome of this action;

Witness my hand and seal this 11th Day of August, 2019.

Gloria G. Davis
 Gloria G. Davis
 Notary Public for South Carolina
 My Commission Expires 12/21/21

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STATE OF SOUTH CAROLINA
BEFORE THE
SOUTH CAROLINA WORKERS' COMPENSATION COMMISSION
WCC No. 1701642

Paul Misuraca,)
)
Claimant,)
)
v.)
)
Charleston County,)
)
Employer,)
)
and)
)
South Carolina)
Association of Counties,)
)
Carrier/Defendant,)
)
)
)

FULL COMMISSION HEARING

Monday, March 16, 2020
2:25 p.m. - 2:51 p.m.

COPY

The Full Commission Hearing was heard before Commissioners Susan S. Barden, R. Michael Campbell, II, and Gene McCaskill, at the Workers' Compensation Commission, 1333 Main Street, Suite 500, Columbia, South Carolina, on the 16th day of March 2020, before Amber Scarborough, Court Reporter and Notary Public in and for the State of South Carolina.



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(803) 252-3445 / (800) 822-0896

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EXHIBITS

(No Exhibits were marked at this hearing.)

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



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CALL TO ORDER:

COURT REPORTER: Today is March 16th, 2020. This is South Carolina Workers' Compensation Case Number 1701642. This is the case of Paul Misuraca versus Charleston County and the South Carolina Association of Counties. The Appellant is the Defendant, represented by William Lyon. The Respondent is represented by -- you're not Mr. Pearlman --

MS. MEEHAN: Caty Meehan.

COMMISSIONER MCCASKILL: Oh, I should have told you that, I'm sorry, and it's with a C.

COURT REPORTER: Okay. The Respondent is represented by Caty Meehan. Each side is allowed ten minutes for oral argument and the Appellant three minutes in reply. You are requested to argue the grounds of exception and stay within the record.

COMMISSIONER McCASKILL: All right. Mr. Lyon?

APPELLANT'S POSITION:

MR. LYON: May it please the Commission. We're here today, I'm seeking a review and reversal of the Hearing Commissioner's decision and Order. And by way of a little bit of background, the procedural background, so this case was set for

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1 a hearing on Defendant's Form 21, which was
2 filed May 1st of 2009. The Respondent filed an
3 amended Form 50, not requesting a hearing on
4 May 31st, 2019, alleging injuries to the back
5 and depression, adding those injuries. It's an
6 admitted left ankle injury. A hearing was set
7 on June 24th, 2019. At that hearing the
8 Respondent argued that the Appellant's weren't
9 current on temporary total benefits thus the
10 hearing could not go forward. There was never
11 any request for mediation made, no allegation
12 of total disability made at that hearing.
13 Defendant's complied with the -- and the order
14 became current. The hearing was reset on July
15 25th, 2019. Again, before both the June and
16 the July hearings, pre-hearing briefs were
17 filed and it was marked on each pre-hearing
18 brief by the Respondent that they were amending
19 their Form 50/51 to include the back and
20 psychological as alleged injuries. At the time
21 of the hearing on July 25th, 2019, which is the
22 Order in which we're appealing, the Respondent
23 amended his pre-hearing brief to take out the
24 injuries to the back and psychological but
25 reserved the right to later prosecute those

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1 injuries. According to Regulation 67-211(b),
2 any amendment to a pre-hearing brief must be
3 made within five days of the hearing. In other
4 words, prior to five days. Otherwise the party
5 seeking to amend must move for relief under 67-
6 213 which would be for an adjournment or
7 postponement of the hearing. No motion for
8 postponement was made and no motion for
9 adjournment was made. The Hearing Commissioner
10 allowed Respondent to amend the pre-hearing
11 brief and remove those injuries. The
12 Appellants requested the Hearing Commissioner
13 to make a determination as to whether or not
14 the back and psychological injuries were
15 compensable, as the Claimant was alleging from
16 a total disability. So, the Hearing
17 Commissioner, rather than rule on
18 compensability of those, again allowed the
19 Respondent to amend the pre-hearing brief and
20 take those injuries in contravention of the
21 regulation. We contend that's an error of law
22 and obviously if there's an error of law, there
23 has to be substantial prejudice resulting to
24 the party. In this case there is substantial
25 prejudice because now the claim is separated



1 into each individual injury. We have the
2 admitted ankle injury, which has been ruled on.
3 MMI and permanency's been awarded. Now, the
4 claim stays open for the denied back and
5 psychological injuries, which the Hearing
6 Commissioner would not address. We contend
7 that this is essentially against the primary
8 legislative intent of the Act. And it's noted
9 in the *Tucker versus SCDOT* case that the
10 parties, the Commission must act reasonably to
11 move the claim toward quick and efficient
12 official resolution.

13 **COMMISSIONER BARDEN:** But you would have the right
14 to file a petition for a hearing if you --
15 wouldn't you not?

16 **MR. LYON:** Well, again ---

17 **COMMISSIONER BARDEN:** I mean, I know there's a 50
18 out there.

19 **MR. LYON:** Right. So ---

20 **COMMISSIONER BARDEN:** But you have the right to get
21 it in front of the Commission, as well on other
22 issues, yeah.

23 **MR. LYON:** Right. And by way of the procedural
24 history, so the Form 21 was filed, then the
25 amended 50 now requesting a hearing alleging --



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COMMISSIONER BARDEN: In which he was not before Commissioner Wilkerson, correct?

MR. LYON: Correct. But on the pre-hearing brief and it also marked on there to include those additional injuries..

COMMISSIONER BARDEN: Okay. So, you're -- all right.

MR. LYON: So essentially, Commissioner, we were in the place of, if the hearing moves forward then we're going to have different claims for each injury. In other words, we're going to have different dates of MMI, different payment, different periods of permanent disability compensation paid. The Tucker court said that essentially that the Commission and the parties have to move these claims forward. It's the Tucker court specifically noted that just because an employee files a claim in March not requesting a hearing doesn't mean the claim can sit. And again, if the claims are bifurcated into each individual injury that creates protracted litigation. It's not a quick and efficient resolution of the claim. So, for an example if you have an employee with ---



1 COMMISSIONER BARDEN: If they're not ready to go
2 forward on those body parts then, you know, I'm
3 just trying to ---

4 MR. LYONS: Well, Commissioner, here's an example.
5 If you have multiple admitted injuries and I
6 file a 21 saying okay, for ---

7 COMMISSIONER BARDEN: Because your injuries, just the
8 admitted, not the back and the depression,
9 right?

10 MR. LYONS: Correct.

11 COMMISSIONER BARDEN: So, you're only there for the
12 leg?

13 MR. LYONS: Correct.

14 COMMISSIONER BARDEN: That's what you want
15 adjudicated, whether it's stop payment, pay,
16 whatever?

17 MR. LYON: Correct. And as well as a determination
18 of whether or not these other injuries were
19 compensable. The Claimant had alleged them
20 prior, two months prior to the hearing so there
21 wasn't -- and had also marked on the Form 58.
22 Number one, listing those injuries and Number
23 two, that they were amending their prior
24 pleading so ---

25 COMMISSIONER BARDEN: Well, what if it indicates



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1 where a Claimant is withdrawing those
2 permanently. And I have that everyday where
3 somebody will have multiple body parts and
4 they'll say no, Commissioner, we're not
5 pleading the back and the psych for now. We're
6 just -- it's just the leg.

7 **MR. LYON:** Only thing that's different, that's not
8 what happened here.

9 **COMMISSIONER BARDEN:** Okay. Well ---

10 **MR. LYON:** In this case the Employee basically said,
11 we're not giving up these other injuries.
12 We're going to litigate them later down the
13 road. So at what point, I mean ---

14 **COMMISSIONER BARDEN:** So you're saying for efficiency
15 and judicial economy that it should have been
16 all at one time?

17 **MR. LYON:** Correct, Your Honor. And by way of an
18 example, yeah, and if you have multiple
19 injuries and I file a 21 cause the employee
20 reaches MMI on one specific injury, but isn't
21 at MMI at the other injuries, I mean typically
22 it's going to -- y'all aren't going to hear
23 that. Y'all are going to wait until he's at
24 MMI for all of the injuries before hearing it.
25 But, I mean, the way this was done, I could



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1 technically do that. I could file a 21 as soon
2 as there are MMIs from one injury and say
3 address compensability and then we litigate
4 each individual injury separately. So you have
5 separate period to change of condition for
6 every one, you have separate PPD awards. In
7 other words, it's more rational to adjudicate
8 everything at once. And I don't think any
9 argument can be made that the Employee, you
10 know ---

11 **COMMISSIONER BARDEN:** Well, especially -- you would
12 seem to consolidate them if he were going for
13 say permanent and total disability.

14 **MR. LYONS:** Well, and that's, again, that's what was
15 essentially alleged at the July hearing.

16 **COMMISSIONER BARDEN:** Okay.

17 **MR. LYONS:** So they alleged permanent and total
18 disability, requested mediation. We contended
19 that it was a single scheduled injury, not
20 right for mediation. However, if the
21 Commissioner determined either one of those
22 injuries were compensable then it would fall
23 under mandatory mediation.

24 **COMMISSIONER BARDEN:** But you would have already had
25 a hearing on the leg?



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1 **MR. LYONS:** Correct. And permanency could've been
2 held in abeyance. And then again, if he found
3 one ---

4 **COMMISSIONER BARDEN:** You could go to mediation
5 after you have the leg hearing and order and --

6
7 **MR. LYONS:** Well, again, if he had found one of the
8 other injuries compensable, the Employee
9 wouldn't have been at maximum medical
10 improvement for those.

11 **COMMISSIONER BARDEN:** Right.

12 **MR. LYONS:** So, at that point ---

13 **COMMISSIONER BARDEN:** Just trying to think this
14 thing through.

15 **MR. LYONS:** The Hearing Commissioner could've
16 awarded. He could've made a compensability
17 finding and if he did find him compensable ---

18 **COMMISSIONER BARDEN:** Well, once they withdrew him
19 he couldn't do that.

20 **MR. LYONS:** Right. But, again, it's not in the
21 sense of we're withdrawing, we're not pursuing
22 these. It's we're just withdrawing them for
23 purposes of today, but we're going to go
24 forward on them later. So, now, I mean at what
25 point is an Employer left -- I mean, not to



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1 have to litigate every individually separately
2 based on the Claimants timeline. I mean, if
3 the Claimant alleges these injuries, there's a
4 hearing set, they filed pleadings, they should
5 be ready to go forward. They had notice, they
6 pled it.

7 **COMMISSIONER BARDEN:** Was there any discussion of
8 holding the 21 and taking the 50 and doing it
9 at another date?

10 **MR. LYON:** No, there's never an issue with the
11 hearing.

12 **COMMISSIONER BARDEN:** And that seems to be what the,
13 may be the solution. Maybe one of them
14 might've been just to hold the 21 in abeyance
15 and then decide with the 50, I don't know.

16 **MR. LYON:** Well, now, that was never raised at the
17 hearing for the single Commissioner.

18 **COMMISSIONER BARDEN:** That wasn't suggested as an
19 alternative or option?

20 **MR. LYON:** Right. And again, that, you know, what
21 was brought up was the Commissioner could
22 address compensability of the other injuries
23 and if you found those were compensable, then
24 he could have made the requisite order for
25 additional treatment, then the case wouldn't be



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1 right for a permanency hearing at that point,
2 but that's not what happened. I suspect what
3 happened was and the reason the injuries were
4 temporarily withdrawn to be litigated another
5 day, is the Employee didn't have the evidence
6 to support the injuries. Because, again, there
7 was an amended Form 50 filed two months before
8 this hearing. So, the Employee clearly was on
9 notice of these injuries, had adequate time to
10 obtain any evidence he needed to prosecute
11 those injuries, then at the time of the hearing
12 withdrew them for a later date. And the Tucker
13 court actually talked about this. They
14 discussed the possibility that a Form 50 could
15 be filed by a litigate in hopes that evidence
16 would later develop to support that claim and
17 the court said they should have no chance of
18 success. The Commission must act and employers
19 may request a hearing or in some other fashion
20 seek to protect their interest and that's what
21 we did by asking the Hearing Commissioner to
22 address compensability of these injuries.

23 **COMMISSIONER BARDEN:** So, what would you have us do,
24 vacate that Order and send it all back, all of
25 it, to be adjudicated at one time? I mean, I'm



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1 trying to see what it is ---

2 **MR. LYON:** That -- the relief we're asking is, as
3 the Appellant Panel, the final fact finder,
4 the Commission ---

5 **COMMISSIONER BARDEN:** You're not asking us to
6 adjudicate the back and the psych are you?

7 **MR. LYON:** The evidence is in the record,
8 Commissioner. I mean, I think this panel can
9 make those findings or you can remand for a new
10 hearing based upon the evidence in the record
11 at the time of the hearing in July 2019.

12 **COMMISSIONER MCCASKILL:** All right.

13 **COMMISSIONER BARDEN:** I took a lot of your time, is
14 there something that you ...

15 **MR. LYON:** Those are my main arguments,
16 Commissioner.

17 **COMMISSIONER BARDEN:** Okay. You'll have three
18 minutes in reply.

19 **COMMISSIONER MCCASKILL:** Ms. Meehan?

20 **RESPONDENT'S POSITION:**

21 **MS. MEEHAN:** May it please the Commission. Your
22 Honors, we're here today seeking a full
23 affirmation of the Hearing Commissioner's
24 decision and Order. Let me speak first to the
25 point that Mr. Lyon raised about adjudicating



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1 the back and the psychological issues since
2 that was raised. Regulation 67-610 says an
3 amended form must be filed with the Commission
4 to indicate a change in the relief requested.
5 In this case the Defendant's filed a Form 21 on
6 May 1st, 2019 seeking a determination of or
7 seeking to stop payment of temporary total
8 disability and a determination of permanent
9 partial disability and a determination of
10 permanent partial disability for the left leg
11 only. They never filed an amended Form 21, nor
12 did they file on their Form 58 or plead
13 anything related to the back or the psych or
14 any of the denied body parts asking for a
15 determination of compensability of those body
16 parts. The Form 58 that was filed listed under
17 Type of Injury and Body Parts, left ankle.
18 Under Facts and Controversy the Defendant's
19 stated, Defendant's request a finding that
20 Claimant has reached MMI and a determination of
21 permanent partial disability under 42-930 for
22 the left leg. Defendant's further request a
23 credit for temporary total benefits paid after
24 MMI and certification of the Form 17. Now, the
25 regulation states that if the relief requested



1 changes, they must file an amended pleading.
2 This was a hearing request from their Form 21.
3 Our Form 50 that was filed on May 31st was not
4 a hearing request. It was a Notice of Claim
5 amending the body parts and our Form 58 did the
6 same. Regulation 67-609 allows the Claimant to
7 withdraw a Form 50 with prej- -- without
8 prejudice once as a matter of right. It's our
9 argument that the legislative intent actually
10 is that a Claimant should not be forced to
11 litigate body parts that he's not ready to move
12 forward on.

13 **COMMISSIONER BARDEN:** And there was no motion made
14 by anybody to consolidate, to postpone the
15 matters?

16 **MS. MEEHAN:** Your Honor ---

17 **COMMISSIONER BARDEN:** Well, I'm not saying that
18 would have solved your purposes. To state on
19 the record, that was not even motion -- no
20 motion made to do that, correct?

21 **MS. MEEHAN:** Correct, Your Honor. And I will tell
22 you that we had a very lengthy pre-hearing
23 conference in which we did agree to stipulate
24 to MMI for the left leg, postpone the hearing
25 and mediate, you know, all body parts together.



1 We did agree to that. The Defendant's would
2 not agree to do that. So there was discussion
3 of postponing the Form 21 hearing that went
4 forward on July 25. Now, Mr. Lyons made
5 arguments about judicial efficiency and economy
6 -

7 **COMMISSIONER BARDEN:** Yeah, I think I said that.

8 **MS. MEEHAN:** Oh, okay. Well, let's talk about that.

9 The Form 21 that was filed on May 1st, 2019 was
10 a waste of judicial resources. We all
11 gathered, all parties gathered on June 24th for
12 a hearing with the Defendant's knowing that
13 they were not current on temporary total
14 disability benefits. So, that brings me to my
15 next point, which I want to briefly talk about,
16 is we are requesting that the Commissioner's
17 finding that the Defendant's were only entitled
18 to a credit of temporary total disability back
19 to July 3rd, 2019 be affirmed. And the reason
20 for that is, pursuant to 42-9-21, any payments
21 made by an employer to an injured employee
22 during a period of disability which by the
23 terms of this title were not due and payable
24 when made may, subject to the approval of the
25 Commission, be deducted from the amount to be



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1 paid as compensation. The Defendant's filed a
2 Form 21 knowing that they were not current on
3 temporary total disability payments. Why
4 should they be rewarded with a credit back to
5 February when they weren't current on payment.
6 If anything they should be assessed a 25
7 percent penalty pursuant to 42-9-260(g).

8 **COMMISSIONER McCASKILL:** But after that June hearing
9 date TT was brought current?

10 **MS. MEEHAN:** It was brought current as of July 3rd,
11 2019. So, I mean ---

12 **COMMISSIONER BARDEN:** So, they filed the first one
13 in May?

14 **MS. MEEHAN:** In May.

15 **COMMISSIONER BARDEN:** And so it wasn't current for
16 two months?

17 **MS. MEEHAN:** From February 19th ---

18 **COMMISSIONER BARDEN:** Oh, February 19th?

19 **MS. MEEHAN:** --- to May 1st and then the first
20 hearing was scheduled June 24th ---

21 **COMMISSIONER BARDEN:** Okay.

22 **MS. MEEHAN:** --- they still weren't current. They
23 became current July 3rd, 2019. And we're not
24 arguing with the credit back to that date. I
25 mean, you know, it's reasonable to think that's



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1 actually the date of the filing of the 21
2 because the Commission can't hear an
3 application for termination of benefits until
4 TTD is current. So July 3rd can be thought of
5 as that date because that's the date that the
6 claim was made current. So we would ask that
7 that finding of the Commissioner be affirmed.
8 And I just want to touch on one more point,
9 which is we are asking that the Commission
10 affirm the Hearing Commissioner's decision that
11 the Claimant's sustained a 25 percent permanent
12 partial disability to the left leg based on the
13 substantial evidence in the record. Mr.
14 Misuraca has worked for Charleston County,
15 well, worked for Charleston County for 35 years
16 at the time of his work related accident. He's
17 60 years old. His past work is 35 years with
18 the Sheriff's Office and then the Summerville
19 Police Department for two years. He also has
20 22 years of military experience and he retired
21 in 2015 from the military. So his whole
22 working career essentially was working with the
23 Sheriff's Office as a Master Deputy. He
24 sustained this left ankle injury while
25 restraining someone in the courtroom, providing



1 courtroom security, and he underwent two
2 surgeries and two years of treatment for his
3 left ankle injury. He reported to Dr. Barry
4 Weissglass, who's the county physician, for a
5 fit for duty evaluation, you know, to be
6 cleared to return to work. And Dr. Weissglass
7 -- this is APA Page or excuse me, APA 1 Page 20
8 -- indicated, under work status fitness for
9 duty, quote, unable to work due to work related
10 injury. Dr. Weissglass also opined, it is
11 unlikely that he would be able to tolerate the
12 stresses that would be placed on his ankle in
13 the performance of duty. This is a man that's
14 worked for the County, the Sheriff's Office for
15 35 years and now he can't return to his pre-
16 accident position as a result of this left leg
17 injury. So it's our position that the 25
18 percent permanent partial disability award is
19 very reasonable given the circumstances. And
20 referencing *Colvin versus EI DU PONT*, the
21 extent of an injured worker's disability is a
22 question of fact for determination by the
23 Workers' Comp Commission and will not reversed
24 if supported by competent evidence. It's our
25 position that this substantial evidence in the



1 record does support the 25 percent permanent
2 partial disability to the left leg. I want to
3 bring up one more, not to backtrack, but going
4 back to my first point about proceeding and
5 litigating the two denied body parts. Again,
6 the Claimant did not file a Form 50 or request
7 for hearing, okay? So if the Defense had
8 wanted to litigate the denied body parts, it
9 was their responsibility to amend their 21 or
10 put on their Form 58 that they wanted to
11 address compensability of those body parts. In
12 the cases *Frederick versus Wellman* the
13 circumstances are a little bit different, but
14 the Commission held that or excuse me, was held
15 that a fraud defense was properly before the
16 Commission because, while it was not pled on a
17 Form 21, the Defendant's included it on their
18 pre-hearing brief. So the Claimant had been
19 made aware that this was something that they
20 wanted to address at the hearing. Here, again,
21 on the Form 21 and on the Form 58 only the left
22 ankle was mentioned. There was no mention of
23 any of the denied body parts. And just, you
24 know, to give an example, I mean, suppose my
25 client had a knee injury and two days before a



1 scheduled hearing her knee gave out and she
2 fell and broke her other leg. Does that mean
3 that at the hearing two days later I have to
4 adjudicate now the other leg? No. The
5 legislative intent based upon Regulation 67-
6 609, which does allow Claimant to withdraw Form
7 50, indicates that a Claimant should not be
8 forced to litigate body parts until ready to do
9 so. And again, if we had wanted to litigate
10 these body parts I would've filed a Form 50
11 requesting a hearing so that everything could
12 be addressed at the same time. The Defendant's
13 had the same right to do so or file a petition
14 for a hearing at some point, that was not done.
15 So, and just in terms of timeline, our Form 50
16 amending the body parts was filed May 31st.
17 Mr. Lyon kept referencing two months. Well,
18 the original hearing was scheduled June 24th,
19 so it's not really two months. And the only
20 reason that hearing did not go forward was
21 because temporary total was not up-to-date. So
22 -- and also one more thing, we did discuss at
23 the hearing in that we did not want to litigate
24 those body parts --

25 (Timer beeps.)



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1 MS. MEEHAN: May I just finish my thought?

2 COMMISSIONER MCCASKILL: Yes, finish your thought.

3 MS. MEEHAN: Thank you. Did not want to litigate
4 those body parts, but we were preserving them
5 without prejudice and that was made clear at
6 the hearing. Thank you.

7 COMMISSIONER MCCASKILL: Thank you. Mr. Lyon, three
8 minutes.

9 APPELLANT'S REPLY:

10 MR. LYON: All right. Again, if you look at the
11 procedural aspect of this case, these injuries
12 were alleged after the filing of the Form 21.
13 And honestly, I would submit to you, how on a
14 Form 21 do I mark on there to get a hearing to
15 say, hey, I want you to address compensability
16 of these injuries? Where in the form do I put
17 it? I can only, there's only certain grounds
18 I can list to get a hearing set. Secondly, the
19 Wellman case, the whole point of that case was
20 whether or not the Employee had notice of the
21 defense raised by the Defendant's. Here the
22 Employee has alleged these injuries, clearly on
23 notice that these are injuries, they've alleged
24 them. You can't claim you weren't aware of the
25 fact that you were claiming an injury when



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1 you've pled it on specific forms.

2 **COMMISSIONER BARDEN:** Now, is it on your 58 about
3 the back and depression?

4 **MR. LYON:** Well, it was not listed on our Form 58.

5 **COMMISSIONER BARDEN:** Right.

6 **MR. LYON:** And again, if you look at, you know, what
7 transpired. Again the issue of whether or not
8 we were current on benefits that was brought up
9 at the time of the hearing in June. I mean,
10 had we known that before obviously we wouldn't
11 have gone forward with it without it having
12 been caught up. What's also interesting is, at
13 that hearing in June, there was never an offer
14 to mediate or anything else, that was never
15 even raised, or to stop benefits. And then
16 fast forward and this is in the transcript, but
17 fast forward to the hearing in July and it's,
18 oh, we're willing to mediate, we'll agree to
19 cut off benefits. Why? To avoid having to go
20 forward with the hearing, to delay it, because
21 they didn't have evidence to support these
22 injuries. It's exactly what the Tucker court
23 talks about. They talk about filing a claim,
24 filing a 50 and then delaying a hearing in
25 order to later obtain the evidence and that's



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1 exactly what happened here. And the Tucker
2 court says the Commission must act reasonably
3 to move the claim forward and if an Employer
4 suspects there's unreasonable delay they can
5 request a hearing or seek to protect their
6 interest in some other fashion and that's all
7 we ask the Hearing Commissioner to do, is to
8 address the compensability of these injuries.
9 To the point, as to the degree of disability,
10 the Respondent made the argument at the hearing
11 that due to his left ankle injury he could not
12 work as a Deputy Sheriff. However, in his own
13 IME report from Dr. McConnell, Dr. McConnell
14 noted that he was retired from the Sheriff's
15 Office secondary to his VA disability. The
16 Employers questioned at the hearing as to
17 whether or not he'd treated at the VA for his
18 left ankle, he said no. So then he was
19 questioned as to whether or not he sustained
20 any other injuries in the accident. It was
21 objected to and the Hearing Commissioner
22 sustained the objection, wouldn't allow any
23 questioning as to other injuries sustained in
24 the accident. The Employer was questioned as
25 to whether or not he had any health conditions



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1 that prevented him from performing the usual
2 aspects of a Deputy Sheriff that would flow
3 into his disability. In other words, does he
4 have a back injury that limits his ability to
5 run, jump, move as required by a Deputy and the
6 Hearing Commissioner sustained his objections
7 and wouldn't allow any questioning of anything
8 aside from the left leg. And that's another
9 issue that we've raised in our Appeal, that the
10 Hearing Commissioner erred in limiting the
11 scope of our cross-exam.

12 **COMMISSIONER MCCASKILL:** All right. Thank you very
13 much.

14 (There being nothing further, the full commission
15 hearing concluded at 2:51 p.m.)
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CERTIFICATE

This is to certify that the within hearing consisting of twenty six (26) pages, is a true and correct transcript of the testimony given by said witnesses after being duly sworn; said hearing 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 October 9, 2020.

Amber Scarborough
Amber Scarborough

Notary Public for South Carolina
My Commission Expires: May 30, 2023



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WCC File #: **1701642**
Carrier File #:
Carrier Code #:
Employer FEIN #:

Claimant's Name: Paul Misuraca SSN: [REDACTED] Employer's Name: Charleston County Sheriff Dept.
Address: [REDACTED] Address: 3505 Pinehale Dr.
City: [REDACTED] State: [REDACTED] City: N. Charleston State: SC Zip: 29405
Home Phone: [REDACTED] Work Phone: [REDACTED] Insurance Carrier: [REDACTED]
Preparer's Name: David T. Pearlman Law Firm: The Steinberg Law Firm Preparer's Phone #: (843) 720-2800

A claim for workers' compensation benefits is made based on the following grounds: Date of Injury or Illness: February 16, 2017

- ☒ Injury ☐ Illness ☐ Repetitive Trauma ☐ Occupational Disease ☐ Physical Brain Injury ☐ Concurrent Jurisdiction
1. The claimant sustained an injury to left leg (fracture) on February 16, 2017 (Month/Day/Year) in Charleston County, State of South Carolina.
Body part(s) affected are: left leg (fracture)
2. Briefly describe how the accident occurred. The Claimant was injured while wrestling with a defendant in a court room.
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 February 16, 2017 (Month/Day/Year) in the following manner: Verbally to supervisor.
- ☒ 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: Injuries listed above.
- ☒ 8. Due to injury, the claimant requests temporary total disability benefits because of lost compensable time from work and wages for the period of:
To be determined.
- ☐ 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:
None known at this time.
- 10a. At the time of the injury, the Claimant was paid weekly wages of \$Form 20 requested, 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:
The employer herein; and/or to be determined
11. Further grounds or unusual aspects of claim:
To provide all benefits under the Act
- 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:
Carolina Center for Occupational Health
- 11b. To the best of your knowledge, did you have any prior permanent disability? None known at this time.
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 verify the contents of this form are accurate and true to the best of my knowledge.

Preparer's Signature: [Signature] Attorney for Claimant: dpearlman@steinberglawfirm.com Date: March 24, 2017
Title: _____ Email: _____
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.

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 #: 1701642
Carrier File #: 2017-SCAC-068413
Carrier Code #: _____
Employer FEIN #: _____

Claimant's Name: Paul Misuraca SSN: [REDACTED] Employer's Name: Charleston County
Address: [REDACTED] Address: 4050 Bridgeview Dr., Ste. 400
City: [REDACTED] State: [REDACTED] City: Charleston State: SC Zip: 29405
Home Phone: _____ Work Phone: _____ Insurance Carrier: SC Association of Counties SIF
Preparer's Name: William H. Lyon Law Firm: Willson Jones Carter & Baxley, P.A. Preparer's Phone: (843) 284-1084

The date of injury reported on Form 12A is: 2/16/2017 (m/d/yyyy)

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

- I. ☐ **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 _____ (m/d/yyyy) (copy of medical report must be attached).

Compensation payments are current as of _____ (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 _____ (m/d/yyyy).

- II. ☒ **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 Claimant was placed at MMI on 2/8/19 and assigned an impairment rating. Claimant was offered a Form a Form 17 but refuses to sign. Defendants request hearing to determine PPD and address termination of temporary disability payments.

- III. ☐ **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:

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

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

- V. ☐ **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.

- VI. ☐ **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 David T. Pearlman Address dpearlman@steinberglawfirm.com, abrown@steinberglawfirm.com and Judicial Director (by 1st Class Postage) SC WCC, P.O. Box 1715, Columbia, SC 29202 on the 30th day of April, 2019 by:

☐ first class postage ☐ certified mail ☐ personal service ☒ electronic service. A \$50.00 filing fee and updated Form 18 is required.

Preparer's Signature: [Signature] Title: Attorney for Defendants Email: whlyon@wjlaw.net Date: 05/01/2019

Questions about the use of this form should be directed to the Judicial Department at 803-737-5675, or judicial@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
P.O. BOX 1715
Columbia, SC 29202-1715
(803) 737-5723



WCC File #: 1701642
Carrier File #: 2017-SCAC-068413
Carrier Code #: SF930
Employer FEIN #: 576000145

Claimant's Name: Paul Misuraca SSN: [REDACTED] Employer's Name: Charleston County
Address: [REDACTED] Address: 4050 Bridgeview Drive Suite 400
City: [REDACTED] State: SC City: North Charleston State: SC Zip: 29405
Home Phone: [REDACTED] Insurance Carrier: SC Association Of Counties
Preparer's Name: [REDACTED] Law Firm: [REDACTED] Preparer's Phone #: [REDACTED]

1. Date of Injury: 2/16/17 2. Total Weeks Compensation Paid: 104 5/7
(m/d/yyyy)

3. Type of Compensation Paid (TP or TT)/Periods of Payment:

	(m/d/yyyy)	(m/d/yyyy)
Type: <u>TT</u>	From: <u>2/17/17</u>	To: <u>2/19/19</u>
Type: _____	From: _____	To: _____
Type: _____	From: _____	To: _____

4. Date of First Payment: 2/23/17
(m/d/yyyy)

5. Total Amount Paid (a) Compensation: \$79,884.43
(b) Medical (Include Nursing, Hospital, Drugs, Etc.): \$49,133.64

6. Informal Conference is Requested: ☐ Yes ☒ No (check one)

Use these lines to send a memo to the Commission:

John Snelling
Employer's Representative

(803) 365 - 50
Phone

4/30/19
Date

Type or print all information. File this form six months after the alleged injury date and each six months until the Commission's File is closed. Form 18 must be filed whether or not compensation is ongoing. Check "yes" after Number 6 to request an informal conference. Refer to R.67-413, R.67-507, and R.67-804 for further information.

SOUTH CAROLINA SPORTS MEDICINE AND ORTHOPAEDIC CENTER • 9100 Medcom Street, North Charleston SC 29406-9167

MISURACA, PAUL L

Admin Documents

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



Physician's Statement
Phone Sandra Carr, NCM
FAX to 800 782-8593

Claimant's Name: Paul L. Misuraca Employer's Name: Charleston County
Physician's Name: _____ Insurance Carrier: Ariel Third Party Administrators
Practice/Clinic: _____ SCWCC File No: SC CLAIM
Preparer's Name: _____ Phone: _____

The undersigned physician has been authorized to evaluate or treat this Claimant for his or her work injury or illness pursuant to South Carolina Code Sections 42-15-60, 42-15-80, 42-1-172, or 42-11-10.

Date of Injury: _____ Date of first office visit: 8/1/19 Date of last office visit: 2/8/19

The medical opinions below are stated to a reasonable degree of medical certainty.

Diagnosis or nature of injury or illness: _____

Body part(s) injured: left ankle Body part(s) affected: _____

Date of maximum medical improvement: _____

Has the Claimant sustained permanent physical impairment as a result of the work injury? ☒ Yes ☐ No

If so, the permanent physical impairment is: 2 % medical impairment to the whole person (Injured body part).

If there is a permanent physical impairment to other body part(s) as a result of the work injury, please indicate below:
% medical impairment to the _____ (additional body part injured or affected).

The impairment rating(s) above are based upon the following:

☒ The AMA's *Guides to the Evaluation of Permanent Impairment* 6th Edition; or
Other medical treatise: _____
Other: _____

MISURACA, PAUL DVM 833 2193172 ATTEND



* 3348317w1516 Single Page Admin

Does the Claimant have permanent physical limitations as a result of the injury? ☐ Yes ☒ No

If so, the permanent physical limitations are: _____

Does the Claimant possess retained hardware as a result of the injury? ☒ Yes ☐ No

If so, the retained hardware is: _____

Is there medical, surgical, hospital or other treatment that the Claimant needs as a result of the injury for an additional time that will tend to lessen the period of disability or maintain the current level of function: ☒ Yes ☐ No

If so, the medical care and treatment that is needed is/are:

occasional physical therapy, anti-inflammatory, medicine, periods of rest if symptoms
An indication or statement that future medical care "may be necessary" or "might be necessary" is not sufficient and will require further clarification. Electrocardiogram

I certify that I am a physician or other licensed healthcare provider, I have personally read and prepared this document, and the opinions reflected above are mine.

Treating or Evaluating Physician

Date

3/30/19

WCC Form # 14B
12/2016

14B

Physician's Statement

WILLSON JONES CARTER & BAXLEY, P.A.

ATTORNEYS AT LAW

GREENVILLE CHARLESTON COLUMBIA CHARLOTTE RALEIGH ATLANTA MYRTLE BEACH

William H. Lyon
Direct (843) 284-1084
Fax (843) 284-1081
whlyon@wjlaw.net

421 Wando Park Boulevard
Suite 100
Mount Pleasant, SC 29464
www.wjclaw.com

February 12, 2019

Via E-mail

David T. Pearlman, Esquire
The Steinberg Law Firm, L.L.P.
P. O. Box 9
Charleston, SC 29402-0009

Re: Paul Misuraca vs. Charleston County
WCC File No.: 1701642 DOI: 2/16/2017
Carrier: SC Association of Counties SIF - Claim No.: 2017-SCAC-068413
WJC&B File No.: 0560.00877

Dear David:

Please find enclosed a Form 17 indicating claimant was capable of returning to work on February 9, 2019. Please have your client sign the Form 17 and return it to me at your earliest convenience. If you have any questions, please do not hesitate to contact me.

With kindest regards,

WILLSON JONES CARTER & BAXLEY, P.A.

William H. Lyon

William H. Lyon

WHL/whl

Enclosure

cc (w/encl.): Mr. John Snelling (via e-mail)

South Carolina Workers' Compensation Commission
1333 Main Street, Suite 500
P.O. BOX 1715
Columbia, SC 29202-1715
(803) 737-5723



WCC File #: 1101042
Carrier File #: 2017-SCAC-068413
Carrier Code #: SF930
Employer FEIN #: 576000145

Claimant's Name: Paul Misuraca
Address: [REDACTED]
City: [REDACTED]
Home Phone: [REDACTED]
Preparer's Name: John Snelling
Law Firm: [REDACTED]
Employer's Name: Charleston County
Address: 4045 Bridge View Drive Suite B 332
City: North Charleston State: SC Zip: 29405
Insurance Carrier: SCAC
Preparer's Phone #: 912 200 3183

Date of Injury: 2/16/2017 (m/d/yyyy)

1. Temporary Compensation Paid:

Number of Weeks	From	To	Amount
104	2/17/2017	2/14/2019	\$ 79,339.52
			\$
			\$
			\$
			\$

2. The claimant returned to work on (m/d/yyyy) ☐ With restrictions but at a salary not less than before the injury.
☒ Without restrictions.

3. The claimant agrees he or she was able to return to work on 2/9/2019 (m/d/yyyy)

I agree that I was disabled for the period(s) indicated and I was paid compensation as shown above. **I UNDERSTAND THAT MY WEEKLY TEMPORARY COMPENSATION CHECKS WILL STOP; HOWEVER, I GIVE UP NO RIGHTS TO COMPENSATION FOR FUTURE DISABILITY, FOR PERMANENT DISABILITY, DISFIGUREMENT OR MEDICAL CARE.** The effect of this form has been fully explained to me, and I have received a copy of it. I understand that I should not sign this form until 15 days after I have returned to work or agree I was able to return to work.

Claimant's Signature

Employer's Representative Signature

(Check one) ☐ Witness ☐ Claimant's Attorney

Date Agreement Signed

File this form with the Claims Department no later than 31 days from the date the claimant returned to work to terminate temporary compensation after the first 150 days after employer's notice of the injury according to R.67-505. Within the 150 period, obtain Form 17 to document that claimant agrees he or she is able to return to work.

WCC Form # 17
Rev. Date 1/2014

17

RECEIPT OF COMPENSATION



WCC File #: 1701642
Carrier File #: _____
Carrier Code #: _____
Employer FEIN #: _____

AMENDED

Claimant's Name: Paul Misuraca SSN: [REDACTED] Employer's Name: Charleston County Sheriff Dept
Address: [REDACTED] Address: 3505 Pinehave Dr.
City: [REDACTED] City: N. Charleston State: SC Zip: 29405
Home Phone: [REDACTED] Work Phone: _____ Insurance Carrier: _____
Preparer's Name: David T. Pearlman Law Firm: The Steinberg Law Firm Preparer's Phone #: (843) 720-2800

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

- ☒ Injury ☐ Illness ☐ Repetitive Trauma ☐ Occupational Disease ☐ Physical Brain Injury ☐ Concurrent Jurisdiction
1. The claimant sustained an injury to left leg (fracture); back; depression (Part(s) of Body Injured) on February 16, 2017 (Month/Day/Year) in Charleston County, State of South Carolina.
Body part(s) affected are: left leg (fracture); back; depression
 2. Briefly describe how the accident occurred. The Claimant was injured while wrestling with a defendant in a court room.
 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.
 - ☒ 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: Injuries listed above.
 - ☒ 8. Due to injury, the claimant requests temporary total disability benefits because of lost compensable time from work and wages for the period of: To be determined.
 - ☒ 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. Claimant at MMI: ☐ Yes ☒ No
 - ☐ 10. Due to the injury, the Claimant has a serious bodily disfigurement consisting of: None known at this time.
 - 10a. At the time of the injury, the Claimant was paid weekly wages of \$Form 20 requested, 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:
The employer herein; and/or to be determined
 11. Further grounds or unusual aspects of claim: To provide all benefits under the Act
 - 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:
Carolina Center for Occupational Health, 4600 Goer Drive Ste. 205, Charleston, SC 29406; Carolina Pain Physicians, 2811 Tricom Street, Charleston, SC 29406; Dr. William Corey, Lowcountry Orthopaedics & Sports Medicine, 2880 Tricom St, Charleston, SC, 29406; Dr. Christopher Kestner, SC Sports Medicine, 9100 Medcom Street, N. Charleston, SC, 29406; Dr. Todd Lansford, SC Sports Medicine, 9100 Medcom Street, N. Charleston, SC, 29406; Dr. Bright McConnell, Charleston Sports Medicine, 900 Island Park Drive Ste. 105, Charleston, SC 29492
 - 11b. 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.
 - ☒ 13. I am filing a claim. I am not requesting a hearing at this time. Estimated time needed for hearing: 45 minutes.
 - ☐ 14. I am requesting a hearing. A \$50 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 William H. Lyon, Esquire, Willson Jones Carter & Baxley, PA, Mt. Pleasant, SC 29464, on the 31 day of May, 2019, by ☒ first class postage ☐ certified mail ☐ personal service ☐ electronic service.

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

Preparer's Signature: [Signature] Attorney for Claimant: dpearlman@steinberglawfirm.com Date: Friday, May 31, 2019
Refer 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.

WILLSON JONES CARTER & BAXLEY, P.A.

ATTORNEYS AT LAW

GREENVILLE CHARLESTON COLUMBIA CHARLOTTE RALEIGH ATLANTA MYRTLE BEACH

William H. Lyon
Direct (843) 284-1084
Fax (843) 284-1081
whlyon@wjlaw.net

421 Wando Park Boulevard
Suite 100
Mount Pleasant, SC 29464
www.wjcbaw.com

June 7, 2019

Via eCase

The Honorable Avery B. Wilkerson, Jr.
South Carolina Workers' Compensation Commission
P.O. Box 1715
Columbia, SC 29202-1715

Re: Paul Misuraca vs. Charleston County
WCC File No.: 1701642 DOI: 2/16/2017
Carrier: SC Association of Counties SIF - Claim No.: 2017-SCAC-068413
WJC&B File No.: 0560.00877

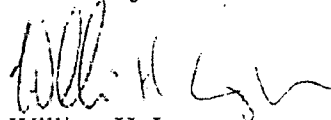
Dear Commissioner Wilkerson:

Enclosed herein please find the defendants' Pre-Hearing Brief as well as the Notice of Witnesses and Written Medical Reports which lists the documents I intend to submit at the hearing of the above-referenced matter pursuant to the South Carolina Administrative Procedures Act.

By copy of this letter, I am providing a copy of these forms and reports to David T. Pearlman, claimant's counsel:

With kindest regards,

WILLSON JONES CARTER & BAXLEY, P.A.



William H. Lyon

WHL/whl

Enclosures

cc (w/enclosures): David T. Pearlman, Esq. (via e-mail)
Mr. John Snelling (via e-mail)
Mr. Mike Schwerin (via e-mail)
Ms. Barbara Canady (via e-mail)



Claimant's Name: Paul Misuraca Employer's Name: Charleston County
Address: [REDACTED] Address: 4050 Bridgeview Dr., Ste. 400
City: [REDACTED] City: Charleston State: SC Zip: 29405
Home Phone: _____ Work Phone: _____ Carrier: SC Association of Counties SIF
Preparer's Name: William H. Lyon Preparer's Phone #: (843) 284-1084

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

☒ Injury ☐ Illness ☐ Repetitive Trauma

1. Compensation Rate: \$762.88 2. AWW: \$ 1144.26 Date of Injury: 2/16/2017
3. Type of injury and body part(s): Left Ankle
4. Facts in controversy: Claimant sustained an admitted injury to his left ankle. He underwent surgical fixation of the fracture in November 2017. Claimant requested a second opinion evaluation and was seen by Dr. Kestner who recommended removal of the hardware. The ankle hardware was removed on 9/27/18. Dr. Kester subsequently placed Claimant at MMI on 2/8/19. He released Claimant back to work without restriction. Dr. Kestner assigned a 5% impairment to the left leg and opined Claimant would not require future treatment unless he sustained a change of condition for the worse or new injury to his ankle. (APA p. 52) Claimant resigned from Charleston County on 2/19/19. Defendants request a Finding that Claimant has reached MMI and a determination of permanent partial disability under § 42-9-30 for the left leg. Defendants further request a credit for temporary total benefits paid after MMI and certification of the Form 17.
5. Legal issues involved: S.C. Code Ann. §§ 42-9-30, 42-9-35, 42-15-60; Hartzell v. Palmetto Collision
6. Unusual aspects: Defendants reserve the right to and may move to either postpone or adjourn the scheduled hearing to exercise due process rights afforded by law to cross examine, respond to, and otherwise oppose evidence presented by the claimant.
7. Witnesses (designate if expert):* Employer Representative, Sgt. Mike Ringley
8. Exhibits: Claimant's Employment/Personnel File; Payroll Records; Deposition of Claimant, Resignation Letter, Correspondence from Claimant Attorney, Incident Report, SCWCC Form 17
9. Medical evidence (indicate report pursuant to R.67-612; deposition or appearance): SEE APA SUBMISSION
10. Name, address, and specialty, if any, of the treating physician: William S. Corey, M.D.; Lowcountry Orthopaedics & Sports Medicine
2880 Tricom Street; North Charleston, SC 29406; Christopher J. Kestner, MD; SC Sports Medicine and Orthopedic Center; 9100 Medcom Street
North Charleston, SC 29406-9167
11. Impairment rating(s); body part(s); physician and date of opinion: 5% Right Leg; Dr. Kestner on 5/18/19
12. I am amending my Form 50/51 in the following manner: N/A

☐ **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 David T. Pearlman, Esquire Address dpearlman@steinberglawfirm.com; abrown@steinberglawfirm.com on the 7th day of June 2019, by:

☐ first class postage ☐ certified mail ☐ personal service ☒ electronic service

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

Signature: William H. Lyon
William H. Lyon, Willson Jones Carter & Baxley, P.A.

Email: whlyon@wjlaw.net

Date of hearing: 06/24/2019

Time needed for hearing: 1 Hour

Questions about the use of this form should be directed to the Jurisdictional Commissioner. Refer to Regulations 67-204 through 67-211 and Regulations 67-601 through 67-615; as well as Regulation 67-1801. File this form and proof of service on the opposing party according to R.67-611 and R.67-212. Do not send medical reports. * Commissioners reserve the right to admit expert witnesses at hearings.

WCC Form # 58

Revised 7/15

58

PRE-HEARING BRIEF

South Carolina Workers' Compensation Commission
1333 Main Street, Suite 500
P.O. BOX 1715
Columbia, SC 29202-1715
(803) 737-5723



WCC File #: 1701642
Carrier File #: 2017-SCAC-068413
Carrier Code #: _____
Employer FEIN #: _____

Claimant's Name: Paul Misuraca SSN: [REDACTED] Employer's Name: Charleston County
Address: [REDACTED] Address: 4050 Bridgeview Dr., Ste. 400
City: [REDACTED] City: Charleston State: SC Zip: 29405
Home Phone: _____ Work Phone: _____ Insurance Carrier: SC Association of Counties SIF
421 Wando Park Boulevard, Suite 100, Mount Pleasant, SC
William H. Lyon 29464 (843) 284-1084
Preparer's Name Address Phone #

TO: SOUTH CAROLINA WORKERS' COMPENSATION COMMISSION
AND DAVID T. PEARLMAN, ESQUIRE, ATTORNEY FOR CLAIMANT

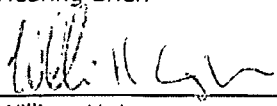
YOU ARE HEREBY NOTIFIED THAT DEFENDANTS, pursuant to the provisions of the South Carolina Workers' Compensation Act and South Carolina Code Section 1-23-330, (1976, as amended), herewith submits the following medical reports as direct evidence on behalf of the defendants, to wit:

<u>APA/EXHIBIT</u>	<u>NAME OF PHYSICIAN/OTHER</u>	<u>DATE OF REPORT</u>	<u>PAGE</u>
APA #1.	Carolina Center for Occupational Health	2/16/2017 – 2/19/2019	1 – 21
APA #2	Dr. William S. Corey - LowCountry Orthopedics	3/3/2017 – 3/21/2017	22 – 36
APA #3	Imaging Reports	2/28/2017 – 4/24/2018	37 – 40
APA #4	Dr. Chris Kestner-SC Orthopedics & Sports Med.	8/1/2018 – 5/18/2019	41 – 52
EXH A	Letter of Resignation	2/19/2019	53
EXH B	Accident/Injury Report	2/16/2017	54 – 58
EXH C	SCWCC Form 17	2/12/2017	59 – 60
EXH D	Correspondence re: 2 nd Opinion	6/27/2018	61

YOU ARE FURTHER HEREBY NOTIFIED that you have the right to cross-examination; and, should you desire to exercise said right, you are to forthwith schedule the depositions of any of the physicians, whose reports are submitted, for the purposes of cross-examination.

YOU ARE FURTHER NOTIFIED that the originals of the documents referred to herein, or photocopies received from said physicians/others, are being herewith forwarded to the South Carolina Workers' Compensation Commission, for insertion in the file of the South Carolina Workers' Compensation Commission and inclusion into the evidence on behalf of the employer-defendant.

YOU ARE FURTHER NOTIFIED that the following witnesses may be called on behalf of the defendants: See Pre-Hearing Brief.


William H. Lyon
Willson Jones Carter & Baxley, P.A.
421 Wando Park Boulevard, Suite 100
Mount Pleasant, SC 29464

June 7, 2019

June 24, 2019
(hearing date)



Claimant's Name: Paul Misuraca SSN: [REDACTED] Employer's Name: Charleston County
Address: [REDACTED] Address: 4050 Bridgeview Dr., Ste. 400
City: [REDACTED] City: Charleston State: SC Zip: 29405
Home Phone: Work Phone: Insurance Carrier: SC Association of Counties SIF
421 Wando Park Boulevard, Suite 100, Mount Pleasant, SC
William H. Lyon 29464 (843) 284-1084
Preparer's Name Address Phone #

TO: SOUTH CAROLINA WORKERS' COMPENSATION COMMISSION
AND DAVID T. PEARLMAN, ESQUIRE, ATTORNEY FOR CLAIMANT

YOU ARE HEREBY NOTIFIED THAT DEFENDANTS, pursuant to the provisions of the South Carolina Workers' Compensation Act and South Carolina Code Section 1-23-330, (1976, as amended), herewith submits the following medical reports as direct evidence on behalf of the defendants, to wit:

<u>APA/EXHIBIT</u>	<u>NAME OF PHYSICIAN/OTHER</u>	<u>DATE OF REPORT</u>	<u>PAGE</u>

APA #1.	Carolina Center for Occupational Health	2/16/2017 – 2/19/2019	1 – 21
APA #2	Dr. William S. Corey - LowCountry Orthopedics	3/3/2017 – 3/21/2017	22 – 36
APA #3	Imaging Reports	2/28/2017 – 4/24/2018	37 – 40
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EXH A	Letter of Resignation	2/19/2019	53
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YOU ARE FURTHER HEREBY NOTIFIED that you have the right to cross-examination; and, should you desire to exercise said right, you are to forthwith schedule the depositions of any of the physicians, whose reports are submitted, for the purposes of cross-examination.

YOU ARE FURTHER NOTIFIED that the originals of the documents referred to herein, or photocopies received from said physicians/others, are being herewith forwarded to the South Carolina Workers' Compensation Commission, for insertion in the file of the South Carolina Workers' Compensation Commission and inclusion into the evidence on behalf of the employer-defendant.

YOU ARE FURTHER NOTIFIED that the following witnesses may be called on behalf of the defendants: See Pre-

Hearing Brief.

William H. Lyon
Willson Jones Carter & Baxley, P.A.
421 Wando Park Boulevard, Suite 100
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June 7, 2019

June 24, 2019
(hearing date)

Carolina Center For Occupational Health
4600 Goer Drive, Suite 205
North Charleston, SC 29406-6500
(843) 554-1029 FAX: (843) 554-1103

Supplemental Charting Notes

Patient Name: Misuraca, Paul Lawrence
Employer: Charleston County Sheriff

Case Number: [REDACTED]

Provider: Boyd, Colleen H

Diagnosis: S90.02XA Contusion Of Ankle

Social Security #: [REDACTED]

Birth Date: [REDACTED]

Injury Date: 2/16/2017

Visit Date: 2/16/2017

Page: 1

Subjective: Initial Chief Complaint

Patient states "Fighting w/suspect fell to the ground and L ankle bone struck leg of a table."

Present Complaint

The patient is a 57 year old male, presenting for a new patient visit with the following condition(s):

PRESENTING PROBLEM: Complains primarily of pain, swelling and injury.

LOCATION: Left Ankle.

LOCATION: L outer ankle.

SIGNS / SYMPTOMS: Swelling.

SEVERITY: Mild to moderate pain.

DURATION: Today.

CONTEXT / MECHANISM: Hit foot on door while restraining someone in court.

Ambulatory

Patient Histories

Completed a review of patient's allergies, current medications, active and chronic problems. (Boyd, Colleen H, 2/16/17 at 3:37PM).

Review of Systems

CONSTITUTIONAL: Patient denies: change in appetite, chills, fatigue, fever, sweats, or unintended weight loss.

MUSCULOSKELETAL: Claims joint pain, denies muscle pain, claims swelling, denies back pain and denies neck pain.

SKIN: Patient denies: easy bruising, rash, redness, or skin sores.

NEUROLOGICAL: Patient denies: headache, light headedness, numbness, poor balance, tingling, or weakness.

Objective: Examination

Blood Pressure: 110/80. Pulse: 96. Respiration: 18. Pulse Ox: 97% RA. Height: 72 inches. Weight: 236 pounds.

CONSTITUTIONAL:

Station: Normal gait.

Distress: None

EYE:

no redness, purulence or tearing.

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Supplemental Charting Notes

Patient Name: Misuraca, Paul Lawrence
Employer: Charleston County Sheriff
Case Number: [REDACTED]
Provider: Boyd, Colleen H
Diagnosis: S90.02XA Contusion Of Ankle

Social Security #: [REDACTED]
Birth Date: [REDACTED]
Injury Date: 2/16/2017
Visit Date: 2/16/2017
Page: 2

NEUROLOGICAL:

Focal findings: Negative
Facial Palsy: Negative
Weakness Unilateral: Negative

PSYCHOLOGICAL:

Anxious: Negative
Tearful: Negative
Uncooperative: Negative. SKIN:
Erythema: Negative
Pale: Negative
Jaundice: Negative
Rash: Negative

CARDIOVASCULAR:

Diaphoresis: Negative
Tachycardia: Negative
Bradycardia: Negative
Central Cyanosis: Negative

RESPIRATORY:

Respiratory Distress: Negative
Tachypnea: Negative
Hypoapnea: Negative
Accessory Muscle Use: Negative. RANGE OF MOTION: Ankle
Site: left Dorsiflexion 20 degrees (NL-20 degrees)
Plantar Flexion 45 degrees (NL-45 degrees)
Inversion 30 degrees (NL-30 degrees)
Eversion 20 degrees (NL-20 degrees)

MUSCULOSKELETAL - ANKLE:

Site: left
Open Wound: Negative
Joint Deformity: Positive
Difficulty Ambulation: Negative
Anterior Ankle: negative
Posterior Ankle: negative
Lateral Malleolus: Swelling
Medial Malleolus: negative
Achilles Tendon: negative
Mortise Instability: Negative
Decreased ROM: Negative
Decreased Strength: Negative
Decreased Sensation: Negative

Assessment: Assessment

Initial Ankle - Contusion - Left - Initial, left, acute, currently appearing controlled. Condition uncomplicated. No additional work-up required. Intractable pain - not applicable.

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Supplemental Charting Notes

Patient Name: Misuraca, Paul Lawrence
Employer: Charleston County Sheriff

Case Number: [REDACTED]

Provider: Boyd, Colleen H

Diagnosis: S90.02XA Contusion Of Ankle

Social Security #: [REDACTED]

Birth Date: [REDACTED]

Injury Date: 2/16/2017

Visit Date: 2/16/2017

Page: 3

Treatment Plan: Treatment / Orders / Work Restrictions

DME: Patient was fitted with ace wrap , and instructed in the use of the device.

Patient Instructions

PATIENT RETURN INSTRUCTIONS:
Return to clinic in 2 days for problem follow-up.

Signature:

Colleen H. Boyd FNP

Date: 2/16/2017

CCOH

Carolina Center for Occupational Health
4600 Goer Drive
Charleston, SC 29406
Phone: 843-554-1029 Fax: 843-554-1103

INJURY TREATMENT RAPID REPORT

Date: 2/16/17 Time In: _____ INJURY DATE: 2/16/17
Department / Fax Number: _____
Patient Name: Mitsunaga, Paul SSN: _____ Work Related? ☒ Yes ☐ No
Employer: Charleston County Sheriff Department: _____ Contact / Phone: _____

Assessment

(R) ankle contusion

Rx given:

Do not drive or operate machinery while taking this medication

- ☒ X-rays were taken _____
☐ Keep affected part elevated _____
☐ No / Limit weight bearing _____
☐ Keep area clean and dry _____
☒ Other: ACE wrap

- ☐ Use cane / splint / crutches as directed
☒ Apply ice to affected area
☐ Exercises _____

ACTIVITY / WORK RESTRICTIONS

A ☒ May return to work without restrictions.

- ☐ Sedentary Duty
☐ Restrict standing / walking
☐ Restrict climbing, bending, stooping
☐ Alternate position (sit, stand, and walk)
☐ No work around moving machinery

B ☐ May return to work with the following restrictions.

- ☐ No lifting greater than _____ lbs.
☐ Restrict pushing / pulling
☐ No overhead work
☐ Limit use / repetitive movement of affected part
☐ Driving restriction: _____

ICD/CPT: _____ Diagnosis: _____ Level: _____ Supply: _____ Procedure: _____

☐ Unable to return to work for the following reason: _____

RESTRICTIONS ARE IN EFFECT UNTIL THE NEXT SCHEDULED FOLLOW-UP VISIT UNLESS OTHERWISE NOTED

Follow-up Instructions:

- ☐ Recommend referral to specialists
☐ Discharged from care

☒ Next appointment date: 2/20/17 @ 8:45 am
☐ Time released: _____

Comments:

Follow up 2 days. Attention Not To Aggravate.

Provider: Cheryl P. H. FNP

Signature: Cheryl P. H. FNP

Patient Signature: I have read and understand these instructions: _____

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Supplemental Charting Notes

Patient Name: Misuraca, Paul Lawrence
Employer: Charleston County Sheriff
Case Number: [REDACTED]
Provider: Boyd, Colleen H
Diagnosis: S90.02XA Contusion Of Ankle

Social Security #: [REDACTED]
Birth Date: [REDACTED]
Injury Date: 2/16/2017
Visit Date: 2/20/2017
Page: 1

Subjective: Initial Chief Complaint

Patient states "Fighting w/suspect fell to the ground and L ankle bone struck leg of a table."

Present Complaint

The patient is a 57 year old male, presenting for an established patient visit with the following condition(s):

PRESENTING PROBLEM: Follow-up visit.

LOCATION: Left Ankle.

SEVERITY: Pain is OK, swelling much worse.

DURATION: 3 days.

CONTEXT / MECHANISM: States that he was at home keeping it elevated all weekend; states that he was using heat and ice on it and the swelling got worse. No calf pain.

Feels fine with ROM though.

Patient Histories

Completed a review of patient's allergies, current medications, active and chronic problems. (Boyd, Colleen H, 2/16/17 at 3:37PM).

Review of Systems

CONSTITUTIONAL: Patient denies: change in appetite, chills, fatigue, fever, sweats, or unintended weight loss.

MUSCULOSKELETAL: Claims joint pain, denies muscle pain, claims swelling, denies back pain and denies neck pain.

SKIN: Patient denies: easy bruising, rash, redness, or skin sores.

NEUROLOGICAL: Patient denies: headache, light headedness, numbness, poor balance, tingling, or weakness.

Objective: Examination

Blood Pressure: 110/70. Pulse: 101. Respiration: 16. Pulse Ox: 97% RA. Height: 72 inches. Weight: 236 pounds.

CONSTITUTIONAL:

Station: Normal gait.

Distress: None

EYE:

no redness, purulence or tearing.

NEUROLOGICAL:

Focal findings: Negative

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Supplemental Charting Notes

Patient Name: Misuraca, Paul Lawrence
 Employer: Charleston County Sheriff
 Case Number: [REDACTED]
 Provider: Boyd, Colleen H
 Diagnosis: S90.02XA Contusion Of Ankle

Social Security #: [REDACTED]
 Birth Date: [REDACTED]
 Injury Date: 2/16/2017
 Visit Date: 2/20/2017
 Page: 2

Facial Palsy: Negative
 Weakness Unilateral: Negative

PSYCHOLOGICAL:

Anxious: Negative
 Tearful: Negative
 Uncooperative: Negative. SKIN:
 Erythema: Negative
 Pale: Negative
 Jaundice: Negative
 Rash: Negative

CARDIOVASCULAR:

Diaphoresis: Negative
 Tachycardia: Negative
 Bradycardia: Negative
 Central Cyanosis: Negative

RESPIRATORY:

Respiratory Distress: Negative
 Tachypnea: Negative
 Hypoapnea: Negative
 Accessory Muscle Use: Negative. RANGE OF MOTION: Ankle
 Site: left Dorsiflexion 20 degrees (NL-20 degrees)
 Plantar Flexion 45 degrees (NL-45 degrees)
 Inversion 30 degrees (NL-30 degrees)
 Eversion 20 degrees (NL-20 degrees)

MUSCULOSKELETAL - ANKLE:

Site: left
 Open Wound: Negative
 Joint Deformity: Positive
 Difficulty Ambulation: Negative
 Anterior Ankle: negative
 Posterior Ankle: negative
 Lateral Malleolus: TTP.
 Medial Malleolus: negative
 Achilles Tendon: negative
 Mortise Instability: Negative
 Decreased ROM: Negative
 Decreased Strength: Negative
 Decreased Sensation: Negative
 Findings: Swelling much more diffuse and halfway up shin; has purple and brown bruising.

Assessment: Assessment

Subsequent Contusion of left ankle, initial encounter, left, acute, currently appearing controlled. Condition uncomplicated, improved. Intractable pain - not applicable

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Supplemental Charting Notes

Patient Name: Misuraca, Paul Lawrence
Employer: Charleston County Sheriff
Case Number: [REDACTED]
Provider: Boyd, Colleen H
Diagnosis: S90.02XA Contusion Of Ankle

Social Security #: [REDACTED]
Birth Date: [REDACTED]
Injury Date: 2/16/2017
Visit Date: 2/20/2017
Page: 3

Treatment Plan: Treatment / Orders / Work Restrictions

Left Ankle Restrictions Include:

- Non weight bearing and Must keep elevated.
- The following are restrictions on use of the ankle(s): Limited use/weight bearing.
- use crutches and use splint / support.

Refer to Courtney Carroll at Carolina Sports and Orthopedics for Game Ready IPC Cold therapy System: Length of

Need: 14 days

14 days

Non-surgical

Wrap: ankle

Side: left

Patient Instructions

PATIENT RETURN INSTRUCTIONS:

Return to clinic in 1 week.

Signature:

Colleen H. Boyd FNP

Date: 2/20/2017

Date 02/20/17

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Page 1

Work Status Summary

Company: Charleston County Sheriff
3691 Leeds Ave
North Charleston, SC 29405

Employee: Paul Lawrence Misuraca

Attention: Sylvia Walters
Telephone: [REDACTED]
Fax: [REDACTED]

Ident: [REDACTED]
Department: [REDACTED]
Job Title: [REDACTED]

DOB: [REDACTED]

Provider: Boyd, Colleen H

Phone: [REDACTED]

Visit Date: 2/20/17 Time In: 8:40AM Out: 9:25AM

Purpose: Work Comp - Follow Up

Insurance Information

Ariel TPA
P.O. Box 212159
Columbia, SC 29221

Contact: Burdetta Miller (803) 365-0051 (Direct)
Telephone: (855) 222-6379 Ext:
Fax: (803) 365-0098
burdetta.miller@arieltpa.com

Presenting Problem

Date of Injury: 2/16/17 [REDACTED]

Patient states "Fighting w/suspect fell to the ground and L ankle bone struck leg of a table."

Visit Referrals

Referred To: Game Ready

Date: 2/20/17 (843) 303-6431

Current Work Restrictions

Restrictions - Ankle

Starting: 2/20/17 Continuing

Left Ankle Restrictions Include:

- Non weight bearing and Must keep elevated.
- The following are restrictions on use of the ankle(s): Limited use/weight bearing.
- use crutches and use splint / support.

Orders & Instructions

RTC - 1 Week

PATIENT RETURN INSTRUCTIONS:

Return to clinic in 1 week.

Work Status SummaryCompany: Charleston County Sheriff
3691 Leeds Ave
North Charleston, SC 29405

Employee: Paul Lawrence Misuraca

Attention: Sylvia Walters
Telephone: [REDACTED]
Fax: [REDACTED]Ident: [REDACTED]
Department:
Job Title:

DOB: [REDACTED]

Provider: Boyd, Colleen H
Visit Date: 2/20/17 Time In: 8:40AM Out: 9:25AM

Phone: [REDACTED]

Purpose: Work Comp - Follow Up

Referral- Cryotherapy

Refer to Courtney Carroll at Carolina Sports and Orthopedics for Game Ready IPC Cold
therapy System: Length of Need: 14 days
14 days
Non-surgical
Wrap: ankle
Side: left**Work Status**

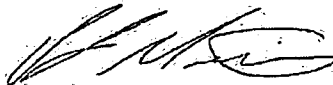
Work Status: Return to Work with Restrictions, as of 2/20/17

Follow Up

Follow-up Appointments: 2/27/17 at 8:45AM

Work Comp - Follow Up

Boyd, Colleen H

Signature: 

Date: 2/20/17

I acknowledge the instructions given above.

Patient Signature

Carolina Center For Occupational Health
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(843) 554-1029 FAX: (843) 554-1103

Supplemental Charting Notes

Patient Name: Misuraca, Paul Lawrence
Employer: Charleston County Sheriff
Case Number: [REDACTED]
Provider: Boyd, Colleen H
Diagnosis: S90.02XA Contusion Of Ankle

Social Security #: [REDACTED]
Birth Date: [REDACTED]
Injury Date: 2/16/2017
Visit Date: 2/27/2017

Page: 1

Subjective: Initial Chief Complaint

Patient states "Fighting w/suspect fell to the ground and L ankle bone struck leg of a table."

Present Complaint

The patient is a 57 year old male, presenting for an established patient visit with the following condition(s):

PRESENTING PROBLEM: Complains primarily of pain and injury, Follow-up visit.

WORK RELATEDNESS: Patient indicated on intake that that their injury occurred while at work.

LOCATION: L ankle.

SEVERITY: The same. Not improving.

DURATION: Since the injury.

CONTEXT / MECHANISM: Swelling and ecchymosis.

MRI is scheduled for tomorrow.

Patient Histories

Completed a review of patient's allergies, current medications, active and chronic problems. (Boyd, Colleen H, 2/16/17 at 3:37PM).

Review of Systems

CONSTITUTIONAL: Patient denies: change in appetite, chills, fatigue, fever, sweats, or unintended weight loss.

MUSCULOSKELETAL: Claims joint pain, denies muscle pain, claims swelling, denies back pain and denies neck pain.

SKIN: Patient denies: easy bruising, rash, redness, or skin sores.

NEUROLOGICAL: Patient denies: headache, light headedness, numbness, poor balance, tingling, or weakness.

Objective: Examination

Blood Pressure: 100/70. Pulse: 116. Respiration: 16. Pulse Ox: 95% RA. Height: 72 inches. Weight: 239 pounds. Temperature: 97.5.

CONSTITUTIONAL:
Station: Normal gait.
Distress: None

EYE:
no redness, purulence or tearing.

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Supplemental Charting Notes

Patient Name: Misuraca, Paul Lawrence
Employer: Charleston County Sheriff
Case Number: [REDACTED]
Provider: Boyd, Colleen H
Diagnosis: S90.02XA Contusion Of Ankle

Social Security #: [REDACTED]
Birth Date: [REDACTED]
Injury Date: 2/16/2017
Visit Date: 2/27/2017
Page: 2

NEUROLOGICAL:

Focal findings: Negative
Facial Palsy: Negative
Weakness Unilateral: Negative

PSYCHOLOGICAL:

Anxious: Negative
Tearful: Negative
Uncooperative: Negative. SKIN:
Erythema: Negative
Pale: Negative
Jaundice: Negative
Rash: Negative

CARDIOVASCULAR:

Diaphoresis: Negative
Tachycardia: Negative
Bradycardia: Negative
Central Cyanosis: Negative

RESPIRATORY:

Respiratory Distress: Negative
Tachypnea: Negative
Hypoapnea: Negative
Accessory Muscle Use: Negative.

RANGE OF MOTION: Ankle

Site: left Dorsiflexion 20 degrees (NL-20 degrees)
Plantar Flexion 45 degrees (NL-45 degrees)
Inversion 30 degrees (NL-30 degrees)
Eversion 20 degrees (NL-20 degrees)

MUSCULOSKELETAL - ANKLE:

Site: left
Open Wound: Negative
Joint Deformity: Positive
Difficulty Ambulation: Negative and Positive
Anterior Ankle: negative
Posterior Ankle: TTP and Swelling.
Lateral Malleolus: TTP and Swelling.
Medial Malleolus: negative
Achilles Tendon: negative
Mortise Instability: Negative
Decreased ROM: Negative
Decreased Strength: Positive
Decreased Sensation: Negative
Findings: not using crutches today.

Assessment: Assessment

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Supplemental Charting Notes

Patient Name: Misuraca, Paul Lawrence
Employer: Charleston County Sheriff
Case Number: [REDACTED]
Provider: Boyd, Colleen H
Diagnosis: S90.02XA Contusion Of Ankle

Social Security #: [REDACTED]
Birth Date: [REDACTED]
Injury Date: 2/16/2017
Visit Date: 2/27/2017
Page: 3

Subsequent Contusion of left ankle, initial encounter, acute, currently appearing controlled. Condition uncomplicated, stable. Intractable pain - not applicable. MRI to r/o occult fx

Work Status / Assessment

Patient is to continue restriction(s): Restrictions - Ankle.

Patient is to continue restriction(s): Restrictions - Ankle.

Treatment Plan: Treatment / Orders / Work Restrictions

continue current meds and care plans
using his oxycodone that he has at home.

Patient Instructions

PATIENT RETURN INSTRUCTIONS:
Return 2 Days after study performed.

Signature:

Colleen H. Boyd FNP

Date: 2/27/2017

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Supplemental Charting Notes

Patient Name: Misurica, Paul Lawrence
Employer: Charleston County Sheriff
Case Number: [REDACTED]
Provider: Boyd, Colleen H
Diagnosis: S90.02XA Contusion Of Ankle

Social Security #: [REDACTED]
Birth Date: [REDACTED]
Injury Date: 2/16/2017
Visit Date: 2/28/2017
Page: 1

Subjective: Initial Chief Complaint

Patient states "Fighting w/suspect fell to the ground and L ankle bone struck leg of a table."

Present Complaint

The patient is a 57 year old male, presenting for an established patient visit with the following condition(s):

PRESENTING PROBLEM: Complains primarily of pain and injury, Follow-up visit.

CONTEXT / MECHANISM: Review MRI results.

I recieved a call from Dr. Goldtra at Charleston Imaging relaying that the patient has a fracture in the shaft of distal fibula.

LOCATION: R ankle.

CONTEXT / MECHANISM: Table fell down onto ankle. Initially did not appear bad but getting worse with pain and swelling.

DURATION: 12 days.

Patient Histories

Completed a review of patient's allergies, current medications, active and chronic problems. (Boyd, Colleen H, 2/16/17 at 3:37PM).

Review of Systems

CONSTITUTIONAL: Patient denies: change in appetite, chills, fatigue, fever, sweats, or unintended weight loss.

MUSCULOSKELETAL: Claims joint pain, denies muscle pain, claims swelling, denies back pain and denies neck pain.

SKIN: Patient denies: easy bruising, rash, redness, or skin sores.

NEUROLOGICAL: Patient denies: headache, light headedness, numbness, poor balance, tingling, or weakness.

Objective: Examination

Blood Pressure: 130/70. Pulse: 94. Respiration: 16. Pulse Ox: 98% RA. Height: 72 inches. Weight: 239 pounds.

CONSTITUTIONAL:
Station: limps off affected part.
Distress: Mild

EYE:
no redness, purulence or tearing.

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Supplemental Charting Notes

Patient Name: Misuraca, Paul Lawrence
Employer: Charleston County Sheriff
Case Number: [REDACTED]
Provider: Boyd, Colleen H
Diagnosis: S90.02XA Contusion Of Ankle

Social Security #: [REDACTED]
Birth Date: [REDACTED]
Injury Date: 2/16/2017
Visit Date: 2/28/2017
Page: 2

NEUROLOGICAL:

Focal findings: Negative
Facial Palsy: Negative
Weakness Unilateral: Negative

PSYCHOLOGICAL:

Anxious: Negative
Tearful: Negative
Uncooperative: Negative. SKIN:
Erythema: Negative
Pale: Negative
Jaundice: Negative
Rash: Negative

CARDIOVASCULAR:

Diaphoresis: Negative
Tachycardia: Negative
Bradycardia: Negative
Central Cyanosis: Negative

RESPIRATORY:

Respiratory Distress: Negative
Tachypnea: Negative
Hypoapnea: Negative
Accessory Muscle Use: Negative. RANGE OF MOTION: Ankle
Site: left Dorsiflexion 20 degrees (NL-20 degrees)
Plantar Flexion 45 degrees (NL-45 degrees)
Inversion 30 degrees (NL-30 degrees)
Eversion 20 degrees (NL-20 degrees)

MUSCULOSKELETAL - ANKLE:

Site: left
Open Wound: Negative
Joint Deformity: Positive
Difficulty Ambulation: Positive
Anterior Ankle: negative
Posterior Ankle: negative
Lateral Malleolus: negative
Medial Malleolus: negative
Achilles Tendon: negative
Mortise Instability: Negative
Decreased ROM: Negative
Decreased Strength: Negative
Decreased Sensation: Negative

Diagnostic Test Results

MRI of left Ankle.
abnormal study.

Findings: distal fibula fx per verbal with Dr. Goldra (Charleston Imaging) from MRI today.

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Supplemental Charting Notes

Patient Name: Misuraca, Paul Lawrence
Employer: Charleston County Sheriff
Case Number: [REDACTED]
Provider: Boyd, Colleen H
Diagnosis: S90.02XA Contusion Of Ankle

Social Security #: [REDACTED]
Birth Date: [REDACTED]
Injury Date: 2/16/2017
Visit Date: 2/28/2017
Page: 3

Assessment: Assessment

Initial Unsp fracture of shaft of left fibula, init for clos fx, left, acute, currently appearing controlled. Condition uncomplicated. No additional work-up required. Intractable pain - not applicable

Treatment(Plan): Treatment / Orders / Work Restrictions

HE may continue using his home supply of oxycodone.

ORTHOPEDIST REFERRAL:

The patient is referred to the following orthopedist(s): Low Country Ortho.
The patient is referred for the following: Fracture.
Referred for the following reason(s): distal fibula fx.
The following is/are the affected body part(s): Left and Ankle.

Patient was given the following DME and instructed on use: ankle stirrup brace.

Encouraged patient to remain non weight bearing. He has been able to bear weight on the joint but this is likely because the fibula is a non weight bearing bone.

9:45 AM on Friday appt at Lowcountry ORtho with Dr. Corey.

Patient Instructions:

PATIENT RETURN INSTRUCTIONS:
Return to Clinic after seen in referral.

Signature:

Colleen H. Boyd FNP

Date: 2/28/2017

Misuraca, Paul Male



4600 Goer Drive ste 205
North Charleston, SC 29406 - 6500
Tel: 843 554-1029
Fax: 843 554-1103

Misuraca, Paul

Sex: Male,

Employer: Charleston County Government

Attending Provider: Barry Weissglass, M.D.

Encounter Date: 02-19-2019

Start Time: 09:11 am

End Time: 10:53 am

Chief Complaint: Ankle Problem

History of Present Illness

Ankle Problem

Ankle sprain: Ankle Context: when hit on hard surface and follow up .

According to Paul, the problem had a rapid onset.

Degree of pain: mild.

Degree of swelling: none .

Motion and function impairment: mild .

He is able to bear his weight with minimal pain.

Bruising: Denies.

Misc comments much improved after Oct surgery. Notes some stiffness when first starts walking, etc, but pain is much better.

Associated Symptoms: Bruising: Denies .

Swelling: Denies .

He had hardware removed in Oct. And 1 screw used to keep a bone fragment in place and is much improved.

Past Medical History

Anxiety

Arthritis

Diabetes

Sinusitis

Tibial plateau fracture, left S82.142A 823.00 since 05-31-2017

Fracture of distal end of fibula with delayed healing. S82.499G V54.19 since 07-24-2017

Adult general medical exam Z00.00 V70.9 since 08-16-2017

Current Medication

Percocet 10 mg-325 mg tablet 1 Tablet Every 6 Hours PRN for 10 Days . Prescribe 40 Tablet

levothyroxine 75 mcg tablet x 90 Days

finasteride 5 mg tablet x 90 Days

glipizide 5 mg tablet x 90 Days

atorvastatin 80 mg tablet x 90 Days

Misuraca, Paul Male

tizanidine
quetiapine
fluoxetine

Surgical History

Vasectomy
Neck Surgery
Cyst Removal
Hernia Repair - Umbilical : 2008
both knees: 1989, 1992
Back surgery-disc: 1987
Appendectomy

Family History

Non-contributory Family History.

Social History

Alcohol use: No .
Tobacco use: quit (light history) .
Caffeine intake: 3-5 per day .
Recreational or street drugs use: never used .

Marital Status:: married .
Number of children: 2 sons and 4 daughters .
Nature of exercise: Walking .
Pets:: a cat .
He is heterosexual .

Vaccination History

No Known Vaccination History

Allergy

trazodone Allergy .

Vitals

Height (Inches): 72
Weight (lbs): 220
BP Systolic: 112
BP Diastolic: 60
Pulse Ox: 96%
Temperature: 97.40 F.
Pulse: 99 BPM .
Pulse rhythm regular: Yes
Respiration: 16 breaths per minute
BMI: 30

Review of Systems

Misuraca, Paul Male

Constitutional Symptoms:

Fever/chills: Denies.

Malaise/fatigue: Denies.

Weight changes in last 12 months: no significant weight change.

Excessive thirst: No.

Eyes:

Blurred/double/visual changes: Denies.

Redness of eyes: There is no redness of the eyes.

Itching/pain: Denies.

Ears/Nose/Mouth/Throat:

Hearing loss: Denies.

Ringing in ears: Denies.

Nasal congestion or discharge: Denies.

Cardiovascular:

Chest pain: Denies.

Irregular heartbeat: Denies.

Leg edema: Denies.

Respiratory:

Cough: Denies.

Sputum: Denies.

Shortness of breath/chest tightness: Denies.

Gastrointestinal:

Heartburn: Denies.

Nausea/vomiting: Denies.

Change in bowel habits: There is no appreciable change in bowel habits.

Diarrhea: denies having diarrhea.

Abdominal pain: does not have abdominal pain.

Genitourinary:

Blood in urine: Denies.

Painful urination: Denies.

Excessive night time urination: Denies.

Urinary frequency: Denies.

Musculoskeletal: Neck pain: Reports. DDD cervical spine

Back pain: Reports. DDD lumbar spine (he was recommend to have a fusion with hardware placement)

Upper extremity pain: Reports. Bilat CTS

Integumentary:

Skin sores that won't heal such as Boils and or infected wounds: No.

Itching: denies itching.

Rashes: Denies.

Psychiatric: Anxiety: Reports. Mod severe

Misuraca, Paul Male

Physical Examination

General Appearance: Apparent Age: Normal.

Speech: Normal.

Body habitus: normal weight.

Physical Distress?: In no acute distress.

Mental and Emotional Status: Normal.

Gait: mildly - moderately antalgic and limps off the left side. Wearing a back brace.

Eyes Brief - Right: Eyes, general appearance: Normal.

Conjunctivae/eyelids: Normal conjunctiva.

Pupil and Lens: Normal.

Sclera/cornea/Iris: Normal sclera.

EOMs: Normal.

Eyes Brief - Left:

Eyes, general appearance: Normal with no swelling and redness or discharge.

Conjunctivae/eyelids: Conjunctivae clear with no redness or inflammation.

Pupil and Lens: PERRLA.

Sclera/cornea/Iris: Normal sclera and corneas and iris bilaterally.

EOMs: Intact.

Respiratory Brief:

Normal respiration: The respiratory exam is normal with normal respiratory rate and normal respiratory effort and no respiratory distress.

Heart Brief:

Brief Normal Heart: normal rate and rhythm.

Skin Brief:

Skin exam reveals: skin exam reveals no rashes or significant lesions. Normal turgor.

Color: Normal.

Skin turgor: normal.

Texture: normal; MMM and no tenting and normal color.

Rash: none.

Cervical Spine:

Palpation - Cervical spine: tender right paraspinous muscles, tender left paraspinous muscles, tender mid line of posterior cervical spine, decreased ROM in extension, decreased ROM in flexion, decreased ROM in right lat flexion, decreased ROM in left lateral flexion, decreased ROM right rotation and decreased ROM left rotation.

Spurlings Test: Negative bilaterally.

Muscle Spasm: none.

Normal Cervical Spine UE Motor exam: Normal Cervical Spine UE Motor Exam: normal strength in all muscle groups of the UE's.

Normal Cervical Spine UE Reflex Exam: Normal Cervical Spine UE Reflex Exam: normal Cervical Spine UE reflex exam.

Normal Cervical Spine UE Sensory Exam: Normal Cervical Spine UE Sensory Exam: Normal Cervical Spine UE sensory exam.

Misuraca, Paul Male

Lumbar Spine: Straight Leg Raises/Leg Extension: pain in the back with right leg extension and pain in the back with left leg extension.

Lumbar ROM: right lateral flexion decreased, left lateral flexion decreased, right rotation decreased, left rotation decreased, antelexion severely limited and extension severely limited.

Muscle Spasm: none.

Scar: lumbar, well healed, lumbar and tender.

Ankle, Left: Visual Inspection: surgical scar laterally that is minimally tender.

Comments: Range of motion in all directions is fairly good with a little bit of discomfort with full dorsiflexion. Minimal pain on palpation in the area. No swelling and no bruising.

Occ Med

Work Status Details

Work Status/Fitness for Duty Details:

Findings consistent with: much improved left ankle/lower leg pain

Work Related?: Yes

Work Status/Fitness for Duty: unable to work due to work related injury

Disposition: Discharged/Released

Is this a Fit for Duty NWR: no

While his ankle/foot is much improved, he still has some stiffness and discomfort. This would impede his ability to run and responded in the case of an emergency situation. It is likely he has reached maximal medical improvement, and no further surgical intervention is planned at this time.

Additionally, he has very significant lumbar spine and cervical spine arthritis. His spine surgeon as recommended additional surgery to the low back. His low back pain is constant and significantly impairing. It is unlikely that he will ever resolve this adequately to safely be able to perform the essential functions of his current job. He has not received a release from his spine specialist concerning this, as the issue of surgical intervention is still outstanding.

Also, he requested that I also note that he has a number of other issues such as bilateral carpal tunnel syndrome, migraine headaches and anxiety which are not well controlled at this point. He is already receiving 90% combined rating from the VA Hospital for these impairments.

Looking at this as a complete picture, to a medical certainty there is no way that he will ever be able to perform the essential functions of his current job. There are no reasonable accommodations that would exist for this.

Assessment and Plan

ICD: Fracture of distal end of fibula with delayed healing (S82.499G)

Assessment: While significantly improved, it is unlikely that he would be able to tolerate the stresses that would be placed on his ankle in the performance of his duty.

Office/outpatient Visit Est (99214)

Follow up: No Follow Up

Misuraca, Paul Male

Barry Weissglass, MD

Barry Weissglass, M.D.

This has been electronically signed on 02-19-2019

Addendum: Reason :Misc:

Modified By: Hlott, Katrina, 2019.02.19 10:54:02

Encounters and Procedures

Clinical Encounter Summaries

Encounter Date: 03/03/2017

Patient

Name MISURACA, PAUL (57yo, M) ID# Appt. Date/Time 03/03/2017 09:45AM

DOB

Service Dept. LCO_Tricom

Provider

WILLIAM S. COREY, MD

Insurance

Med Worker's Comp: ARIEL TPA

Policy/Group # : 2

Referring Provider Name : BOYD, COLLEEN

Employer Name : CHARLESTON COUNTY SHERIFFS OFFICE

Case # :

Case Injury Date : 02/16/2017

Prescription: ES11 - Member is eligible. details

Prescription: ES11 - Member is eligible. details

Chief Complaint

Left Ankle problem

Patient's Care Team

Insurance Adjuster (Worker's Comp): JOHN SNELLING: Ph (912) 200-3183, Fax (803) 365-0098

Referring Provider (Worker's Comp): BOYD, COLLEEN: 4600 GOER ROAD, SUITE 205, CHARLESTON, SC 29406, Ph 843-554-1029, Fax 843-554-1103

Patient's Pharmacies

BILO PHARMACY 5726 (ERX): 1000 TANNER FORD BLVD, HANAHAN SC 29410, Ph (843) 553-4077, Fax (843) 553-5889

Vitals

03/03/2017 09:47 AM

BP: 124/83 sitting

Pulse: 103 bpm

Allergies

Reviewed Allergies

TRAZODONE

Medications

Reviewed Medications

atorvastatin 80 mg tablet

01/09/17 filled

diazepam 10 mg tablet

03/22/16 filled

glipizide 5 mg tablet

10/03/16 filled

ibuprofen 400 mg tablet

01/09/17 filled

Imitrex 50 mg tablet

03/03/17 entered

Take by oral route.

metFORMIN 500 mg tablet

03/03/17 entered

Take 1 tablet(s) twice a day by oral route.

prazosin 2 mg capsule

09/30/16 filled

QUETiapine 100 mg tablet

03/03/17 entered

Take 1 tablet(s) twice a day by oral route.

sertraline

03/03/17 entered

Topamax 100 mg tablet

08/24/16 filled

Vitamin D3 1,000 unit capsule

10/03/16 filled

Vaccines

None recorded.

Problems

Reviewed Problems

Family History

Reviewed Family History

Social History

Reviewed Social History

Smoking Status: Current every day smoker

Smoker (1 PPW)

Cigar/Pipe Use: N

Chewing tobacco: none

Alcohol Intake: Occasional

Hand Dominance: Right

Surgical History

Reviewed Surgical History

Past Medical History

Reviewed Past Medical History

Anxiety: Y

Depression: Y

Diabetes: Y

High Blood Pressure: Y

Kidney Stones: Y

Migraines: Y

Panic Attacks: Y

Sleep Apnea: Y

Screening

None recorded.

HPI

Ankle 7388

Reported by patient.

Location: left

Quality: aching; sharp; frequent; not changing

Severity: moderate

Duration: date of onset: (2/16/17)

Context: work injury; Pt reports altercation in the court room; hit ankle on side of table

Alleviating Factors: elevation; limited weight bearing; NSAIDs; crutches

Aggravating Factors: twisting; weightbearing

Associated Symptoms: swelling

Previous Surgery: none

Prior Imaging: x ray; MRI

Work Related: yes

Notes: Pt presents for IE Left ankle

57 year old male who got into an altercation with someone in court and his left ankle hit the leg of a table. The date of the injury was 2/16/17. He was seen at CCOH who waited 2 days and then sent him for an MRI. He has pain and swelling of the ankle. The pain is worse laterally. It is worse with bearing weight.

ROS

Patient reports night sweats but reports no fever, no significant weight gain, no significant weight loss, and no exercise intolerance. He reports difficulty hearing and ear pain. He reports snoring but reports no sore throat, no bleeding gums, no dry mouth, no mouth ulcers, no oral abnormalities, and no teeth problems. He reports back pain but reports no muscle aches, no muscle weakness, no arthralgias/joint pain, and no swelling in the extremities. He reports migraines but reports no loss of consciousness, no weakness, no numbness, no seizures, and no dizziness. He reports depression and sleep disturbances but reports no alcohol abuse. He reports no dry eyes, no irritation, and no vision change. He reports no frequent nosebleeds and no nose/sinus problems. He reports no chest pain, no arm pain on exertion, no shortness of breath when walking, no shortness of breath when lying down, no palpitations, and no known heart murmur. He reports no cough, no wheezing, no shortness of breath, no coughing up blood, and no sleep apnea. He reports no abdominal pain, no vomiting, normal appetite, no diarrhea, not vomiting blood, no dyspepsia, and no GERD. He reports no incontinence, no difficulty urinating, no hematuria, and no increased frequency. He reports no abnormal mole, no jaundice, and no rashes. He reports no fatigue. He reports no swollen glands and no bruising. He reports no runny nose, no sinus pressure, no itching, no hives, and no frequent sneezing.

Physical Exam

Patient is a 57-year-old male.

Constitutional: General Appearance: healthy-appearing and NAD.

Psychiatric: Orientation: oriented to time, place, and person. Mood and Affect: normal mood and affect and active and alert.

Cardiovascular System: Arterial Pulses Left: posterior tibialis normal and dorsalis pedis normal.

Gait and Station: Appearance: ambulating with crutches.

Ankles and Feet: Inspection Left: no deformity and swelling. Bony Palpation of the Ankle/Foot Left: no tenderness of the metatarsals or the tarsometatarsal joints and tenderness of the lateral ankle. Soft Tissue Palpation of the Ankle/Foot Left: no tenderness of the deltoid ligament. Active Range of Motion Left: plantar flexion normal and dorsiflexion (-10 deg.). Strength Left: unable to assess due to pain.

Neurological System: Sensation on the Left: normal distal extremities.

Skin: Right Lower Extremity: normal.

Assessment / Plan

57 year old male with a minimally displaced left lateral malleolus fracture. He was immobilized in a SLC. He is to remain nwb. He will return in 1 week with repeat xrays of the left ankle nwb in the cast. He was instructed on use of 325 mg of ASA daily. He will remain out of work.

1. Joint pain in ankle and foot

M25.572: Pain in left ankle and joints of left foot

- XR, FOOT - Note to Imaging Facility: 3 Views
Side: LEFT Views (X-RAY, FOOT): AP, Internal Oblique, and Lateral
- XR, ANKLE - Note to Imaging Facility: 2 views
Side: LEFT Views (X-RAY, ANKLE): AP & Oblique
- WORK STATUS REPORT -
Note to Provider:
LCO Workcomp Dep Fax Number: 843-793-5442

Date of Injury: 2/24/17

Next Follow up appt: Friday, March 10, 2017 02:25 PM

(X) Work Related () Not Work Related

() Regular Duty () Modified Duty

() Sedentary Duty<10lbs wt lifting (X) Off work

() 0lbs () 1-15lbs () 16-35 lbs () 36-50 lbs wt lifting restrictions

() R (X) L () B

Climbing, Bending, Stooping: (X) Never () Occasional () Frequent

Standing, Walking: () Never () Occasional () Frequent

Overhead Work: () Never () Occasional () Frequent

Driving: () Yes () No

Alternate between sit/stand: ()

Comments: Mr. Misuraca is to remain out of work until his f/u visit.

MMI: () Yes () No Date of MMI:

*Occasionally is defined as up to one third of the time (33%); 1-4 times per hour

*Frequently is defined as up to one third to two thirds (34-66%); 5-12 times per hour

*Constantly is defined as over two thirds (67-100%) of the time

2. Closed fracture of lateral malleolus

S82.65XA: Nondisplaced fracture of lateral malleolus of left fibula, initial encounter for closed fracture

- BROKEN ANKLE: CARE INSTRUCTIONS

XR, FOOT

- Side: LEFT, Views (X-RAY, FOOT): AP, Internal Oblique, and Lateral

Review of xr, foot taken on 03/03/2017 at LOWCOUNTRY ORTHOPAEDICS & SPORTS MED (N CHARLESTON) shows:

Foot:

Side: left.

Views: ap, lateral, oblique.

Minimally displaced lateral malleolus fracture seen on lateral. Mild hallux valgus.

XR, ANKLE

- Side: LEFT, Views (X-RAY, ANKLE): AP & Oblique

Review of xr, ankle taken on: 03/03/2017 at LOWCOUNTRY ORTHOPAEDICS & SPORTS MED (N CHARLESTON)
 shows:

Ankle:

Side: left.

Views: ap and mortise.

Minimally displaced Weber B left lateral malleolus fracture. No medial clear space widening. No syndesmosis widening.

Return to Office

- William S. Corey, MD for RECHECK 5 at LCO_Tricom on 03/10/2017 at 02:25 PM

Encounter Sign-Off

Encounter signed-off by William S. Corey, MD, 03/05/2017.

Encounter performed and documented by William S. Corey, MD

Encounter reviewed & signed by William S. Corey, MD on 03/05/2017 at 8:35pm

Other Orders

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03/03/2017

From Provider	To Provider
WILLIAM S. COREY, MD ARCIS HEALTHCARE 2880 Tricom Street CHARLESTON, SC 29406-9171 Phone: (843) 797-5050 Fax: (843) 797-3633	

Order Information

Order Orders Included: 1 joint pain in ankle and foot ICD-9: 719.47: Pain in joint, ankle and foot ICD-10: M25.572: Pain in left ankle and joints of left foot • WORK STATUS REPORT Note to Provider: LCO Workcomp Dep Fax Number: 843-793-5442 Date of Injury: 2/24/17 Next Follow up appt: Friday, March 10, 2017 02:25 PM (X) Work Related () Not Work Related () Regular Duty () Modified Duty () Sedentary Duty <10lbs wt lifting (X) Off work () 0lbs () 1-15lbs () 16-35 lbs () 36-50 lbs wt lifting restrictions () R (X) L () B Climbing, Bending Stooping: (X) Never () Occasional () Frequent Standing, Walking: () Never () Occasional () Frequent Overhead Work: () Never () Occasional () Frequent Driving: () Yes () No Alternate between sit/stand: () Comments: Mr. Misuraca is to remain out of work until his f/u visit.

MISURACA, PAUL

MMI: () Yes () No Date of MMI:

*Occasionally is defined as up to one third of the time (33%); 1-4 times per hour

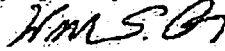
*Frequently is defined as up to one third to two thirds (34-66%); 5-12 times per hour

*Constantly is defined as over two thirds (67-100%) of the time

Patient Information

Patient Name	MISURACA, PAUL
DOB	
Primary Insurance	ARIEL TPA Group: 2017-SCAC-068413 Policy Holder: CHARLESTON COUNTY SHERIFFS OFFICE
Secondary Insurance	None recorded.

Electronically Signed by: WILLIAM S. COREY, MD



Encounters and Procedures

Clinical Encounter Summaries

Encounter Date: 03/10/2017

Patient

Name MISURACA, PAUL (57yo, M) ID# Appt. Date/Time 03/10/2017 02:25PM

DOB

Service Dept. LCO_Tricom

Provider

WILLIAM S. COREY, MD

Insurance

Med Worker's Comp: ARIEL TPA

Policy/Group #

Referring Provider Name: BOYD, COLLEEN

Employer Name: CHARLESTON COUNTY SHERIFFS OFFICE

Case #

Case Injury Date: 02/16/2017

Prescription: ESI1 - Member is eligible. details

Prescription: ESI1 - Member is eligible. details

Chief Complaint

Left Ankle problem

Patient's Care Team

Insurance Adjuster (Worker's Comp): JOHN SNELLING: Ph (912) 200-3183, Fax (803) 365-0098

Referring Provider (Worker's Comp): BOYD, COLLEEN: 4600 GOER ROAD, SUITE 205, CHARLESTON, SC 29406, Ph 843-554-1029, Fax 843-554-1103

Patient's Pharmacies

BILO PHARMACY 5726 (ERX): 1000 TANNER FORD BLVD, HANAHAN SC 29410, Ph (843) 553-4077, Fax (843) 553-5889

Vitals

Ht: 6 ft 03/10/2017
02:18 pm

Wt: 239 lbs 03/10/2017
02:18 pm

BMI: 32.4 03/10/2017
02:19 pm

BP: 128/87 sitting
03/10/2017 02:19
pm

Pulse: 83 bpm
03/10/2017 02:19
pm

Allergies

Reviewed Allergies

TRAZODONE

Medications

Reviewed Medications

atorvastatin 80 mg tablet

01/09/17 filled

diazepam 10 mg tablet

03/22/16 filled

glipizide 5 mg tablet

10/03/16 filled

ibuprofen 400 mg tablet

01/09/17 filled

Imitrex 50 mg tablet

03/03/17 entered

Take by oral route.

metFORMIN 500 mg tablet

03/03/17 entered

Take 1 tablet(s) twice a day by oral route.

Norco 5 mg-325 mg tablet

03/10/17 prescribed

Take 1 tablet(s) every 6 hours by oral route as needed.

prazosin 2 mg capsule

09/30/16 filled

QUetiapine 100 mg tablet

03/03/17 entered

Take 1 tablet(s) twice a day by oral route:

sertraline	03/03/17 entered
Topamax 100 mg tablet	08/24/16 filled
Vitamin D3 1,000 unit capsule	10/03/16 filled

Vaccines

None recorded.

Problems

Reviewed Problems

- Closed fracture of lateral malleolus - Onset: 03/13/2017

Family History

Reviewed Family History

Social History

Reviewed Social History

Smoking Status: Current every day smoker

Smoker: (1 PPW)

Cigar/Pipe Use: N

Chewing tobacco: none

Alcohol intake: Occasional

Hand Dominance: Right

Surgical History

Reviewed Surgical History

Past Medical History

Reviewed Past Medical History

Anxiety: Y

Depression: Y

Diabetes: Y

High Blood Pressure: Y

Kidney Stones: Y

Migraines: Y

Panic Attacks: Y

Sleep Apnea: Y

Screening

None recorded.

HPI

Ankle 7388

Reported by patient.

Location: left

Quality: not changing

Severity: moderate

Alleviating Factors: rest; elevation

Aggravating Factors: standing; walking; weightbearing

Work Related: yes

Working: no

57 year old male returns 1 week following closed management of a left distal fibula fracture. He has remained nwb in a SLC. He continues to have pain.

ROS

Patient reports no fever. He reports no irritation. He reports no difficulty hearing. He reports no nose/sinus problems. He reports no sore throat. He reports no chest pain. He reports no cough. He reports no abdominal pain, no vomiting, and no diarrhea. He reports no jaundice and no rashes. He reports no loss of consciousness. He reports no fatigue. He reports no swollen glands. He reports no runny nose, no sinus pressure, no hives, and no frequent sneezing.

Physical Exam

Patient is a 57-year-old male.

Fracture Follow Up: General Appearance: skin intact, neurovascular intact, capillary refill normal, and swelling.

cast well fitting

Assessment / Plan

57 year old male with a healing left lateral malleolus fracture 1 week following closed management. He will remain nwb in a SLC. Continue with ASA. He will return in 1 week with repeat xrays of the left ankle in the cast.

1. Ankle pain

M25.572: Pain in left ankle and joints of left foot

- XR, ANKLE - Note to Imaging Facility: 2 views

Side: LEFT

- WORK STATUS REPORT -

Note to Provider:

LCO Workcomp Dep Fax Number: 843-793-5442

Date of Injury: 2/24/17

Next Follow up appt: 10 Days

(X) Work Related () Not Work Related

() Regular Duty () Modified Duty

() Sedentary Duty < 10lbs wt lifting (X) Off work

() 0lbs () 1-15lbs () 16-35 lbs () 36-50 lbs wt lifting restrictions

() R (X) L () B

Climbing, Bending, Stooping: (X) Never () Occasional () Frequent

Standing, Walking: () Never () Occasional () Frequent

Overhead Work: () Never () Occasional () Frequent

Driving: () Yes () No

Alternate between sit/stand: ()

Comments: Mr. Misuraca is to remain out of work until his f/u visit.

MMI: () Yes () No Date of MMI:

*Occasionally is defined as up to one third of the time (33%); 1-4 times per hour

*Frequently is defined as up to one third to two thirds (34-66%); 5-12 times per hour

*Constantly is defined as over two thirds (67-100%) of the time

- KNEE SCOOTER - NWB LLE Dispense Qty: 1 Unit

Side: LEFT

- Norco 5 mg-325 mg tablet - Take 1 tablet(s) every 6 hours by oral route as needed. Qty: 40 tablet(s)

Refills: 0 Pharmacy: BILO PHARMACY 5726

2. Closed fracture of lateral malleolus

S82.65XD: Nondisplaced fracture of lateral malleolus of left fibula, subsequent encounter for closed fracture with routine healing

- BROKEN ANKLE: CARE INSTRUCTIONS

XR, ANKLE

- Side: LEFT

Review of xr, ankle taken on 03/10/2017 at LOWCOUNTRY ORTHOPAEDICS & SPORTS MED (N CHARLESTON)

shows:

Ankle:

Side: left.

Views: ap, lateral, and mortise.

Radiographic Findings: fracture healing satisfactorily, alignment w/o change.

Minimally displaced lateral malleolus fracture. No medial clear space widening. No syndesmosis widening. In cast.

Return to Office

- William S. Corey, MD for RECHECK 10 at LCO Tricom on 03/21/2017 at 09:15 AM

Encounter Sign-Off

Encounter signed-off by William S. Corey, MD, 03/13/2017.

Encounter performed and documented by William S. Corey, MD

Encounter reviewed & signed by William S. Corey, MD on 03/13/2017 at 10:01am

Other Orders:

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03/10/2017

From Provider	To Provider
WILLIAM S. COREY, MD ARCIS HEALTHCARE 2880 Tricom Street CHARLESTON, SC 29406-9171 Phone: (843) 797-5050 Fax: (843) 797-3633	

Order Information

Order Orders Included: 1 Ankle pain ICD-10: M25.572: Pain in left ankle and joints of left foot • WORK STATUS REPORT Note to Provider: LCO Workcomp Dep Fax Number: 843-793-5442 Date of Injury: 2/24/17 Next Follow up appt: Tuesday, March 21, 2017 09:15 AM (X) Work Related () Not Work Related () Regular Duty () Modified Duty () Sedentary Duty <10lbs wt lifting (X) Off work () 0lbs () 1-15lbs () 16-35 lbs () 36-50 lbs wt lifting restrictions () R (X) L () B Climbing, Bending, Stooping: (X) Never () Occasional () Frequent Standing, Walking: () Never () Occasional () Frequent Overhead Work: () Never () Occasional () Frequent Driving: () Yes () No Alternate between sit/stand: () Comments: Mr. Misuraca is to remain out of work until his f/u visit. MMI: () Yes () No Date of MMI: *Occasionally is defined as up to one third of the time (33%); 1-4 times per hour *Frequently is defined as up to one third to two thirds (34-66%); 5-12 times per hour *Constantly is defined as over two thirds (67-100%) of the time

Patient Information

Patient Name	MISURACA, PAUL
DOB	
Primary Insurance	ARIEL TPA Group: 2017-SCAC-068413 Policy Holder: CHARLESTON COUNTY SHERIFFS OFFICE
Secondary Insurance	None recorded.

Electronically Signed by: WILLIAM S. COREY, MD

W.S. Corey

Encounters and Procedures

Clinical Encounter Summaries

Encounter Date: 03/21/2017

Patient

Name MISURACA, PAUL (57yo, M) ID# [REDACTED] Appt. Date/Time 03/21/2017 09:15AM

DOB [REDACTED]

Service Dept. LCO_Tricom

Provider WILLIAM S. COREY, MD

Insurance

Med Worker's Comp: ARIEL TPA

Policy/Group #: [REDACTED]

Referring Provider Name: BOYD, COLLEEN

Employer Name: CHARLESTON COUNTY SHERIFFS OFFICE

Case #: [REDACTED]

Case Injury Date: 02/16/2017

Prescription: ESI1 - Member is eligible. details

Prescription: ESI1 - Member is eligible. details

Chief Complaint

Followup: Closed fracture of lateral malleolus

Patient's Care Team

Insurance Adjuster (Worker's Comp): JOHN SNELLING: Ph (912) 200-3183, Fax (803) 365-0098

Referring Provider (Worker's Comp): BOYD, COLLEEN: 4600 GOER ROAD, SUITE 205, CHARLESTON, SC 29406, Ph 843-554-1029, Fax 843-554-1103

Patient's Pharmacies

BILO PHARMACY 5726 (ERX): 1000 TANNER FORD BLVD, HANAHAN SC 29410, Ph (843) 553-4077, Fax (843) 553-5889

Vitals

03/21/2017 09:29 am

Ht: 6 ft

Wt: 239 lbs

BMI: 32.4

BP:

Allergies

Reviewed Allergies

TRAZODONE

Medications

Reviewed Medications

atorvastatin 80 mg tablet

01/09/17 filled

diazepam 10 mg tablet

03/22/16 filled

glipizide 5 mg tablet

03/13/17 filled

HYDROcodone 5 mg-acetaminophen 325 mg tablet

03/10/17 filled

Take 1 tablet(s) every 6 hours by oral route as needed.

ibuprofen 400 mg tablet

01/09/17 filled

Imitrex 50 mg tablet

03/03/17 entered

Take by oral route.

metFORMIN 500 mg tablet

03/03/17 entered

Take 1 tablet(s) twice a day by oral route.

prazosin 2 mg capsule

09/30/16 filled

QUETiapine 100 mg tablet

03/03/17 entered

Take 1 tablet(s) twice a day by oral route.

sertraline	03/03/17 entered
Topamax 100 mg tablet	08/24/16 filled
Vlagra 100 mg tablet	03/14/17 filled
Vitamin D3 1,000 unit capsule	10/03/16 filled

Vaccines

None recorded.

Problems

Reviewed Problems

- Closed fracture of lateral malleolus - Onset: 03/13/2017

Family History

Reviewed Family History

Social History

Reviewed Social History

Smoking Status: Current every day smoker

Smoker (1 PPW)

Cigar/Pipe Use: N

Chewing tobacco: none

Alcohol intake: Occasional

Hand Dominance: Right

Surgical History

Reviewed Surgical History

Past Medical History

Reviewed Past Medical History

Anxiety: Y

Depression: Y

Diabetes: Y

High Blood Pressure: Y

Kidney Stones: Y

Migraines: Y

Panic Attacks: Y

Sleep Apnea: Y

Screening

None recorded.

HPI

Ankle 7388

Reported by patient.

Location: left

Quality: aching; frequent; not changing

Severity: moderate

Duration: date of onset: (2/16/17)

Context: work injury

Alleviating Factors: rest; elevation; limited weight bearing; SLC; Knee Scooter

Aggravating Factors: standing; walking; weightbearing

Associated Symptoms: no swelling

Previous Surgery: none

Prior Imaging: x ray

Work Related: yes

Working: no

57 year old male returns 2 weeks following closed management of a left lateral malleolus fracture. He has remained nwb. He still has pain.

ROS

Patient reports no fever. He reports no irritation. He reports no difficulty hearing. He reports no nose/sinus problems. He reports no sore throat. He reports no chest pain. He reports no cough. He reports no abdominal pain, no vomiting, and no diarrhea. He reports no jaundice and no rashes. He reports no loss of consciousness. He reports no fatigue. He reports no swollen glands. He reports no runny nose, no sinus pressure, no hives, and no frequent sneezing.

Physical Exam

Patient is a 57-year-old male.

Fracture Follow Up: General Appearance: skin in tact, neurovascular intact, capillary refill normal, and swelling.

cast well fitting

Assessment / Plan

57 year old male with a healing left lateral malleolus fracture 2 weeks following closed management. He will remain nwb in a SLC. He will return in 4 weeks with repeat xrays of the left ankle out of the cast nwb. He is to continue to take ASA 325 mg daily.

1. Ankle pain

M25.572: Pain in left ankle and joints of left foot

- XR, ANKLE - Note to Imaging Facility: 2 views

Side: LEFT

- WORK STATUS REPORT -

Note to Provider:

LCO Workcomp Dep Fax Number: 843-793-5442

Date of Injury: 2/24/17

Next Follow up appt: Tuesday, April 18, 2017 09:55 AM

(X) Work Related () Not Work Related

() Regular Duty () Modified Duty

() Sedentary Duty < 10lbs wt lifting (X) Off work

() 0lbs () 1-15lbs () 16-35 lbs () 36-50 lbs wt lifting restrictions

() R (X) L () B

Climbing, Bending, Stooping: (X) Never () Occasional () Frequent

Standing, Walking: () Never () Occasional () Frequent

Overhead Work: () Never () Occasional () Frequent

Driving: () Yes () No

Alternate between sit/stand: ()

Comments: Mr. Misuraca is to remain out of work until his f/u visit.

MMI: () Yes () No Date of MMI:

*Occasionally is defined as up to one third of the time (33%); 1-4 times per hour

*Frequently is defined as up to one third to two thirds (34-66%); 5-12 times per hour

*Constantly is defined as over two thirds (67-100%) of the time

2. Closed fracture of lateral malleolus

S82.65XD: Nondisplaced fracture of lateral malleolus of left fibula, subsequent encounter for closed fracture with routine healing

- BROKEN ANKLE: CARE INSTRUCTIONS

XR, ANKLE

- Side: LEFT

Review of xr, ankle taken on 03/21/2017 at LOWCOUNTRY ORTHOPAEDICS & SPORTS MED (N CHARLESTON)

shows:

Ankle:

Side: right.

Views: ap, lateral, and mortise.

Healing nondisplaced lateral malleolus fracture. No medial clear space widening. No syndesmosis widening. n cast.

Return to Office

- William S. Corey, MD for RECHECK 5 at LCO_Tricom on 04/18/2017 at 09:55 AM

Encounter Sign-Off

Encounter signed-off by William S. Corey, MD, 03/21/2017.

Encounter performed and documented by William S. Corey, MD

Encounter reviewed & signed by William S. Corey, MD on 03/21/2017 at 4:34pm

Other Orders

This fax may contain legally privileged health information and is intended for the sole use of the intended recipient. You are hereby notified that the disclosure, or other unlawful use of this health information is prohibited.

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03/21/2017

From Provider	To Provider
WILLIAM S. COREY, MD ARCIS HEALTHCARE 2880 Tricom Street CHARLESTON, SC 29406-9171 Phone: (843) 797-5050 Fax: (843) 797-3633	

Order Information

Order Orders Included: 1 Ankle pain ICD-10: M25.572; Pain in left ankle and joints of left foot • WORK STATUS REPORT Note to Provider: LCO Workcomp Dep Fax Number: 843-793-5442 Date of Injury: 2/24/17 Next Follow up appt: Tuesday, April 18, 2017 09:55 AM (X) Work Related () Not Work Related () Regular Duty () Modified Duty () Sedentary Duty <10lbs wt lifting (X) Off work () 0lbs () 1-15lbs () 16-35 lbs () 36-50 lbs wt lifting restrictions () R (X) L () B Climbing, Bending, Stopping: (X) Never () Occasional () Frequent Standing, Walking: () Never () Occasional () Frequent Overhead Work: () Never () Occasional () Frequent Driving: () Yes () No Alternate between sit/stand: () Comments: Mr. Misuraca is to remain out of work until his f/u visit. MMI: () Yes () No Date of MMI: *Occasionally is defined as up to one third of the time (33%); 1-4 times per hour *Frequently is defined as up to one third to two thirds (34-66%); 5-12 times per hour *Constantly is defined as over two thirds (67-100%) of the time

Patient Information

Patient Name	MISURACA, PAUL
DOB	
Primary Insurance	ARIEL TPA Group: 2017-SCAC-068413 Policy Holder: CHARLESTON COUNTY SHERIFFS OFFICE
Secondary Insurance	None recorded.

Electronically Signed by: WILLIAM S. COREY, MD

H.M.S. O.

For Department Use Only
Cerner Imaging Exam Report
 Facility: ECH

Patient Name: MISURACA, PAUL L.

MRN: [REDACTED]

FIN: [REDACTED]

Patient Type: 2 - Outpatient

Accession No: 391-MR-17-000387

Exam Date/Time: 02/28/2017 11:25

Ordering Physician: BOYD NP, COLLEEN

Resident:

Interpreting Physician: GOLTRA MD, DAVID D

Reason for Exam: M25.572

DOB/Age/Sex: [REDACTED] 57 Years Male

Location: ECH - IX//

Exam: MRI Ankle W/O Contrast Left

Exam Status: Completed

Transcriptionist:

Report Status: Final

Transcribed Date/Time:

REPORT

EXAMINATION: MRI Ankle W/O Contrast Left 2/28/2017 10:54 AM

PATIENT: PAUL L MISURACA 001095718

ACCESSION NUMBER: 00391MR170000387

INDICATION: M25.572 work-related injury in altercation

COMPARISON: X-ray studies from today

TECHNIQUE: Routine multi-planar, multi-sequence MRI of the left ankle without contrast.

FINDINGS: Multiplanar imaging through the left ankle demonstrate the presence of a mildly posteriorly and inferiorly displaced obliquely oriented fracture through the distal fibula.

There is diffuse soft tissue swelling.

The anterior and posterior talofibular and calcaneofibular ligaments are intact.

There is mild subchondral edema within the posterior tibial plafond at the posterior tibiotalar articulation.

The medial and lateral flexor tendons as well as extensor tendons of the ankle are all intact.

The Achilles tendon and plantar fascia are intact.

There is an osseous hemangioma within the neck of the calcaneus.

IMPRESSION: Mildly displaced obliquely oriented fracture through the distal fibula. Subcortical edema within the posterior tibial plafond. No other intrinsic derangement of the ankle is noted.

Final Report

For Department Use Only
Cerner Imaging Exam Report

Facility: ECH

Patient Name: MISURACA, PAUL L

MRN: [REDACTED]

FIN: [REDACTED]

Patient Type: 2 - Outpatient

Accession No: 391-MR-17-000387

Exam Date/Time: 02/28/2017 11:25

Ordering Physician: BOYD NP, COLLEEN

Resident:

Interpreting Physician: GOLTRA MD, DAVID D

Reason for Exam: M25.572

DOR/Age/Sex: [REDACTED] 57 Years Male

Location: ECH - IX/1

Exam: MRI Ankle W/O Contrast Left

Exam Status: Completed

Transcriptionist:

Report Status: Final

Transcribed Date/Time:

Dictated: 02/28/2017 1:48 pm

Dictated By: GOLTRA MD, DAVID D

Electronic Signature: 02/28/2017 2:01 pm Signed By: GOLTRA MD, DAVID D

*** END OF REPORT ***

Page 2

Printed Date/Time: 03/02/2017 08:31



SOUTH CAROLINA DIAGNOSTIC IMAGING

Tri-County Radiology North Charleston
2851 Tricorn Boulevard North Charleston, SC 29406
p: (843) 529-0600 f: (843) 824-1246

PATIENT NAME: Misuraca, Paul**DOB:** [REDACTED]**MRN:** [REDACTED]**PHYSICIAN:** William S. Corey, MD**EXAM DATE:** 04/24/2018**EXAM:** CT Left Ankle Without Contrast**REASON FOR EXAM:** Pain in left ankle and joints of left foot**TECHNIQUE:** Helical CT of the left ankle at 1.25 mm collimation. Reformatted images in the sagittal and coronal plane. Total DLP 1042.97 mGy-cm. CTDIvol 64.06 mGy.**COMPARISON:** Prior CT left ankle 07/18/2017. Dictation held awaiting the prior study that is now available.**FINDINGS:** Intact Achilles tendon. The plantar fascia is not included in the field of view. Lucency along the lateral margin of the calcaneus, new from the prior suggest bone graft harvest site or other operative change. Mild diffuse osteopenia suggested.

The ankle joint is congruent. No osteochondral lesions of the talar dome.

Compression plate and screws traverse the distal fibula, with an improved appearance, and near completely healed distal fibular fracture. Solid bony bridging centrally and along the proximal aspect of the fracture. Persistent lucency along the distal aspect of the fracture suggests incomplete healing of the distal 9 mm, this portion of the fracture extends into an intra-articular position without significant articular step-off or deepening. No complications of the hardware.

Intact anterior and posteromedial tendons. Tendinosis suggested both peroneal tendons and possible short segment split tear of the peroneus brevis tendon (axial image 82). No full-thickness tendon tear. Metallic artifact partially obscures the ankle.

IMPRESSION:

1. Postoperative changes with compression plate and screws traversing the near completely healed distal fibular fracture, with solid bony fusion centrally and proximally. Persistent lucency of the distal aspect of the distal fibular fracture line, involves the distal 9 mm, this portion extends into and into intra-articular position without significant articular step-off or deepening (axial image 59).
2. Mild tendinosis of both the peroneus longus and brevis tendons from the fibular groove to the base of

Radiology

PAGE 1 of 2

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4/25/2018 3:18:36 PM PAGE 3/003

Fax Server

PATIENT NAME: Misuraca, Paul**DOB:** [REDACTED]**EXAM:** CT Left Ankle Without Contrast**EXAM DATE:** 04/24/2018

the foot and possible short segment split tear of the peroneus brevis tendon near the calcaneal tubercle. No full-thickness tendon tear. Thickened lateral ligaments consistent with a prior sprain.

Donald E Olofsson, DO

***** THIS IS AN ELECTRONICALLY VERIFIED REPORT *****

4/25/2018 2:45 PM: Donald E Olofsson, DO

DEO/deo

DD: 04/25/2018 02:31 pm

DT: 04/25/2018 02:45 pm

Accession #: 08-2825571

Radiology

PAGE 2 of 2

2nd Opinion Appt, 08-01-2018 (OPEN)

1 ankle/2nd opinion/wc/Dr. K accepts, any changes?/ complete

Performed by Chris Kestner, MD, Orthopedic Surgery, (843) 572-2663

CC: Left ankle.

HPI: Paul is a 59-year-old male complaining of pain in his left ankle. He originally injured this in February 2017. He was found to have a fracture distal fibula. This was treated nonsurgically at first and developed nonunion and he underwent surgical fixation in November 2017. He reports that ever since the surgery is had continued pain in the ankle. He reports is been barely able to bear weight on this since then. He's been to physical therapy but still reports severe instability and pain. Pain improved only with rest made worse with trying to bear weight or motion.

Past medical history, medications, allergies, past surgical history, family medical history, social history and review of systems are all reviewed and are as stated above.

Physical Exam: Healthy appearing, no acute distress, alert and oriented x 3. Stands with normal hindfoot valgus. Ambulates with substantially antalgic gait. WEIGHT on his heel and not over his midfoot or forefoot.

Evaluation of bilateral lower extremities reveals well-healed scars otherwise no erythema, ecchymosis, lacerations or abrasions. Point tenderness of the distal fibula and less over the lateral aspect of the foot. No tenderness about the medial anterior aspect of the ankle. Range of motion of the ankle and subtalar joints reveals just beyond neutral dorsiflexion 40° plantar flexion 40° inversion 10° of eversion and nearly equal bilaterally. Strength is substantially decreased all muscle groups the left compared to the right and 5 out of 5 for lower muscle groups on the right. Sensation is subjectively decreased to the lateral, plantar and medial aspects of the foot but equal to the dorsal aspects bilaterally. Capillary refill is less than 3 seconds, there is palpable DP PT pulse.

Radiographic Evaluation: AP, mortise and lateral views the ankle reveal post surgical changes consistent distal fibular repair. CAT scan imported in the system reveals possible nonunion of the most distal anterior aspect of the fibula. These results were reviewed with the patient

Assessment/Plan: Since post repair left distal fibula fracture. His pain does seem to be coming mostly from the fibular repair site. That being said his pain is somewhat out of proportion to be expected following this injury. This is combined with severe decreased strength and loss of balance. At this point he is been through physical therapy as Best option be a removal of hardware and possible excision of the distal fibular fragment versus repair with bone graft. We removed the fragment he likely require repair of the lateral ligaments as well to keep the stability of the ankle.

Ankle pain (Left)

- Order XR, ankle

Fracture of lateral malleolus

- Provided ankle fracture: rehab exercises
- Provided broken ankle: care instructions

MISURACA, PAUL L

Patient

Name MISURACA, PAUL (59yo, M) ID# [REDACTED] **Appt. Date/Time** 10/09/2018 08:45AM
DOB [REDACTED] **Service Dept.** SC Sports Medicine & Orthopaedic Center
Provider CHRIS J KESTNER, MD
Insurance Med Worker's Comp: ARIEL TPA
Employer Name: CHARLESTON COUNTY
Case #: [REDACTED]
Case Injury Date: 02/16/2017
Prescription: ESI1 - Member is eligible.
Prescription: ESI1 - Member is eligible.

Chief Complaint

in room 8
DOS 9-27-18
Repair fibula non union

xray

Patient's Care Team

Insurance Adjuster (Worker's Comp): JOHN SNELLING: Ph (912) 200-3183, Fax (803) 528-8059

Patient's Pharmacies

BILO PHARMACY 5726 (ERX): 1000 TANNER FORD BLVD, HANAHAN SC 29410, Ph (843) 553-4077, Fax (843) 553-5889

Vitals

10/09/2018 08:53 AM

Ht: 6 ft

Wt: 230 lbs

BMI: 31.2

Allergies

Reviewed Allergies

TRAZODONE: - nightmares

Medications

Reviewed Medications

aspirin 325 mg tablet 09/28/18 prescribed
Take 1 tablet(s) every day by oral route.

atorvastatin 80 mg tablet 05/03/18 filled

clonazepam 1 mg tablet 11/14/17 filled

Colace 100 mg capsule 09/27/18 prescribed
Take 1 capsule(s) twice a day by oral route.

ergocalciferol (vitamin D2) 50,000 unit capsule 08/29/17 filled

Flucelvax Quad 2018-2019 (PF) 60 mcg (15 mcg x 4)/0.5 mL IM syringe 09/27/18 filled

FLUoxetine 20 mg capsule 09/18/17 filled

glipizide 5 mg tablet 07/31/18 filled

Imitrex 100 mg tablet 12/21/17 entered
2 tab qday

MISURACA, PAUL L [REDACTED]

levothyroxine 75 mcg tablet	09/24/18 filled
Lyrica 300 mg capsule	09/07/18 filled
metFORMIN 1,000 mg tablet	08/11/18 filled
Muse 1,000 mcg urethral suppository	02/23/18 filled
oxyCODONE 5 mg capsule Take 1 capsule(s) every 4 hours by oral route.	09/27/18 prescribed
Phenergan 25 mg tablet Take 1 tablet(s) every 6 hours by oral route.	09/27/18 prescribed
prazosin 2 mg capsule Take 1 capsule(s) 3 times a day by oral route.	12/21/17 entered
QUETiapine 100 mg tablet Take 1 tablet(s) twice a day by oral route.	12/21/17 entered
rosuvastatin 40 mg tablet	09/24/18 filled
tamsulosin 0.4 mg capsule	08/22/18 filled
tiZANidine 4 mg tablet Take 1 tablet(s) every 8 hours by oral route.	12/21/17 entered
topiramate 100 mg tablet Take 1 tablet(s) twice a day by oral route.	12/21/17 entered
topiramate 200 mg tablet	01/19/18 entered
varденаfil 20 mg tablet every 24 hours.	01/19/18 entered
Viagra 100 mg tablet	09/22/17 filled
Vitamin D3 1,000 unit capsule	01/19/18 entered
Vyvanse 40 mg capsule	07/16/18 filled
Zanaflex start 12/12/2017	12/12/17 filled

Problems

Reviewed Problems

- Knee pain - Onset: 11/22/2016
- Displacement of cervical intervertebral disc without myelopathy - Onset: 12/21/2017
- Displacement of lumbar intervertebral disc without myelopathy - Onset: 12/21/2017
- Neck pain - Onset: 12/21/2017
- Spinal stenosis of lumbar region - Onset: 12/21/2017
- Low back pain - Onset: 11/22/2016
- Pain radiating to head - Onset: 11/22/2016
- Fracture of lateral malleolus - Onset: 08/01/2018

Family History

MISURACA, PAUL L [REDACTED]

Reviewed Family History

Mother - Diabetes mellitus
Father - Myocardial infarction

Social History

Reviewed Social History

Ortho
Smoking Status: Former smoker
Occupation: work comp
Marital status: Married
Alcohol intake: Occasional

Surgical History

Reviewed Surgical History

Appendectomy
Knee Arthroscopy - bilateral
Other - pilonidal
Orthopaedic Surgery - discectomy
Orthopaedic Surgery - neck
Repair of fibula nonunion/malunion with internal fixation - 09/27/2018

GBDT - 12/26/18 - LT ANKLE

Past Medical History

Reviewed Past Medical History

Diabetes: Y
Thyroid Problems: Y
cholesterol: Y

Screening

None recorded.

ROS

Constitutional: Constitutional: no significant weight gain or loss and no fever, night sweats, or exercise intolerance.

Eyes: Eyes: no irritation, dry eyes, or vision change.

ENMT: Ears: no difficulty hearing or ear pain. Nose: no frequent nosebleeds or nose/sinus problems. Mouth/Throat: no snoring, sore throat, bleeding gums, dry mouth, mouth ulcers, oral abnormalities, or teeth problems.

Cardiovascular: Cardiovascular: no shortness of breath when walking or breath when lying down and no palpitations, chest pain, arm pain on exertion, or known heart murmur.

Respiratory: Respiratory: no cough, wheezing, shortness of breath, or coughing up blood.

Gastrointestinal: Gastrointestinal: no vomiting, diarrhea, or abdominal pain and normal appetite and not vomiting blood.

Genitourinary: Genitourinary: no incontinence, hematuria, difficulty urinating, or increased frequency.

Musculoskeletal: Musculoskeletal: no muscle aches or weakness and no arthralgias/joint pain, back pain, or swelling in the extremities.

Integumentary: Skin: no jaundice, rashes, or abnormal mole.

Neurologic: Neurologic: no weakness, numbness, seizures, dizziness, headaches, or loss of consciousness.

Psychiatric: Psych: no depression, sleep disturbances, or alcohol abuse and feeling safe in relationship.

Endocrine: Endocrine: no fatigue.

Hematologic/Lymphatic: Hematologic/Lymphatic no bruising or swollen glands.

Allergic/Immunologic: Allergy/Immunologic: no itching, hives, runny nose, sinus pressure, or frequent sneezing.

Assessment / Plan

Paul returns for violation of his ankle. He reports he feels dramatically better already. He has noted some weight on this.

N

MISURACA, PAUL L

Physical examination: Incision clean dry and intact. Sensation intact light touch. Flex Ascension noted ankle and toes. Cap refills in 3 seconds.

Radial graphic evaluation: AP oblique and lateral views demonstrates good excision of the nonunion area new para system plan: Two-week status post removal hardware excision nonunion repair lateral ligaments left ankle. Doing very well. We'll placement Aircast boot and he may bear weight as tolerated on this. We'll see him back in 4 weeks.

1. Fracture of lateral malleolus

S82.62XK: Displaced fracture of lateral malleolus of left fibula, subsequent encounter for closed fracture with nonunion

2. Ankle pain

M25.572: Pain in left ankle and joints of left foot

• XR, ANKLE

Side: Weighted/Unweighted:
LEFT Unweighted

• PNEUMATIC TALL WALKING BOOT - Use as directed. Dispense Qty: 1 Unit

Size:
12

Return to Office

- to see Chris J Kestner, MD at SC Sports Medicine & Orthopaedic Center on or around 11/06/2018

Encounter Sign-Off

Encounter signed-off by Chris J Kestner, MD 10/09/2018.

Encounter performed and documented by Chris J Kestner, MD

Encounter reviewed & signed by Chris J Kestner, MD on 10/09/2018 at 9:12am

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ne MISURACA, PAUL (59yo, M) ID# [REDACTED]
B [REDACTED]
vider CHRIS J KESTNER, MD
urance Med Worker's Comp: ARIEL TPA
Employer Name : CHARLESTON COUNTY
Case # : [REDACTED]
Case Injury Date : 02/16/2017
Prescription: ES11 - Member is eligible. [details](#)
Prescription: ES11 - Member is eligible. [details](#)

Appt. Date/Time 02/08/2019 09:30AM
Service Dept. SC Sports Medicine & Orthopaedic Center

Chief Complaint

Room 1

OS 9-27-18

1st apt 1-4-19

Status post excision of nonunion repair lateral ligaments left ankle. Doing extremely well. May progress to home therapy at this point. May start to increase his activity to include mild impact speed we will see him back in 4-6 weeks for final checkup.

Physician's Care Team

Insurance Adjuster (Worker's Comp): JOHN SNELLING: Ph (912) 200-3183, Fax (803) 528-8059

Physician's Pharmacies

LO PHARMACY 5726 (ERX): 1000 TANNER FORD BLVD, HANAHAN SC 29410, Ph (843) 553-4077, Fax (843) 553-5889

Alcohol

None recorded.

Drugs

Reviewed Allergies

RAZODONE: - nightmares

Indications

Reviewed Medications

Aspirin 325 mg tablet

Take 1 tablet(s) every day by oral route.

09/28/18 prescribed Chris J Kestner, MD

Atorvastatin 80 mg tablet

12/22/18 filled MEDCO

Clonazepam 1 mg tablet

11/14/17 filled MEDCO

Place 100 mg capsule

Take 1 capsule(s) twice a day by oral route.

09/27/18 prescribed Chris J Kestner, MD

Calciferol (vitamin D2) 50,000 unit capsule

08/29/17 filled MEDCO

Esteride 5 mg tablet

01/07/19 filled MEDCO

Ucelvax Quad 2018-2019 (PF) 60 mcg (15 mcg x 4)/0.5 mL IM syringe

09/27/18 filled MEDCO

Uoxetine 20 mg capsule

09/18/17 filled MEDCO

Ipizide 5 mg tablet

12/30/18 filled MEDCO

iltrex 100 mg tablet

Lab qday

12/21/17 entered Todd J. Lansford, MD

vothyroxine 75 mcg tablet

01/17/19 filled MEDCO

rica 300 mg capsule

12/22/18 filled MEDCO

etFORMIN 1,000 mg tablet

10/31/18 filled MEDCO

use 1,000 mcg urethral suppository

02/23/18 filled MEDCO

tyCODONE 5 mg capsule

Take 1 capsule(s) every 4 hours by oral route.

09/27/18 prescribed Chris J Kestner, MD

energan 25 mg tablet

09/27/18 prescribed Chris J Kestner, MD

ike 1 capsule(s) 3 times a day by oral route.

Uetiapine 100 mg tablet

ike 1 tablet(s) twice a day by oral route.

12/21/17 entered

Todd J. Lansford, MD

suvastatin 40 mg tablet

01/17/19 filled

MEDCO

JMAtriptan 6 mg/0.5 mL subcutaneous pen injector

10/31/18 filled

MEDCO

msulosin 0.4 mg capsule

08/22/18 filled

MEDCO

ANidine 4 mg tablet

ike 1 tablet(s) every 8 hours by oral route.

12/21/17 entered

Todd J. Lansford, MD

piramate 100 mg tablet

ike 1 tablet(s) twice a day by oral route.

10/25/18 filled

MEDCO

piramate 200 mg tablet

01/19/18 entered

Christi Smoak

irdenafil 20 mg tablet

ery 24 hours.

01/19/18 entered

Christi Smoak

agra 100 mg tablet

09/22/17 filled

MEDCO

tamin D3 1,000 unit capsule

01/19/18 entered

Christi Smoak

rvanse 40 mg capsule

07/16/18 filled

MEDCO

inaflex

art 12/12/2017

12/12/17 filled

Christi Smoak

blems

viewed Problems

Knee pain - Onset: 11/22/2016

Displacement of cervical intervertebral disc without myelopathy - Onset: 12/21/2017

Displacement of lumbar intervertebral disc without myelopathy - Onset: 12/21/2017

Neck pain - Onset: 12/21/2017

Spinal stenosis of lumbar region - Onset: 12/21/2017

Low back pain - Onset: 11/22/2016

Pain radiating to head - Onset: 11/22/2016

Fracture of lateral malleolus - Onset: 08/01/2018

mily History

mily History not reviewed (last reviewed 12/07/2018)

other - Diabetes mellitus

ther - Myocardial infarction

cial History

ocial History not reviewed (last reviewed 12/07/2018)

rtho

oking Status: Former smoker

ccupation: work comp

arital status: Married

cohol intake: Occasional

ercise level: None

rgical History

rgical History not reviewed (last reviewed 12/07/2018)

Appendectomy

Knee Arthroscopy - bilateral

Other - pilonidal

Orthopaedic Surgery - discectomy

Orthopaedic Surgery - neck

Repair of fibula nonunion/malunion with internal fixation - 09/27/2018

3DT - 12/26/18 - LT ANKLE

st Medical History

st Medical History not reviewed (last reviewed 12/07/2018)

reening

One recorded.

IS

Constitutional: Constitutional: no significant weight gain or loss and no fever, night sweats, or exercise intolerance.

es: Eyes: no irritation, dry eyes, or vision change.

ENT: Ears: no difficulty hearing or ear pain. Nose: no frequent nosebleeds or nose/sinus problems. Mouth/Throat: no snoring, sore throat, bleeding gums, dry mouth, mouth ulcers, oral abnormalities, or teeth problems.

Cardiovascular: Cardiovascular: no shortness of breath when walking or breath when lying down and no palpitations, chest pain, arm pain on exertion, or known heart murmur.

Respiratory: Respiratory: no cough, wheezing, shortness of breath, or coughing up blood.

Gastrointestinal: Gastrointestinal: no vomiting, diarrhea, or abdominal pain and normal appetite and not vomiting blood.

Genitourinary: Genitourinary: no incontinence, hematuria, difficulty urinating, or increased frequency.

Musculoskeletal: Musculoskeletal: no muscle aches or weakness and no arthralgias/joint pain, back pain, or swelling in the extremities.

Skin: Skin: no jaundice, rashes, or abnormal mole.

Neurologic: Neurologic: no weakness, numbness, seizures, dizziness, headaches, or loss of consciousness.

Psych: Psych: no depression, sleep disturbances, or alcohol abuse and feeling safe in relationship.

Endocrine: Endocrine: no fatigue.

Hematologic/Lymphatic: Hematologic/Lymphatic no bruising or swollen glands.

Allergy/Immunologic: Allergy/Immunologic: no itching, hives, runny nose, sinus pressure, or frequent sneezing.

essment / Plan

but returns for evaluation of his ankle. He reports no issues. He has no limitations as far as ankle though his back is been bothering him substantially incites only thing really keeping him down but he feels comfortable walking on uneven grounds and doing even impacts on his ankle his back allows.

Physical examination: Incision completely healed. No swelling. Full range motion equal bilaterally. Strength 5 out of 5 for lower muscle groups and equal bilaterally. Sensation intact light touch aspect of the foot except for directly over the incision. Palpable DP and PT pulse and cap refill less than 3 seconds.

Assessment plan: Status post excision nonunion repair lateral ligaments left ankle. Doing very well. May resume all activities as tolerated and ankle and point of his back is likely limiting factor at this point. Certainly encouraged to call or return if she has any questions or issues.

Fracture of lateral malleolus

S82.62XX: Displaced fracture of lateral malleolus of left fibula, subsequent encounter for closed fracture with nonunion

ANKLE FRACTURE: REHAB EXERCISES

BROKEN ANKLE: CARE INSTRUCTIONS

Return to Office

One recorded.

counter Sign-Off

counter not closed.

Seth P. Kupferman, MD
Orthopaedic Surgery
Sports Medicine

James D. Dalton, Jr., MD
Orthopaedic Surgery
Sports Medicine



Jon P. Davies, MD
Orthopaedic Surgery
Hand Surgery

John T. Hulvey, Jr., MD
Primary Care
Sports Medicine

George Pappas, MD, PhD
Orthopaedic Surgery
Sports Medicine

Christopher J. Kestner, MD
Orthopaedic Surgery
Foot & Ankle Surgery

Todd J. Lansford, MD
Orthopaedic Surgery
Spine Surgery

Daniel A. Wainbee, MD
Orthopaedic Surgery
Hand Surgery

Dustin S. Hambricht, MD
Orthopaedic Surgery
Adult Hip and Knee Reconstruction

Michael R. Byers, PA-C
Licensed Physician Assistant
Certified Athletic Trainer

Sarah J. Burkhardt, PA-C
Licensed Physician Assistant
Certified Athletic Trainer

Lamar C. Hood, PA-C
Licensed Physician Assistant

Brett R. Herman, PA-C
Licensed Physician Assistant

Lauren L. Jones, OTR/L
Occupational Therapist
Hand Therapist

Rachael J. Evans, OTR/L
Occupational Therapist
Hand Therapist

9100 Medcom St • North Charleston, SC 29406-9167 • Phone: (843) 572-2663 • Fax (843) 764-3577

Return to Work / School

Patient: Misuraca, Paul L

DOB: [REDACTED]

Address: [REDACTED]
[REDACTED]

Date: 02/08/2019

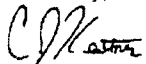
Patient ID: [REDACTED]

Note to Patient:

__x__ Was Seen in my office on: 02/08/2019

Cleared for full duty from foot/ankle stand point. Defer to limitations regarding back injury restrictions.

Sincerely,

 Christopher Kestner

Electronically Signed by: CHRIS J KESTNER, MD

www.scsportsmedicine.com

MISURACA, PAUL L

Admin Documents

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



Physician's Statement

Phone Sandra Carr NLM
 843 637 5265
 FAX to 800 782-8593

Claimant's Name: Paul L. MisuracaEmployer's Name: Charleston County

Physician's Name: _____

Insurance Carrier: Ariel Third Party Administrators

Practice/Clinic: _____

SCWCC File No: SC CLAIM

Preparer's Name: _____

Phone: _____

The undersigned physician has been authorized to evaluate or treat this Claimant for his or her work injury or illness pursuant to South Carolina Code Sections 42-15-60, 42-15-80, 42-1-172, or 42-11-10.

Date of injury: _____

Date of first office visit: 8/1/17Date of last office visit: 2/8/19

The medical opinions below are stated to a reasonable degree of medical certainty.

Diagnosis or nature of injury or illness: _____

Body part(s) injured: left ankle

Body part(s) affected: _____

Date of maximum medical improvement: _____

Has the Claimant sustained **permanent physical impairment** as a result of the work injury? ☒ Yes ☐ NoIf so, the permanent physical impairment is: 2 % medical impairment to the whole person (Injured body part).

If there is a permanent physical impairment to other body part(s) as a result of the work injury, please indicate below:

% medical impairment to the _____

(additional body part injured or affected).

The impairment rating(s) above are based upon the following:

☒ The AMA's *Guides to the Evaluation of Permanent Impairment* 6th Edition; or
☐ Other medical treatise: _____
☐ Other: _____

MISURACA, PAUL L



* 3348317w1516 Single Page Admin

Does the Claimant have **permanent physical limitations** as a result of the injury? ☐ Yes ☒ No

If so, the permanent physical limitations are: _____

Does the Claimant **possess retained hardware** as a result of the injury? ☒ Yes ☐ No

If so, the retained hardware is: _____

Is there **medical, surgical, hospital or other treatment** that the Claimant needs as a result of the injury for an additional time that will tend to lessen the period of disability or maintain the current level of function: ☒ Yes ☐ No

If so, the medical care and treatment that is needed is/are:

occasional physical therapy, anti-inflammatory medications, periods of rest if symptoms
 *An indication or statement that future medical care "may be necessary" or "might be necessary" is not sufficient and will require further clarification. Excluded

I certify that I am a physician or other licensed healthcare provider, I have personally read and prepared this document, and the opinions reflected above are mine.

Treating or Evaluating Physician

Date

WCC Form # 14B
12/2016

14B

Physician's Statement

MISURACA, PAUL L

Admin Documents

04/30/2019 TUE 14:31 FAX

001/007

WILLSON JONES CARTER & BAXLEY, P.A.

ATTORNEYS AT LAW

GREENVILLE CHARLESTON COLUMBIA CHARLOTTE RALEIGH ATLANTA MYRTLE BEACH

William H. Lyon
Direct (843) 784-1084
Fax (843) 784-1081
wlyon@wjcbaw.com

431 Wando Park Boulevard
Suite 100
Mount Pleasant, SC 29464
www.wjcbaw.com

May 1, 2019

Via Fax (843-764-3577)

Dr. Christopher Kestner
SC Sports Medicine & Orthopaedic Center
9100 Medical Plaza Drive
North Charleston, SC 29406

Re: Paul Misuraca vs. Charleston County
WCC File No.: 1701642 DOI: 2/16/2017
Carrier: SC Association of Counties SIF - Claim No.: 2017-SCAC-068413
WJC&B File No.: 0560.00877

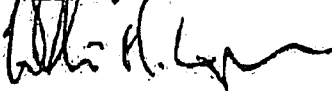
Dear Dr. Kestner:

My office represents Charleston County in regard to the above-referenced workers' compensation claim filed by Mr. Paul Misuraca. I am in receipt of your narrative report dated February 8, 2019 as well as the Form 14B completed on March 30, 2019. Enclosed is a copy of the notes as well as a short questionnaire that will help clarify the impairment rating and future treatment needs for the parties. I would greatly appreciate you completing the questionnaire and returning to my office. Please include an invoice so that payment can be issued for your time in completing the questionnaire.

Should you have any questions, please do not hesitate to contact me.

With kindest regards,

WILLSON JONES CARTER & BAXLEY, P.A.



William H. Lyon

WHL/whl

Enclosure(s)

cc (w/ encl.): Mr. David T. Pearlman (via Fax)
Mr. John Snelling (via e-mail)



MISURACA, PAUL L

04/30/2019 TUE 14:31 FAX

002/007

Name: Paul Misuraca

DOB: [REDACTED]

SSN: [REDACTED]

WCC File No.: 1701642

- 1) Did Paul Misuraca reach maximum medical improvement in regard to his work-related left ankle injury on February 8, 2019?

☒ Yes ☐ No

- 2) On the Form 14B dated March 30, 2019, you assigned a 2% whole person impairment. Does the 2% whole person impairment equate to a 2% impairment of the left leg?

☐ Yes ☒ No

- 3) If no, what impairment would impairment rating would you assign to the left leg?

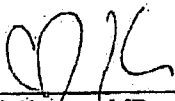
5 % Impairment to left leg.

- 4) The Form 14B lists occasional physical therapy, anti-inflammatory medications, and periods of rest if symptoms exacerbate as future medical treatment. Would Mr. Misuraca only require occasional therapy and anti-inflammatory medications if he sustained a physical change of condition for the worse or new injury to his left ankle?

☒ Yes ☐ No

- 5) Are the above opinions stated to a reasonable degree of medical certainty?

☒ Yes ☐ No


Chris J. Kestner, MD

5/18/19
Dated

Office of the Sheriff



County of Charleston

Sheriff J. Al Cannon, Jr.

Memorandum

To: Sheriff J. Al Cannon, Jr. Esq.

From: Master Deputy Paul L. Misuraca

Through: Sgt. C. Covington, Lt. W. Van Horn, Major L. Burnsed, Chief Deputy P. Garrison
and Assistant Sheriff M. Lucas

Date: 02/19/2019

Subject: Resignation

I submit my formal resignation from the Charleston County Sheriff's Office effective as of February 19, 2019.

I thank you for all the great opportunities you have given me as a Charleston County Sheriff's Deputy. I have enjoyed working with my colleagues for the past thirty-four years and I will miss the work of serving our community.

It is also my understanding that in the past retiring deputies have been allowed to keep their duty sidearm upon full retirement. If so, I would like to make that request. My sidearm information is as follows; Glock 22Gen4, 40 cal. [REDACTED]

I have always been proud to have worked for you and the Sheriff's Office and thank you for having provided me that opportunity.

Administrative Office

3691 Leeds Avenue
N. Charleston, SC 29405
~ Sheriff ~
Voice (843) 554-2230
Fax (843) 554-2243

Law Enforcement Division

3691 Leeds Avenue
N. Charleston, SC 29405
~ Patrol ~
Voice (843) 202-1700
Fax (843) 554-2234

Al Cannon Detention Center

3841 Leeds Avenue
N. Charleston, SC 29405
Voice (843) 529-7300
Fax (843) 529-7406

Judicial Center

100 Broad Street, Suite 381
Charleston, SC 29401
Voice (843) 958-2100
Fax (843) 958-2128

Accident/Injury Report

1. NAME OF EMPLOYEE: Paul L. Misuraca DATE OF BIRTH: [REDACTED]
2. ADDRESS: [REDACTED]
3. PHONE NO: [REDACTED] SOCIAL SECURITY NO: [REDACTED]
4. MARITAL STATUS: Married SUPERVISOR'S NAME: S/Sgt. M. Ringley
5. TIME EMPLOYEE BEGAN WORK: 0800 AM/PM AM
6. WHERE DID ACCIDENT OCCUR? 100 Broad Street, 2-B, Charleston, SC 20401
7. DATE OF ACCIDENT: 2/16/2017 DAY OF WEEK: Thurs TIME: 1106
8. DATE THE SUPERVISOR WAS NOTIFIED: 2/16/2017

9. WHAT WAS EMPLOYEE DOING AT THE TIME OF THE ACCIDENT? Describe in complete detail.

Courtroom security detail with M/Deputy C. Hampton when a subject became disorderly in the gallery. He was attempting to restrain a disorderly subject in courtroom 2-B with Deputy C. Hampton when he hit his left ankle on the prosecutor's desk leg causing minor pain, a contusion and swelling.

10. HOW DID THE ACCIDENT OCCUR? Describe in complete detail. The injury occurred while Deputy Misuraca's ankle hit the leg of the prosecution table while assisting Deputy Hampton take the suspect to the ground for arrest.

11. HOW COULD THE ACCIDENT HAVE BEEN PREVENTED? No way to prevent this type of accident/injury. He was wearing his sheriff's office issued uniform and equipment.

12. WAS SAFETY DEVICE ISSUED AND IN USE? YES ☐ NO ☒ (If no, explain in detail.)
None available for this call.

13. NAMES AND ADDRESSES OF WITNESSES: Judge D. Martin, Dep. C. Hampton, Dep. G. DeCocker
[REDACTED]

14. DESCRIBE IN DETAIL THE NATURE OF THE INJURY AND THE PART OF THE BODY AFFECTED:
Left ankle (sore) with a possible sprain and contusion confirmed by CCOH Medical Staff.

15. NAME OF ROPER HOSPITAL PHYSICIAN: CCOH-Colleen Boyd, PA
16. ADDRESS OF ROPER HOSPITAL: 4600 Goor Dr 205, North Charleston, SC 29406
17. HAS EMPLOYEE RETURNED TO WORK? YES ☐ NO ☒ DATE RETURNED 2/16/2017
- NUMBER OF WORK DAYS MISSED: 0

18. DATE OF REPORT: 2/16/2017 PREPARED BY/TITLE: S/Sgt. M. Ringley, 17-003035

MRP

Charleston County Accident Investigation Form

Entity: Charleston County		Department: Sheriff's Office-Operations-Sp. Ops	
Location: 100 Broad St 2-B Charleston, SC 29406		Date: 02-16-17	Time 1106
Date Reported: 02-16-17			
Name: Misuraca-Paul L.		DOB: [REDACTED]	Address: [REDACTED]
Phone: [REDACTED]	SSN: [REDACTED]	Marital Status: Married ☒ Single ☐ Divorced ☐ Widowed ☐	
Supervisor: S/Sgt. M. Ringley		Began Work at: 8 a.m.	Date / Time Supervisor Notified: 02-16-17 1109
Safety Device issued and in use: None If not explain in Description.		Body part / Area injured: Left Ankle-Contusion	
Describe Clearly How The Incident Occurred: (Daily Courtroom Security 2-B)		OCA: 2017-003035B	
Master Deputy Paul L. Misuraca and Chris Hampton were assigned to Family Court, Courtroom 2-B when a suspect (Young, Anthony, B/M, 20 y.o.a.) became irate and disorderly over a family court ruling. When the subject left cursing and then was returned per the judge became disorderly again. At this point Deputy Hampton and Dep. Misuraca took the suspect to the ground and on the way down Misuraca struck his left ankle on the prosecutor's desk leg. The subject was detained and transported to the JAC detention center. A report was filed by Dep. Hampton and wrote a report OCA 2017-003035. M/Dep. Misuraca was seen at CCOH for a contusion to the left ankle with some swelling. He also went to Low Country Drug Screen per policy for drug screen due to his injury.			
Witnesses:		Telephone:	
Judge D. Martin, C. Hampton, G. DeCocker		[REDACTED]	
100 Broad Street, Charleston, SC 29401			
If employee was injured in a motor vehicle accident please complete the attached motor vehicle supplement			
Prevention			

How could this have been Prevented? There is no way to prevent or predict this type of incident in law enforcement work.

DESCRIPTION

What actions have been or will be taken to remove direct causes
all items in sequence

By whom:

When

Direct Causes

Basic Causes

Unsafe Acts

Unsafe Conditions

Work System

☐ Lack of skill or knowledge

☐ Inadequate guards or protection

☐ Inadequate hiring / placement practices

☐ Failure to follow operating or maintenance procedure / method

☐ Defective tool, equipment, machine or vehicle

☐ Inadequate enforcement of work rules, procedures

☐ Failure to use guards Provided

☐ Congested work area / roadway

☐ Inadequate job instruction / training

☐ Failure to use personal protective equipment

☐ Unsafe floors, ramps, stairways, platforms

☐ Inadequate safety procedures

☐ Making safety devices inoperable

☐ Poor housekeeping

☐ Inadequate preventive maintenance

☐ Operating vehicle, equipment or machine at unsafe speed or manner

☐ Hazardous atmosphere: gases, dust, fumes, vapors

☐ Inadequate environmental control program

☐ Using known defective equipment

☐ Hazardous chemical / substances

☐ Inadequate job planning methods

☐ Operating without authority

☐ Inadequate warning system

☐ Improper layout or design of work area

☐ Improper lifting, lowering or carrying technique

☐ Fire or explosion hazards

☐ Unsafe design or construction of tools, equipment or machine

☐ Unsafe lifting, lowering or placing

☐ Improper material storage

☐ Inadequate medical monitoring

☐ Taking unsafe position

☐ Inadequate ventilation

☐ Inadequate supervision

☐ Influence of alcohol or drugs

☐ Excessive noise

☐ Other

☐ Physical or mental limitations

☐ Inadequate illumination

☐ Unaware of hazards

☐ Radiation exposure

INDIVIDUAL

[illegible]

Treatment			
Location of Treatment: CCOH		Address: 4600 Goer Drive, 205 N. Chas., SC 29406	
Has employee returned to work: Yes ☒ No ☐		Date Returned: 2-16-17	Number of Lost Days: 0

WILLSON JONES CARTER & BAXLEY, P.A.

ATTORNEYS AT LAW

GREENVILLE

CHARLESTON

COLUMBIA

CHARLOTTE

RALEIGH

ATLANTA

MYRTLE BEACH

William H. Lyon
Direct (843) 284-1084
Fax (843) 284-1081
whlyon@wjlaw.net

421 Wando Park Boulevard
Suite 100
Mount Pleasant, SC 29464
www.wjclaw.com

February 12, 2019

Via E-mail

David T. Pearlman, Esquire
The Steinberg Law Firm, L.L.P.
P. O. Box 9
Charleston, SC 29402-0009

Re: Paul Misuraca vs. Charleston County
WCC File No.: 1701642 DOI: 2/16/2017
Carrier: SC Association of Counties SIF - Claim No.: 2017-SCAC-068413
WJC&B File No.: 0560.00877

Dear David:

Please find enclosed a Form 17 indicating claimant was capable of returning to work on February 9, 2019. Please have your client sign the Form 17 and return it to me at your earliest convenience. If you have any questions, please do not hesitate to contact me.

With kindest regards,

WILLSON JONES CARTER & BAXLEY, P.A.

William H. Lyon

William H. Lyon

WHL/whl

Enclosure

cc (w/encl.): Mr. John Snelling (via e-mail)



Claimant's Name: Paul Misuraca Employer's Name: Charleston County
Address: [REDACTED] Address: 4045 Bridge View Drive Suite B 332
City: [REDACTED] State: [REDACTED] City: North Charleston State: SC Zip: 29405
Home Phone: [REDACTED] Insurance Carrier: SCAC
Preparer's Name: John Snelling Law Firm: [REDACTED] Preparer's Phone #: [REDACTED]

Date of injury: 2/16/2017 (m/d/yyyy)

1. Temporary Compensation Paid:

Number of Weeks	From	To	Amount
<u>104</u>	<u>2/17/2017</u>	<u>2/14/2019</u>	<u>\$ 79,339.52</u>
<u> </u>	<u> </u>	<u> </u>	<u>\$ </u>
<u> </u>	<u> </u>	<u> </u>	<u>\$ </u>
<u> </u>	<u> </u>	<u> </u>	<u>\$ </u>
<u> </u>	<u> </u>	<u> </u>	<u>\$ </u>

2. The claimant returned to work on ☐ With restrictions but at a salary not less than before the injury.
(m/d/yyyy) ☒ Without restrictions.

3. The claimant agrees he or she was able to return to work on 2/9/2019
(m/d/yyyy)

I agree that I was disabled for the period(s) indicated and I was paid compensation as shown above. **I UNDERSTAND THAT MY WEEKLY TEMPORARY COMPENSATION CHECKS WILL STOP; HOWEVER, I GIVE UP NO RIGHTS TO COMPENSATION FOR FUTURE DISABILITY, FOR PERMANENT DISABILITY, DISFIGUREMENT OR MEDICAL CARE.** The effect of this form has been fully explained to me, and I have received a copy of it. I understand that I should not sign this form until 15 days after I have returned to work or agree I was able to return to work.

Claimant's Signature

Employer's Representative Signature

(Check one) ☐ Witness ☐ Claimant's Attorney

Date Agreement Signed

File this form with the Claims Department no later than 31 days from the date the claimant returned to work to terminate temporary compensation after the first 150 days after employer's notice of the injury according to R.67-505. Within the 150 period, obtain Form 17 to document that claimant agrees he or she is able to return to work.

DAVID T. PEARLMAN
J. KEVIN HOLMES
THOMAS M. WHITE
MALCOLM M. CROSLAND, JR.
STEVEN E. GOLDBERG
MICHAEL J. JORDAN
BENJAMIN W. AKERY



CATHERINE D. MEEHAN
KELLY M. ALFREDS
CHARLES S. GOLDBERG, LLC, OF
COUNSEL
HUGO M. SPITZ (1927-2018)
IRVING STEINBERG (1902-1980)

61 Broad Street | P.O. Box 9 | Charleston | SC | 29401 | (843) 720-2800 | (843) 722-1190 fax | steinberglawfirm.com

June 27, 2018

William H. Lyon, Esquire
Willson Jones Carter & Baxley, PA
421 Wando Park Blvd., Suite 100
Mt. Pleasant, SC 29464

Re: Claimant: Paul Misuraca
Employer: Charleston County Sheriff Dept
WCC No.: 1701642 (DOI: February 16, 2017)

Dear Will:

Mr. Misuraca has continued severe pain. He has complained that there is a screw (as seen in x-rays) that is pressing against the bone in his ankle, and this is causing him unbearable pain. He needs to return to the doctor for further treatment.

Mr. Misuraca has requested that Dr. Corey send him for a second opinion due to the fact he cannot fully bare weight on his right foot without walking on his heel, and that he is still actively using the scooter that has been authorized.

Please provide authorization for a second opinion, as soon as possible for Mr. Misuraca, so he is able to treat with another doctor for his ongoing pain and discomfort.

Please advise how we shall proceed with getting Mr. Misuraca the treatment he is in need of receiving.

With kindest regards, I am

Sincerely,

David T. Pearlman
Email: dpearlman@steinberglawfirm.com
Direct Fax: (843) 579-9939

DTP/ath
Enclosures

cc: Paul Misuraca (w/encls.)
Francis J. Cornely, Esquire (w/encls.)

NORTH AREA | 118 Goose Creek Boulevard South | P.O. Box 1928 | Goose Creek | SC | 29445 | 843.572.0700 | 843.572.1871 fax
SUMMERVILLE | 108 Grandview Drive | Suite A | P.O. Box 2670 | Summerville | SC | 29484 | 843.871.6522 | 843.871.8565 fax

DAVID T. PEARLMAN
J. KEVIN HOLMES
THOMAS M. WHITE
MALCOLM M. CROSLAND, JR.
STEVEN E. GOLDBERG
MICHAEL J. JORDAN
BENJAMIN W. AKERY



CATHERINE D. MEEHAN
KELLY M. ALFREDS
F. ELLIOTTE QUINN, IV
TAYLOR L. GROOMS
CHARLES S. GOLDBERG (1933-2019)
HUGO M. SPITZ (1927-2018)
IRVING STEINBERG (1902-1980)

61 Broad Street | P.O. Box 9 | Charleston | SC | 29401 | (813) 720-2800 | (813) 722-1190 fax | steinberglawfirm.com

June 14, 2019

VIA ECASE

The Honorable Avery B. Wilkerson, Jr.
Commissioner
S.C. Workers' Compensation Commission
P.O. Box 1715
Columbia, SC 29202-1715

Re: Claimant: Paul Misuraca
Employer: Charleston County Sheriff Dept
WCC No.: 1701642 (DOI: February 16, 2017)

Dear Commissioner Wilkerson:

I am pleased to enclose herewith the Pre-Hearing Brief and Notice of Witnesses and Written Report(s)/Physician or Other Evidence To Be Introduced on Behalf of the Claimant.

By copy of this letter to William H. Lyon, Esquire, attorney for the Defendants, I am providing them with a copy of the same as required by the Rules and Regulations of the Commission, together with copies of the submissions under the Administrative Procedures Act.

I look forward to appearing before you.

With kindest regards, I am

Sincerely,

David T. Pearlman by com

David T. Pearlman
Email: dpearlman@steinberglawfirm.com
Direct Fax: (843) 579-9939

DTP/am
Enclosures

cc: Paul Misuraca (w/ encl.)
William H. Lyon, Esquire (via Email and First Class Mail)
Francis J. Cornely, Esquire (w/encl.)

NORTH AREA | 118 Goose Creek Boulevard South | P.O. Box 1028 | Goose Creek | SC | 29445 | 843.572.0700 | 843.572.1871 fax
SUMMERVILLE | 108 Grandview Drive | Suite A | P.O. Box 2670 | Summerville | SC | 29484 | 843.871.6522 | 843.871.8565 fax



PRE-HEARING BRIEF
WCC File No: 1701642

Claimant's Name: Paul Misuraca Employer's Name: Charleston County Sheriff Dept
Address: [REDACTED] Address: 3505 Pinehave Dr.
City: [REDACTED] State: [REDACTED] City: N. Charleston State: SC Zip: 29405
Home Phone: [REDACTED] Work Phone: [REDACTED] Carrier: [REDACTED]
Preparer's Name: David T. Pearlman Preparer's Phone #: (843) 720-2800

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

☒ Injury ☐ Illness ☐ Repetitive Trauma

1. Compensation Rate: \$762.88 2. AWW: \$1144.26 Date of Injury: February 16, 2017
3. Type of injury and body part(s): left leg (fracture; requiring multiple surgeries); aggravation to back; depression
4. Facts in controversy: See attached addendum.
5. Legal issues involved: (1) Nature and extent of injury - § 42-1-160; All consequences of an injury are compensable; Mullinax v. Winn Dixie Stores, 318 S.C. 431, 458 S.E.2d 76 (Ct. App. 1995); Whitfield v. Daniel Constr., 226 S.C. 37, 83 S.E.2d 460 (1954) (2) Present and ongoing medical treatment - § 42-15-60; Dodge v. Brucoli, Clark, Layman, Inc., 334 S.C. 574, 514 S.E.2d 593 (Ct. App. 1999). (3) Entitlement to temporary compensation - § 42-9-10. (4) Permanent or partial disability to left leg, back, - § 42-9-30; and/or wage loss § 42-9-10, 42-9-20.
6. Unusual aspects: The Claimant requests the record be left open to submit additional medical records/opinions from Dr. Nina W. Sarver, Kristina Reich, N.P. and Jessica Schwartzkopf, MA LPC pursuant to Morgan v. JPS Auto., 321 S.C. 201, 467 S.E.2d 457 (Ct. App. 1996).
7. Witnesses (designate if expert): * Claimant, Tonya Misuraca and any and all witnesses listed by the Defendant.
8. Exhibits: Personnel records, Pictures.
9. Medical evidence (indicate report pursuant to R.67-612; deposition or appearance): See attached Notice of Witnesses and Written Medical Reports to be Introduced as Direct Evidence on Behalf of the Claimant.
10. Name, address, and specialty, if any, of the treating physician: Dr. William Corey, Lowcountry Orthopaedics & Sports Medicine, 2880 Tricom St. Charleston, SC, 29406; Dr. Christopher Kestner, SC Sports Medicine, 9100 Medcom Street, N. Charleston, SC, 29406; Dr. Bright McConnell, Charleston Sports Medicine, 900 Island Park Drive Ste. 105, Charleston, SC 29492
11. Impairment rating(s); body part(s); physician and date of opinion: 5% to whole person, Dr. Christopher Kestner, 3/30/19; 10% left lower extremity, 4% whole person, Dr. Bright McConnell, 6/3/19.
12. I am amending my Form 50/51 in the following manner: include the back and depression as affected body parts.

☐ **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.

Signature: [Signature]

Email: dpearlman@steinberglawfirm.com

Date of hearing: June 24, 2019

Time needed for hearing: 45 mins.

On behalf of ☒ Claimant ☐ Employer

Questions about the use of this form should be directed to the Jurisdictional Commissioner. Refer to Regulations 67-204 through 67-211 and Regulations 67-601 through 67-615; as well as Regulation 67-1801. File this form and proof of service on the opposing party according to R.67-611 and R.67-212. Do not send medical reports. * Commissioners reserve the right to admit expert witnesses at hearings.

Addendum

Facts in Controversy:

Paul Misuraca is sixty (60) years old. Mr. Misuraca served in the United States Army for six (6) years before being honorably discharged and went on to serve as a reservist for sixteen (16) years. Mr. Misuraca was hired by the Charleston County Sheriff's office in 1984 and was employed for thirty-five (35) years, earning the rank of Master Deputy. Mr. Misuraca provided courtroom security and was known as a reliable, professional and respected deputy. On February 16, 2017, Mr. Misuraca fell while attempting to restrain a defendant and injured his left leg/ankle.

Mr. Misuraca presented to the Carolina Center for Occupational Health (CCOH) on February 16, 2017 with a contusion to the left ankle. On February 28, 2017, Mr. Misuraca was referred to Lowcountry Orthopaedics with a diagnosis of fracture to the left distal fibula and contusion to the left ankle.

On March 3, 2017, Mr. Misuraca presented to Dr. William Corey. Dr. Corey noted that Mr. Misuraca was experiencing pain and swelling of the ankle, back pain, depression and sleep disturbances. Dr. Corey ordered Mr. Misuraca off work.

On April 18, 2017, Dr. Corey noted that Mr. Misuraca was having continued pain to the left ankle and reported worsening symptoms of depression. On April 28, 2017, Dr. Corey met with Mr. Misuraca due to worsening left ankle pain. Dr. Corey maintained the treatment plan of physical therapy and weight bearing in CAM walker.

On May 30, 2017, Dr. Corey noted that the fracture was still healing and that Mr. Misuraca was unable to transition off of crutches due to continued pain. Dr. Corey ordered sedentary work restrictions.

On July 14, 2017, Dr. Corey ordered a CT scan of the left ankle after Mr. Misuraca reported continued pain after five (5) months post-injury. The CT was conducted on July 18, 2017 and showed delayed healing of the fracture. On August 4, 2017, Dr. Corey noted that Mr. Misuraca would require a ORIF of the nonunion with possible bone grafting. On November 11, 2017, Dr. Corey performed surgery (first surgery) that consisted of a "bone graft to the nonunion site and the placement of two (2) lag screws from the anterior to the posterior". In follow up appointments to the November 11, 2017 surgery, Mr. Misuraca continued to report significant pain.

An Ankle Progress Evaluation, conducted on March 5, 2018 by Island P.T. noted that Mr. Misuraca was still having significant pain with any weight bearing activity.

On April 13, 2018, Dr. Corey ordered a second CT scan. On May 7, 2018, Dr. Corey noted the CT scan showed "mild tendinosis of both the PL and PB with possible short segment split near the calcaneal tubercle". Dr. Corey ordered sedentary work restrictions. At this appointment, Dr. Corey approved a second opinion.

Mr. Misuraca presented to Dr. Christopher Kestner on August 1, 2018. Dr. Kestner noted that the pain seemed to be coming mostly from the distal repair site. Dr. Kestner also noted a severe

decrease in strength and loss of balance. Dr. Kestner recommended removal of hardware and a possible excision of the distal fibular fragment. On September 27, 2018, Dr. Kestner performed surgery (second surgery) to remove hardware, an excise of the nonunion and repair lateral ligaments. Mr. Misuraca continued to treat with Dr. Kestner. On February 8, 2019, Dr. Kestner noted that Mr. Misuraca's back was continuing to bother him.

On March 30, 2019, Dr. Kestner completed a WCC Form 14B (Physician's Statement). Dr. Kestner rated Mr. Misuraca with a permanent physical impairment of two (2) percent to the whole person. Dr. Kestner noted that Mr. Misuraca would need continued medical care that included occasional physical therapy, anti-inflammatory medication and periods of rest if symptoms exacerbate.

On June 3, 2019, Mr. Misuraca presented to Dr. Bright McConnell for an Independent Medical Evaluation (IME). Dr. McConnell noted that calf atrophy was present within the moderate category. Dr. McConnell rated Mr. Misuraca with a ten (10) percent impairment to the left lower extremity, which is equivalent of a four (4) percent whole person impairment. Dr. McConnell recommended that ongoing medical treatment should include attention for maintenance of progressive strength and balance.

Mr. Misuraca has permanent scarring from multiple surgeries and continued pain in his ankle and back. These injuries have also aggravated depression and related symptoms for Mr. Misuraca. Mr. Misuraca is not at MMI and continues to need ongoing medical treatment for his injury.

DAVID T. PEARLMAN
J. KEVIN HOLMES
THOMAS M. WHITE
MALCOLM M. CROSLAND, JR.
STEVEN E. GOLDBERG
MICHAEL J. JORDAN
BENJAMIN W. AKERY



CATHERINE D. MEEHAN
KELLY M. ALFREDS
F. ELLIOTTE QUINN, IV
TAYLOR L. GROOMS
CHARLES S. GOLDBERG (1933-2019)
HUGO M. SPITZ (1927-2018)
IRVING STEINBERG (1902-1980)

61 Broad Street | P.O. Box 9 | Charleston | SC | 29401 | (843) 720-2800 | (843) 722-1190 fax | steinberglawfirm.com

July 15, 2019

VIA ECASE

The Honorable Avery B. Wilkerson, Jr.
Commissioner
S.C. Workers' Compensation Commission
P.O. Box 1715
Columbia, SC 29202-1715

Re: Claimant: Paul Misuraca
Employer: Charleston County Sheriff Dept
WCC No.: 1701642 (DOI: February 16, 2017)

Dear Commissioner Wilkerson :

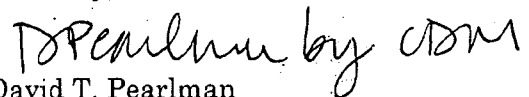
I am pleased to enclose herewith the Pre-Hearing Brief and Notice of Witnesses and Written Report(s)/Physician or Other Evidence To Be Introduced on Behalf of the Claimant.

By copy of this letter to William H. Lyon, Esquire, attorney for the Defendants, I am providing them with a copy of the same as required by the Rules and Regulations of the Commission, together with copies of the submissions under the Administrative Procedures Act.

I look forward to appearing before you.

With kindest regards, I am

Sincerely,


David T. Pearlman
Email: dpearlman@steinberglawfirm.com

DTP/am

Enclosures

cc: Paul Misuraca (w/encl.)
Catherine D. Meehan, Esquire (w/encl.)
William H. Lyon, Esquire (w/encl. via E-mail and First Class Mail)
Francis J. Cornely, Esquire (w/encl.)

NORTH AREA | 118 Goose Creek Boulevard South | P.O. Box 1028 | Goose Creek | SC | 29445 | 843.572.0700 | 843.572.1871 fax
SUMMERVILLE | 103 Grandview Drive | Suite A | P.O. Box 2670 | Summerville | SC | 29484 | 843.871.6522 | 843.871.8565 fax



PRE-HEARING BRIEF
WCC File No: 1701642

Claimant's Name: Paul Misuraca Employer's Name: Charleston County Sheriff Dept
Address: [REDACTED] Address: 3505 Pinehave Dr.
City: [REDACTED] State: [REDACTED] City: N. Charleston State: SC Zip: 29405
Home Phone: [REDACTED] Work Phone: [REDACTED] Carrier: [REDACTED]
Preparer's Name: David T. Pearlman Preparer's Phone #: (843) 720-2800

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

☒ Injury ☐ Illness ☐ Repetitive Trauma

1. Compensation Rate: \$762.88 2. AWW: \$1144.26 Date of Injury: February 16, 2017
3. Type of injury and body part(s): left leg (fracture; requiring multiple surgeries); aggravation to back; depression
4. Facts in controversy: See attached addendum.
5. Legal issues involved: (1) Nature and extent of injury - § 42-1-160: All consequences of an injury are compensable; Mullinax v. Winn Dixie Stores, 318 S.C. 431, 458 S.E.2d 76 (Ct. App. 1995); Whitfield v. Daniel Constr., 226 S.C. 37, 83 S.E.2d 460 (1954) (Present and ongoing medical treatment - § 42-15-60; Dodge v. Brucoli, Clark, Layman, Inc., 334 S.C. 574, 514 S.E.2d 593 (Ct. App. 1999). (3) Entitlement to temporary compensation - § 42-9-10. (4) Permanent partial disability to left leg, back, - § 42-9-30; and/ wage loss § 42-9-10, 42-9-20.
6. Unusual aspects: The Claimant requests the record be left open to submit additional medical records/opinions pursuant to Morgan v. JPS Auto., 321 S.C. 201, 467 S.E.2d 457 (Ct. App. 1996).
7. Witnesses (designate if expert): * Claimant, Tonya Misuraca and any and all witnesses listed by the Defendant.
8. Exhibits: Personnel records, Pictures and Vocational Evaluation.
9. Medical evidence (Indicate report pursuant to R.67-612; deposition or appearance): See attached Notice of Witnesses and Written Medical Reports to be Introduced as Direct Evidence on Behalf of the Claimant.
10. Name, address, and specialty, if any, of the treating physician: Dr. William Corev, Lowcountry Orthopaedics & Sports Medicine, 2880 Trico St. Charleston, SC, 29406; Dr. Christopher Kestner, SC Sports Medicine, 9100 Medcom Street, N. Charleston, SC, 29406; Dr. Bright McConnell, Charleston Sports Medicine, 900 Island Park Drive Ste. 105, Charleston, SC 29492.
11. Impairment rating(s); body part(s); physician and date of opinion: 5% to the left leg, 2% to the whole person, Dr. Christopher Kestner, 3/30/19; 10% left lower extremity, 4% whole person, Dr. Bright McConnell, 6/3/19.
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☐ 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.

Signature: D Pearlman by ADM

Email: dpearlman@steinbergglawfirm.com

Date of hearing: July 25, 2019

Time needed for hearing: 45 mins.

On behalf of ☒ Claimant ☐ Employer

Questions about the use of this form should be directed to the Jurisdictional Commissioner. Refer to Regulations 67-204 through 67-211 and Regulations 67-601 through 67-615; as well as Regulation 67-1801. File this form and proof of service on the opposing party according to R.67-611 and R.67-212. Do not send medical reports. * Commissioners reserve the right to admit expert witnesses at hearings.

Addendum

Facts in Controversy:

Paul Misuraca is sixty (60) years old. Mr. Misuraca served in the United States Army for six (6) years before being honorably discharged and went on to serve as a reservist for sixteen (16) years. Mr. Misuraca was hired by the Charleston County Sheriff's office in 1984 and was employed for thirty-five (35) years, earning the rank of Master Deputy. Mr. Misuraca provided courtroom security and was known as a reliable, professional and respected deputy. On February 16, 2017, Mr. Misuraca fell while attempting to restrain a defendant and injured his left leg/ankle.

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On March 3, 2017, Mr. Misuraca presented to Dr. William Corey. Dr. Corey noted that Mr. Misuraca was experiencing pain and swelling of the ankle, back pain, depression and sleep disturbances. Dr. Corey ordered Mr. Misuraca off work.

On April 18, 2017, Dr. Corey noted: "Pt. reports increased pain, which has caused him to have multiple anxiety attacks and increased depression. He believes this whole situation is causing worsening of his depression." On April 28, 2017, Dr. Corey met with Mr. Misuraca due to worsening left ankle pain. Dr. Corey maintained the treatment plan of physical therapy and weight bearing in CAM walker.

On May 30, 2017, Dr. Corey noted that the fracture was still healing and that Mr. Misuraca was unable to transition off of crutches due to continued pain. Dr. Corey ordered sedentary work restrictions.

On July 14, 2017, Dr. Corey ordered a CT scan of the left ankle after Mr. Misuraca reported continued pain after five (5) months post-injury. The CT was conducted on July 18, 2017 and showed delayed healing of the fracture. On August 4, 2017, Dr. Corey noted that Mr. Misuraca would require a ORIF of the nonunion with possible bone grafting. On November 11, 2017, Dr. Corey performed surgery (first surgery) that consisted of a "bone graft to the nonunion site and the placement of two (2) lag screws from the anterior to the posterior". In follow up appointments to the November 11, 2017 surgery, Mr. Misuraca continued to report significant pain.

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On April 13, 2018, Dr. Corey ordered a second CT scan. On May 7, 2018, Dr. Corey noted the CT scan showed "mild tendinosis of both the PL and PB with possible short segment split near the calcaneal tubercle". Dr. Corey ordered sedentary work restrictions. At this appointment, Dr. Corey approved a second opinion.

On January 30, 2018, Mr. Misuraca presented to Dr. John Glaser, with concerns over worsening back and leg pain. Dr. Glaser noted acute on chronic low back and right leg burning pain. Dr. Glaser noted that previous treatment including injections, aquatic therapy, and land therapy had not helped Mr. Misuraca's back or leg pain.

On June 12, 2018, Mr. Misuraca presented to the Ralph H. Johnson VA Medical Center to be fitted for an LSO brace to help mitigate his lower back pain. It was noted that patient had to have the height of the handlebars of his knee scooter adjusted five (5) inches higher, after which some pain relief was felt.

On October 5, 2018, Mr. Misuraca presented to Kristina Reich, NP, and Mr. Misuraca's frustration and

declining moods in relation to his treatment for his foot surgery and possible back surgery was noted. On January 28, 2019, Kristina Reich, NP, and noted that Mr. Misuraca's health issues regarding his back, neck and migraines are major contributing factors to his depressed mood.

Mr. Misuraca presented to Dr. Christopher Kestner on August 1, 2018. Dr. Kestner noted that the pain seemed to be coming mostly from the distal repair site. Dr. Kestner also noted a severe decrease in strength and loss of balance. Dr. Kestner recommended removal of hardware and a possible excision of the distal fibular fragment. On September 27, 2018, Dr. Kestner performed surgery (second surgery) to remove hardware, an excise of the nonunion and repair lateral ligaments. Mr. Misuraca continued to treat with Dr. Kestner. On February 8, 2019, Dr. Kestner noted that Mr. Misuraca's back was continuing to bother him.

On March 30, 2019, Dr. Kestner completed a WCC Form 14B (Physician's Statement). Dr. Kestner assigned a two percent (2%) impairment rating to the whole person. Dr. Kestner clarified this rating equates to a five percent (5%) impairment to the left leg. Dr. Kestner noted that Mr. Misuraca would need continued medical care that included occasional physical therapy, anti-inflammatory medication and periods of rest if symptoms exacerbate. Dr. Kestner also noted that Mr. Misuraca has retained hardware as a result of the injury.

From November 15, 2018-February 28, 2019, Mr. Misuraca presented to Jessica Schwartzkopf, MA LPC, for counseling services. Ms. Schwartzkopf opined: "It is my opinion that Mr. Misuraca's Major Depressive Disorder was exacerbated following his on the job injury. It is recommended that the patient continue to receive psychiatric care to address his symptoms."

On February 19, 2019 Mr. Misuraca presented to Dr. Barry Weissglass. Dr. Weissglass opined:

While his ankle is much improved, he still has some stiffness and discomfort. This would impede his ability to run and responded in the case of an emergency situation.

Looking at this as a complete picture, to a medical certainty there is no way he will ever be able to perform the essential functions of his current job. There are no reasonable accommodations that would exist for this.

On June 3, 2019, Mr. Misuraca presented to Dr. Bright McConnell for an Independent Medical Evaluation (IME). Dr. McConnell noted that calf atrophy was present within the moderate category. Dr. McConnell rated Mr. Misuraca with a ten (10) percent impairment to the left lower extremity, which is equivalent of a four (4) percent whole person impairment. Dr. McConnell recommended that ongoing medical treatment should include attention for maintenance of progressive strength and balance.

Mr. Misuraca has permanent scarring from multiple surgeries and continued pain in his ankle and back. These injuries have also aggravated his depression and related symptoms. Mr. Misuraca is not at MMI and continues to need ongoing medical treatment for his injuries.

BEFORE THE
SOUTH CAROLINA WORKERS' COMPENSATION COMMISSION
WCC FILE NO.: 1701642

PAUL MISURACA, Employee,

Claimant,

vs.

CHARLESTON COUNTY SHERIFF
DEPT, Employer, and

SC ASSOCIATION OF COUNTIES
SIF, Carrier,

Defendants.

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

TO: SOUTH CAROLINA WORKERS' COMPENSATION COMMISSION, AND
WILLIAM H. LYON, ESQUIRE, ATTORNEY FOR THE DEFENDANTS

YOU ARE HEREBY NOTIFIED that the Claimant, pursuant to the
Regulations of the South Carolina Workers' Compensation Act and South Carolina
Code Section 1-23-330 (1976, as amended), herewith submits the following medical
reports as direct evidence on behalf of the Claimant, to wit:

APA #	PROVIDER	TYPE OF REPORT	DATED	NUMBER OF PAGES	PAGES
5	Dr. William Corey- Lowcountry Orthopaedics	Medical Records	4/18/17-5/7/18	54	62-116
6	Island P.T., LLC	Medical Records	3/5/18	2	117-118
7	Dr. Christopher Kestner- SC Sports Medicine & Orthopaedic Center	Medical Records	9/27/18-1/4/19	18	119-135
8	Dr. Bright McConnell, III- Charleston Sports Medicine	IME	6/3/19	5	136-140

9	Tri-County Radiology North Charleston	X-Rays	4/13/18	2	141-142
10	Ralph H. Johnson VA Medical Center	Medical Records	Various	36	143-174
11	Jessica Schwartzkopf, MA LPC-Coastal Mind & Body	Medical Records	6/19/2019	1	175
EXH #	PROVIDER	TYPE OF REPORT	DATED	NUMBER OF PAGES	PAGES
E	County of Charleston	Personnel Records	Various	18	176-195
F	Paul Misuraca	Pictures		3	196-198
G	Mr. David Price	Vocational Evaluation		To be submitted upon receipt.	

YOU ARE FURTHER HEREBY NOTIFIED that you have the right of cross-examination; and, should you desire to exercise said right, you are to forthwith schedule the depositions of any of the physicians, experts or others, whose reports are submitted, for the purposes of cross-examination.

YOU ARE FURTHER HEREBY NOTIFIED that the originals of the documents referred to herein, or photocopies of said originals received from said physicians, experts or others, will be forwarded to the South Carolina Workers' Compensation Commission, for insertion in the file of the South Carolina Workers' Compensation Commission and for inclusion as evidence in the record of this claim on behalf of the Employee-Claimant.

YOU ARE FURTHER NOTIFIED that the following witnesses may be called on behalf of the Claimant: The Claimant, Tonya Misuraca and any and all witnesses listed by the Defendant.

THE STEINBERG LAW FIRM, LLP
P.O. Box 9
Charleston, SC 29401
(843) 720-2800

By: DPearlman by CDM
David T. Pearlman
Attorney for the Claimant

July 15, 2019
Charleston, SC

CERTIFICATE OF SERVICE

I hereby certify that on July 15, 2019, I served the Defendant in the foregoing matter with a copy of the attached *WCC Form No. 58* and *Notice of Witnesses and Written Medical Reports to be introduced as Direct Evidence on Behalf of the Claimant* by mailing a copy of same via first class mail, postage pre-paid and addressed as follows:

Via E-Case
S.C. Workers' Compensation Commission
P.O. Box 1715
Columbia, SC 29202

Via E-mail and First Class Mail
William H. Lyon, Esquire
Willson Jones Carter & Baxley, PA
421 Wando Park Blvd., Suite 100
Mt. Pleasant, SC 29464
whlyon@wjlaw.net
ATTORNEY FOR DEFENDANTS

By: 
Allie Molinari
Legal Assistant to David T. Pearlman

MISURACA, PAUL

Clinical Encounter Summaries

Encounter Date: 05/07/2018

Patient

Name MISURACA, PAUL (59yo, M) ID# [REDACTED] Appt. Date/Time 05/07/2018 10:10AM

DOB [REDACTED]

Service Dept. LCO_Tricom

Provider WILLIAM S. COREY, MD

Insurance

Med Worker's Comp: ARIEL TPA

Policy/Group # [REDACTED]

Referring Provider Name: BOYD, COLLEEN

Employer Name: CHARLESTON COUNTY SHERIFFS OFFICE

Case # [REDACTED]

Case Injury Date: 02/16/2017

Med Worker's Comp: ONE CALL CARE MANAGEMENT - HOME + COMPLEX CARE AND EQUIPMENT + DEVICES

Policy/Group # [REDACTED]

Employer Name: CHARLESTON COUNTY SHERIFFS OFFICE

Case # [REDACTED]

Case Injury Date: 02/16/2017

Med Worker's Comp: SUNRISE MEDICAL SOLUTIONS-DME

Policy/Group # [REDACTED]

Employer Name: CHARLESTON COUNTY SHERIFFS OFFICE

Case # [REDACTED]

Case Injury Date: 02/16/2017

Prescription: ESI1 - Member is eligible, details

Prescription: ESI1 - Member is eligible, details

Chief Complaint

Followup: Closed fracture of lateral malleolus

Patient's Care Team

Insurance Adjuster (Worker's Comp): JOHN SNELLING: Ph (912) 200-3183, Fax (803) 365-0098

Referring Provider (Worker's Comp): BOYD, COLLEEN: 4600 GOER ROAD, SUITE 205, CHARLESTON, SC 29406, Ph 843-554-1029, Fax 843-554-1103

Patient's Pharmacies

BILO PHARMACY 5726 (ERX): 1000 TANNER FORD BLVD, HANAHAN SC 29410, Ph (843) 553-4077, Fax (843) 553-5889

Vitals

Ht: 6 ft 05/07/2018 10 12 am

Wt: 235 lbs 05/07/2018 10:12 am

BMI: 31.9 05/07/2018 10 12 am

BP: 118/71 sitting 05/07/2018 10.14 am

Pulse: 100 bpm 05/07/2018 10 14 am

Allergies

Reviewed Allergies

TRAZODONE

Medications

Reviewed Medications

atorvastatin 80 mg tablet	05/03/18 filled
butalbital-acetaminophen-caffeine 50 mg-325 mg-40 mg tablet	07/17/17 filled
clonazepam 1 mg tablet	11/14/17 filled
ergocalciferol (vitamin D2) 50,000 unit capsule	08/29/17 filled
finasteride 5 mg tablet	04/16/18 filled
FLUoxetine 40 mg capsule	11/14/17 filled

MISURACA, PAUL

fluticasone 50 mcg/actuation nasal spray,suspension

08/14/17 filled

glipizIDE 5 mg tablet

04/17/18 filled

Imitrex 50 mg tablet

Take by oral route.

Internal Note: PRN

03/03/17 entered

levothyroxine 75 mcg tablet

01/06/18 filled

LIDOPRO OINTMENT - CARA (Methyl Salicylate 27.5 % /Menthol 10% /Capsaicin 0.0325% /Lidocaine 4%)

02/09/18 prescribed

LIDOPRO OINTMENT - CARA (Methyl Salicylate 27.5 % /Menthol 10% /Capsaicin 0.0325% /Lidocaine 4%)

2g up to 4 times/day when not using patches

Internal Note: A monthly supply is 2 tubes

LIDOPRO PATCHES - CARA (Lidocaine 4% Methyl Salicylate 4.00% /Menthol 5.00%)

02/09/18 prescribed

LIDOPRO PATCHES - CARA (Lidocaine 4% Methyl Salicylate 4.00% /Menthol 5.00%)

1 patch every 12 hours

Internal Note: A monthly supply is 2 boxes

Lyrica 300 mg capsule

04/15/18 filled

metFORMIN 1,000 mg tablet

03/16/18 filled

Muse 1,000 mcg urethral suppository

02/23/18 filled

nortriptyline 10 mg capsule

10/16/17 filled

oxyCODONE-acetaminophen 5 mg-325 mg tablet

03/01/18 filled

sertraline 50 mg tablet

10/09/17 filled

sulfamethoxazole 800 mg-trimethoprim 160 mg tablet

03/02/18 filled

tamsulosin 0.4 mg capsule

03/01/18 filled

Topamax 100 mg tablet

08/24/16 filled

Viagra 100 mg tablet

09/22/17 filled

Vyvanse 40 mg capsule

02/22/18 filled

Vaccines

Reviewed Vaccines

Vaccine Type	Date	Amt.	Route	Site	Lot #	Mfr.	Exp.	Date	VIS	Vaccinator
Influenza									Date on VIS Given	
Influenza, injectable, quadrivalent	08/30/17									

Problems

Reviewed Problems

- Closed fracture of lateral malleolus - Onset: 03/13/2017

Family History

Reviewed Family History

None Reported.

Social History

MISURACA, PAUL

Reviewed Social History
Smoking Status: Former smoker
Non-smoker
Medical Power of Attorney: N
Advance directive: N
Cigar/Pipe Use: N
Chewing tobacco: none
Alcohol intake: Occasional
Hand Dominance: Right

Surgical History

Reviewed Surgical History
Stent - Kidney
Spine Surgery - C-Spine
Hernia Repair
Appendectomy
Cystoscopy - Multiple
Knee arthroscopy/surgery - Bil. Knee Scopes
Wrist arthroscopy/surgery - Lt Wrist/Forearm
Spine Surgery
Open reduction internal fixation, distal fibula (surg) - 11/07/2017

Past Medical History

Reviewed Past Medical History
Anxiety: Y
Depression: Y
Diabetes: Y
Fracture: Y
High Blood Pressure: Y
Kidney Stones: Y
Migraines: Y
Panic Attacks: Y
Sleep Apnea: Y

Screening

None recorded.

HPI

Ankle 7388

Reported by patient.

Location: left; anterior; lateral; Pt. c/o pain all around the foot and the ankle.
Quality: aching; throbbing; sharp; constant; not changing
Severity: moderate; pain level 7/10
Context: work injury
Alleviating Factors: rest; elevation; limited weight bearing; narcotics; previous surgery; Knee Scooter
Aggravating Factors: standing; walking; ROM; weightbearing
Associated Symptoms: weakness; swelling (occasional)
Previous Surgery: none
Prior Imaging: x ray; CT scan
Previous PT: helped a little; Pt. reports he is still going to PT
Work Related: yes
Working: no

Notes: Pt. presents today for f/u CT of the lt foot/ankle.

59 year old male returns 6 months following repair of a left lateral malleolar fracture nonunion. He still has significant pain with weight bearing. He is returning following a CT of the left ankle. He continues to use a knee stroller.

ROS

Patient reports arthralgias/joint pain. See HPI. He reports no rashes; See HPI. He reports no weakness; See HPI. He reports no fever. He reports no vision change. He reports no nose/sinus problems. He reports no sore throat. He reports no chest pain. He reports no cough and no wheezing. He reports normal appetite. He reports no runny nose and no sinus pressure.

Physical Exam

Patient is a 59-year-old male.

Constitutional: General Appearance: NAD and normal body habitus.

Psychiatric: Orientation: oriented to time, place, and person. Mood and Affect: normal mood and affect and active and alert.

Cardiovascular System: Arterial Pulses Right: dorsalis pedis normal. Arterial Pulses Left: posterior tibialis normal and dorsalis pedis normal. Varicosities Right: capillary refill test normal. Varicosities Left: capillary refill test normal.

MISURACA, PAUL

Gait and Station: Appearance: using knee stroller.

Ankles and Feet: Inspection Right: no erythema, swelling, or warmth. Inspection Left: no erythema or deformity and swelling (mild). Bony Palpation of the Ankle/Foot Right: no tenderness of the ankle or the metatarsals. Bony Palpation of the Ankle/Foot Left: tenderness of the lateral ankle and the fifth metatarsal. Soft Tissue Palpation of the Ankle/Foot Right: no tenderness of the tibialis posterior, the tibialis anterior, the plantar fascia, the achilles tendon, or the peroneus longus and brevis. Soft Tissue Palpation of the Ankle/Foot Left: no tenderness of the tibialis posterior, the tibialis anterior, the plantar fascia, the achilles tendon, or the peroneus longus and brevis. Active Range of Motion Right: dorsiflexion normal and plantar flexion normal. Active Range of Motion Left: plantar flexion normal and dorsiflexion (-10 deg.). Strength Right: tibialis anterior (5/5) and gastrocnemius (5/5). Strength Left: tibialis anterior (5/5) and gastrocnemius (5/5).

Skin: Right Lower Extremity: normal. Left Lower Extremity: normal.

Assessment / Plan

59 year old male whose CT scan shows near complete healing of a distal fibula fracture with solid bony fusion centrally and proximally. Persistent lucency of the distal 9 mm. Mild tendinosis of both the PL and PB with possible short segment split near the calcaneal tubercle. I encourage him to come off the scooter and begin wb. With the healing noted on CT he should be having improvement in his pain with the ability to bear weight. He asked for a 2nd opinion which I believe is a good idea. He can work in a sedentary position. He will return in 2 months with repeat xrays of the left ankle nwb.

1. Closed fracture of lateral malleolus

S82.61XK: Displaced fracture of lateral malleolus of right fibula; subsequent encounter for closed fracture with nonunion

• ORTHOPEDIC REFERRAL - Schedule Within: provider's discretion Note to Provider: Evaluate and Treat.

Reason for Referral: Second Opinion Left Ankle Prior CT, MRI or X-ray Studies?: Y

• WORK STATUS REPORT -

Note to Provider:

LCO Workcomp Dep Fax Number: 843-793-5442

Date of Injury: 2/16/17

Next Follow up appt: Wednesday, July 18, 2018 01:00 PM

(X) Work Related () Not Work Related

() Regular Duty () Modified Duty

(X) Sedentary Duty < 10 lbs wt lifting () Off work

() 0 lbs () 1-15 lbs () 16-35 lbs () 36-50 lbs wt lifting restrictions

() R (X) L () B

Climbing, Bending, Stooping: (X) Never () Occasional () Frequent

Standing, Walking: () Never (X) Occasional as tolerated () Frequent

Overhead Work: () Never () Occasional () Frequent

Driving: () Yes () No

Alternate between sit/stand: ()

Comments:

MMI: () Yes () No Date of MMI:

*Occasionally is defined as up to one third of the time (33%); 1-4 times per hour

*Frequently is defined as up to one third to two thirds (34-66%); 5-12 times per hour

*Constantly is defined as over two thirds (67-100%) of the time

Return to Office

• William S. Corey, MD for RECHECK 5 at LCO_Tricom on 07/18/2018 at 01:00 PM

Encounter Sign-Off

Encounter signed-off by William S. Corey, MD, 05/08/2018.

Encounter performed and documented by William S. Corey, MD

Encounter reviewed & signed by William S. Corey, MD on 05/08/2018 at 12:06pm

Encounter Date: 04/13/2018

Patient

Name

Appt. Date/Time

MISURACA, PAUL

04/13/2018 10:20AM

DOB

04/18/1959

Service Dept.

LCO_Tricom

Provider

WILLIAM S. COREY, MD

Insurance

Med Worker's Comp: ARIEL TPA

Policy/Group #:

Referring Provider Name: BOYD, COLLEEN

Employer Name: CHARLESTON COUNTY SHERIFFS OFFICE

Case #:

Case Injury Date: 02/16/2017

Med Worker's Comp: ONE CALL CARE MANAGEMENT - HOME + COMPLEX CARE AND EQUIPMENT + DEVICES

Policy/Group #:

Employer Name: CHARLESTON COUNTY SHERIFFS OFFICE

Case #:

Case Injury Date: 02/16/2017

Med Worker's Comp: SUNRISE MEDICAL SOLUTIONS-DME

Policy/Group #:

Employer Name: CHARLESTON COUNTY SHERIFFS OFFICE

Case #:

Case Injury Date: 02/16/2017

Prescription: ES11 - Member is eligible. details

Prescription: ES11 - Member is eligible. details

Chief Complaint

Followup: Closed fracture of lateral malleolus

Patient's Care Team

Insurance Adjuster (Worker's Comp): JOHN SNELLING: Ph (912) 200-3183, Fax (803) 365-0098

Referring Provider (Worker's Comp): BOYD, COLLEEN: 4600 GOER ROAD, SUITE 205, CHARLESTON, SC 29406, Ph 843-554-1029, Fax 843-554-1103

Patient's Pharmacies

BILO PHARMACY 5726 (ERX): 1000 TANNER FORD BLVD, HANAHAN SC 29410, Ph (843) 553-4077, Fax (843) 553-5889

Vitals

Ht: 6 ft

Wt: 235 lbs

BMI: 31.9

BP: 103/71 sitting

Pulse: 101 bpm

Pain Scale: 7

Pain Scale Type: Numeric

Allergies

Reviewed Allergies

TRAZODONE

Medications

Reviewed Medications

atorvastatin 80 mg tablet

01/19/18 filled

butalbital-acetaminophen-caffeine 50 mg-325 mg-40 mg tablet

07/17/17 filled

clonazepam 1 mg tablet

11/14/17 filled

ergocalciferol (vitamin D2) 50,000 unit capsule

08/29/17 filled

finasteride 5 mg tablet

04/12/18 filled

FLUoxetine 40 mg capsule

11/14/17 filled

fluticasone 50 mcg/actuation nasal spray,suspension

08/14/17 filled

MISURACA, PAUL

glipizIDE 5 mg tablet

01/05/18 filled

Imitrex 50 mg tablet

Take by oral route.

03/03/17 entered

Internal Note: PRN

levothyroxine 75 mcg tablet

01/06/18 filled

LIDOPRO OINTMENT - CARA (Methyl Salicylate 27.5 % /Menthol 10% /Capsaicin 0.0325% /Lidocaine 4%)

02/09/18 prescribed

LIDOPRO OINTMENT - CARA (Methyl Salicylate 27.5 % /Menthol 10% /Capsaicin 0.0325% /Lidocaine 4%)

2g up to 4 times/day when not using patches

Internal Note: A monthly supply is 2 tubes

LIDOPRO PATCHES - CARA (Lidocaine 4% Methyl Salicylate 4.00% /Menthol 5.00%)

02/09/18 prescribed

LIDOPRO PATCHES - CARA (Lidocaine 4% Methyl Salicylate 4.00% /Menthol 5.00%)

1 patch every 12 hours

Internal Note: A monthly supply is 2 boxes

Lyrica 300 mg capsule

02/23/18 filled

metFORMIN 1,000 mg tablet

03/16/18 filled

Muse 1,000 mcg urethral suppository

02/23/18 filled

nortriptyline 10 mg capsule

10/16/17 filled

oxyCODONE-acetaminophen 5 mg-325 mg tablet

03/01/18 filled

sertraline 50 mg tablet

10/09/17 filled

sulfamethoxazole 800 mg-trimethoprim 160 mg tablet

03/02/18 filled

tamsulosin 0.4 mg capsule

03/01/18 filled

Topamax 100 mg tablet

08/24/16 filled

Viagra 100 mg tablet

09/22/17 filled

Vyvanse 40 mg capsule

02/22/18 filled

Vaccines

Reviewed Vaccines

Vaccine Type	Date	Amt.	Route	Site	Lot #	Mfr.	Exp. Date	VIS	Vaccinator
Influenza								Date on VIS Given	
influenza, injectable, quadrivalent 08/30/17									

Problems

Reviewed Problems

- Closed fracture of lateral malleolus - Onset: 03/13/2017

Family History

Reviewed Family History

None Reported.

Social History

Reviewed Social History

Smoking Status: Former smoker

Non-smoker

MISURACA, PAUL

Medical Power of Attorney: N
Advance directive: N
Cigar/Pipe Use: N
Chewing tobacco: none
Alcohol intake: Occasional
Hand Dominance: Right

Surgical History

Reviewed Surgical History
Stent - Kidney
Spine Surgery - C-Spine
Hernia Repair
Appendectomy
Cystoscopy - Multiple
Knee arthroscopy/surgery - Bil. Knee Scopes
Wrist arthroscopy/surgery - Lt Wrist/Forearm
Spine Surgery
Open reduction internal fixation, distal fibula (surg) - 11/07/2017

Past Medical History

Reviewed Past Medical History
Anxiety: Y
Depression: Y
Diabetes: Y
Fracture: Y
High Blood Pressure: Y
Kidney Stones: Y
Migraines: Y
Panic Attacks: Y
Sleep Apnea: Y

Screening

None recorded.

HPI

Ankle 7388

Reported by patient.

Location: left; anterior; lateral; Pt. c/o pain all around the foot and the ankle.
Quality: aching; sharp; constant; not changing
Severity: moderate; pain level 6-7/10
Context: work injury
Alleviating Factors: rest; elevation; limited weight bearing; narcotics; previous surgery; Knee Scooter
Aggravating Factors: standing; walking; ROM; weightbearing
Associated Symptoms: weakness; swelling (occasional)
Previous Surgery: none
Prior Imaging: x ray
Previous PT: helped a little; Pt. reports he is still going to PT
Work Related: yes
Working: no

Notes: Pt. presents today for f/u lt ankle.

58 year old male returns 5 months following repair of a left lateral malleolus nonunion. He is still having significant pain. He has been unable to come off his knee stroller. He has been working with PT. He describes pain distal to the lateral malleolus and to the lateral foot. He also gets pain to the anterior ankle.

ROS

Patient reports muscle weakness, arthralgias/joint pain, and swelling in the extremities but reports no muscle aches; See HPI. He reports no rashes; See HPI. He reports no weakness; See HPI. He reports no fever. He reports no vision change. He reports no nose/sinus problems. He reports no sore throat. He reports no chest pain. He reports no cough and no wheezing. He reports normal appetite. He reports no runny nose and no sinus pressure.

Physical Exam

Patient is a 58-year-old male.

Constitutional: General Appearance: NAD and normal body habitus.

Psychiatric: Orientation: oriented to time, place, and person. Mood and Affect: normal mood and affect and active and alert.

Cardiovascular System: Arterial Pulses Right: dorsalis pedis normal. Arterial Pulses Left: posterior tibialis normal and dorsalis pedis normal. Varicosities Right: capillary refill test normal. Varicosities Left: capillary refill test normal.

MISURACA, PAUL

Gait and Station: Appearance: using knee stroller.

Ankles and Feet: Inspection Right: no erythema, swelling, or warmth. Inspection Left: no erythema or deformity and swelling (mild). Bony Palpation of the Ankle/Foot Right: no tenderness of the ankle or the metatarsals. Bony Palpation of the Ankle/Foot Left: tenderness of the lateral ankle and the fifth metatarsal. Soft Tissue Palpation of the Ankle/Foot Right: no tenderness of the tibialis posterior, the tibialis anterior, the plantar fascia, the achilles tendon, or the peroneus longus and brevis. Soft Tissue Palpation of the Ankle/Foot Left: no tenderness of the tibialis posterior, the tibialis anterior, the plantar fascia, the achilles tendon, or the peroneus longus and brevis. Active Range of Motion Right: dorsiflexion normal and plantar flexion normal. Active Range of Motion Left: plantar flexion normal and dorsiflexion (-10 deg.). Strength Right: tibialis anterior (5/5) and gastrocnemius (5/5). Strength Left: tibialis anterior (5/5) and gastrocnemius (5/5).

Skin: Right Lower Extremity: normal. Left Lower Extremity: normal.

Assessment / Plan

58 year old male with continued pain 5 months following repair of a left lateral malleolar nonunion with bone grafting. He will return following a CT scan of the left ankle to rule out nonunion.

1. Ankle pain

M25.572: Pain in left ankle and joints of left foot

- XR, ANKLE

Side: Views (X-RAY, ANKLE): AP, Lateral &
LEFT Oblique

2. Closed fracture of lateral malleolus

S82.61XX: Displaced fracture of lateral malleolus of right fibula, subsequent encounter for closed fracture with nonunion

- WORK STATUS REPORT -

Note to Provider:

LCO Workcomp Dep Fax Number: 843-793-5442

Date of Injury: 2/16/17

Next Follow up appt: f/u after CT Scan

(X) Work Related () Not Work Related

() Regular Duty () Modified Duty

() Sedentary Duty <10lbs wt lifting (X) Off work

() 0lbs () 1-15lbs () 16-35 lbs () 36-50 lbs wt lifting restrictions

() R (X) L () B

Climbing, Bending, Stopping: () Never () Occasional () Frequent

Standing, Walking: () Never () Occasional () Frequent

Overhead Work: () Never () Occasional () Frequent

Driving: () Yes () No

Alternate between sit/stand: ()

Comments: Mr. Misuraca is to remain out of work until CT f/u.

MMI: () Yes () No Date of MMI:

*Occasionally is defined as up to one third of the time (33%); 1-4 times per hour

*Frequently is defined as up to one third to two thirds (34-66%); 5-12 times per hour

*Constantly is defined as over two thirds (67-100%) of the time

- CT, ANKLE, W/O CONTRAST -

Height (ft.): 6'0

Side: LEFT

Special Instructions: Please give pt
disk

Weight (lbs): 235

CPT: 73700

XR, ANKLE

- Side: LEFT, Views (X-RAY, ANKLE): AP, Lateral & Oblique

Review of xr, ankle taken on 04/13/2018 at LOWCOUNTRY ORTHOPAEDICS & SPORTS MED (N CHARLESTON) shows:

Ankle:

Side: left.

Views: ap, lateral, and mortise.

Healed lateral malleolar fracture. Well reduced. No signs of hardware failure or loosening.

Return to Office

License Country: Orthodontics Member of Arizona Healthcare - 2220 Eugene Street, Corvallis, OR 97331

MISURACA, PAUL

None recorded.

Encounter Sign-Off

Encounter signed-off by William S. Corey, MD, 04/13/2018.

Encounter performed and documented by William S. Corey, MD

Encounter reviewed & signed by William S. Corey, MD on 04/13/2018 at 3:44pm

Physician Authorizations

MISURACA, PAUL

Encounters and Procedures

Clinical Encounter Summaries

Encounter Date: 02/09/2018 (Last amended by William S. Corey, MD on 02/09/2018 at 1:13pm)

Patient

Name MISURACA, PAUL (58yo, M) ID# Appt. Date/Time 02/09/2018 10:20AM

DOB

Provider

WILLIAM S. COREY, MD

Service Dept. LCO_Tricom

Insurance

Med Worker's Comp: ARIEL TPA

Policy/Group #:

Referring Provider Name: BOYD, COLLEEN

Employer Name: CHARLESTON COUNTY SHERIFFS OFFICE

Case #:

Case Injury Date: 02/16/2017

Med Worker's Comp: ONE CALL CARE MANAGEMENT - HOME + COMPLEX CARE AND EQUIPMENT + DEVICES

Policy/Group #:

Employer Name: CHARLESTON COUNTY SHERIFFS OFFICE

Case #:

Case Injury Date: 02/16/2017

Prescription: ESI1 - Member is eligible. details

Prescription: ESI1 - Member is eligible. details

Chief Complaint

Followup: Closed fracture of lateral malleolus

Patient's Care Team

Insurance Adjuster (Worker's Comp): JOHN SNELLING: Ph (912) 200-3183, Fax (803) 365-0098

Referring Provider (Worker's Comp): BOYD, COLLEEN: 4600 GOER ROAD, SUITE 205, CHARLESTON, SC 29406, Ph 843-554-1029, Fax 843-554-1103

Patient's Pharmacies

BILO PHARMACY 5726 (ERX): 1000 TANNER FORD BLVD, HANAHAN SC 29410, Ph (843) 553-4077, Fax (843) 553-5889

Vitals

Ht: 6 ft 02/09/2018
10:07 am

Wt: 235 lbs 02/09/2018
10:07 am

BMI: 31.9 02/09/2018
10:07 am

BP: 117/70 sitting
02/09/2018 10:22
am

Pulse: 98 bpm 02/09/2018
10:22 am

Pain Scale: 7 02/09/2018 10:22
am

Pain Scale Type: Numeric
02/09/2018 10:07
am

Allergies

Reviewed Allergies

TRAZODONE

Medications

Reviewed Medications

atorvastatin 80 mg tablet

01/19/18 filled

butoalbital-acetaminophen-caffeine 50 mg-325 mg-40 mg tablet

07/17/17 filled

clonazepam 1 mg tablet

11/14/17 filled

ergocalciferol (vitamin D2) 50,000 unit capsule

08/29/17 filled

finasteride 5 mg tablet

02/01/18 filled

MISURACA, PAUL

FLUoxetine 40 mg capsule

11/14/17 filled

fluticasone 50 mcg/actuation nasal spray, suspension

08/14/17 filled

glipiZIDE 5 mg tablet

01/05/18 filled

Imitrex 50 mg tablet

Take by oral route.

Internal Note: PRN

03/03/17 entered

levothyroxine 75 mcg tablet

01/06/18 filled

LIDOPRO OINTMENT - CARA (Methyl Salicylate 27.5 % /Menthol 10% /Capsaicin 0.0325% /Lidocaine 4%)

02/09/18 prescribed

LIDOPRO OINTMENT - CARA (Methyl Salicylate 27.5 % /Menthol 10% /Capsaicin 0.0325% /Lidocaine 4%)

2g up to 4 times/day when not using patches

Internal Note: A monthly supply is 2 tubes

LIDOPRO PATCHES - CARA (Lidocaine 4% Methyl Salicylate 4.00% /Menthol 5.00%)

02/09/18 prescribed

LIDOPRO PATCHES - CARA (Lidocaine 4% Methyl Salicylate 4.00% /Menthol 5.00%)

1 patch every 12 hours

Internal Note: A monthly supply is 2 boxes

Lyrica 300 mg capsule

10/05/17 filled

metFORMIN 1,000 mg tablet

09/23/17 filled

nortriptyline 10 mg capsule

10/16/17 filled

oxyCODONE 5 mg tablet

01/22/18 filled

sertraline 50 mg tablet

10/09/17 filled

sulfamethoxazole 800 mg-trimethoprim 160 mg tablet

01/22/18 filled

Topamax 100 mg tablet

08/24/16 filled

Viagra 100 mg tablet

09/22/17 filled

Vyvanse 40 mg capsule

01/19/18 filled

Vaccines

Reviewed Vaccines

Vaccine Type	Date	Amt.	Route	Site	Lot #	Mfr.	Exp. Date	VIS Date on VIS Given	Vaccinator
Influenza									
Influenza, injectable, quadrivalent	08/30/17								

Problems

Reviewed Problems

Closed fracture of lateral malleolus - Onset: 03/13/2017

Family History

Reviewed Family History

None Reported.

Social History

MISURACA, PAUL

Reviewed Social History
Smoking Status: Former smoker
Non-smoker
Medical Power of Attorney: N
Advance directive: N
Cigar/Pipe Use: N
Chewing tobacco: none
Alcohol intake: Occasional
Hand Dominance: Right

Surgical History

Reviewed Surgical History
Stent - Kidney
Spine Surgery - C-Spine
Hernia Repair
Appendectomy
Cystoscopy - Multiple
Knee arthroscopy/surgery - Bil. Knee Scopes
Wrist arthroscopy/surgery - Lt Wrist/Forearm
Spine Surgery
Open reduction internal fixation, distal fibula (surg) - 11/07/2017

Past Medical History

Reviewed Past Medical History
Anxiety: Y
Depression: Y
Diabetes: Y
Fracture: Y
High Blood Pressure: Y
Kidney Stones: Y
Migraines: Y
Panic Attacks: Y
Sleep Apnea: Y

Screening

None recorded.

HPI

Ankle7388

Reported by patient.

Location: left; anterior; lateral
Quality: aching; constant; not changing
Severity: moderate; pain level 6-7/10
Context: work injury
Alleviating Factors: rest; elevation; limited weight bearing; narcotics; previous surgery; crutches (PRN); CAM Boot;
Knee Scooter
Aggravating Factors: standing; walking; ROM; weightbearing
Associated Symptoms: no swelling; weakness
Previous Surgery: none
Prior Imaging: x ray
Work Related: yes
Working: no
Notes: Pt presents for PO of LT ankle fx. Pt. states he is unable to WB.

58 year old male returns 3 months following repair of a left fibular nonunion with ORIF and bone grafting. He has been unable to bear weight in the CAM walker due to pain. He has been using a knee stroller. He continued to have lateral ankle pain.

ROS

Patient reports muscle aches, muscle weakness, and arthralgias/joint pain. He reports no fever. He reports no irritation. He reports no difficulty hearing. He reports no nose/sinus problems. He reports no sore throat. He reports no chest pain. He reports no cough. He reports no abdominal pain, no vomiting, and no diarrhea. He reports no jaundice and no rashes. He reports no loss of consciousness. He reports no fatigue. He reports no swollen glands. He reports no runny nose, no sinus pressure, no hives, and no frequent sneezing.

Physical Exam

Patient is a 58-year-old male.

Constitutional: General Appearance: healthy-appearing and NAD.

MISURACA, PAUL

Psychiatric: Orientation: oriented to time, place, and person. Mood and Affect: normal mood and affect and active and alert.

Cardiovascular System: Arterial Pulses Left: posterior tibialis normal and dorsalis pedis normal.

Ankles and Feet: Inspection Left: no deformity and swelling. Bony Palpation of the Ankle/Foot Left: no tenderness of the metatarsals or the tarsometatarsal joints and tenderness of the lateral ankle. Soft Tissue Palpation of the Ankle/Foot Left: no tenderness of the deltoid ligament. Active Range of Motion Left: plantar flexion normal and dorsiflexion (-10 deg.). Strength Left: unable to assess due to pain.

Neurological System: Sensation on the Left: normal distal extremities.

Skin: Right Lower Extremity: normal.

Assessment / Plan

58-year-old male with a healing left lateral malleolar nonunion 3 months following ORIF with bone grafting. He was transitioned to a lace up ankle brace for which he was fitted today. I encouraged him to start bearing weight. He will be sent for PT. He was prescribed and dispensed Lidopro patches and ointment to help with his pain. He will return in 8 weeks with repeat x-rays of his left ankle nwb.

1. Closed fracture of lateral malleolus

S82.61XK: Displaced fracture of lateral malleolus of right fibula, subsequent encounter for closed fracture with nonunion

• PHYSICAL THERAPY REFERRAL - Schedule Within: provider's discretion Note to Provider: 3 months following ORIF of a left lateral malleolar nonunion with bone grafting. ROM as tolerated. Gait training. Strengthening as tolerated. 2-3 times a week for 12 weeks.

• WORK STATUS REPORT -

Note to Provider:

LCO Workcomp Dep Fax Number: 843-793-5442

Date of Injury: 2/16/17

Next Follow up appt: Friday, April 13, 2018 10:20 AM

(X) Work Related () Not Work Related

() Regular Duty () Modified Duty

() Sedentary Duty < 10 lbs wt lifting (X) Off work

() 0 lbs () 1-15 lbs () 16-35 lbs () 36-50 lbs wt lifting restrictions

() R (X) L () B

Climbing, Bending, Stooping: () Never () Occasional () Frequent

Standing, Walking: () Never () Occasional () Frequent

Overhead Work: () Never () Occasional () Frequent

Driving: () Yes () No

Alternate between sit/stand: ()

Comments: Mr. Misuraca is to remain out of work until f/u visit.

MMI: () Yes () No Date of MMI:

*Occasionally is defined as up to one third of the time (33%); 1-4 times per hour

*Frequently is defined as up to one third to two thirds (34-66%); 5-12 times per hour

*Constantly is defined as over two thirds (67-100%) of the time

2. Ankle pain

M25.572: Pain in left ankle and joints of left foot

• XR, ANKLE

Side: LEFT

Views (X-RAY, ANKLE): AP, Lateral & Mortise

Weighted/Unweighted: Weighted

• LIDOPRO OINTMENT - CARA (Methyl Salicylate 27.5 % /Menthol 10% /Capsaicin 0.0325% /Lidocaine 4%) -

LIDOPRO OINTMENT - CARA (Methyl Salicylate 27.5 % /Menthol 10% /Capsaicin 0.0325% /Lidocaine 4%) 2g up to 4 times/day when not using patches Qty: 2 tubes(s) Refills: 0 Pharmacy: LIDOPRO (CARA BORNT DAVIS)

Note to Pharmacy: **Dispensed by Dr. Corey in office**

MISURACA, PAUL

LIDOPRO PATCHES (Lidocaine 4% Methyl Salicylate 4.00% /Menthol 5.00%) - LIDOPRO PATCHES - CARA
(Lidocaine 4% Methyl Salicylate 4.00% /Menthol 5.00%) 1 patch every 12 hours Qty: 2 boxes(s) Refills: 0
Pharmacy: LIDOPRO (CARA BORNT DAVIS) Note to Pharmacy: **Dispensed by Dr. Corey in office**
LACE UP ANKLE BRACE - HCPCS: L1902 Dispense Qty: 1 Unit

XR, ANKLE

Side: LEFT, Views (X-RAY, ANKLE): AP, Lateral & Mortise, Weighted/Unweighted: Weighted
Review of xr, ankle taken on 02/09/2018 at LOWCOUNTRY ORTHOPAEDICS & SPORTS MED (N CHARLESTON) shows:
Ankle:

Side: left.

Views: ap, lateral, and mortise.

Healing nondisplaced lateral malleolar nonunion s/p ORIF. Good alignment. No signs of hardware failure or loosening.

Return to Office

William S. Corey, MD for RECHECK 5 at LCO_Tricom on 04/13/2018 at 10:20 AM

Amendment Sign-Off

Encounter signed-off by William S. Corey, MD, 02/09/2018.

Encounter performed and documented by William S. Corey, MD.

Encounter reviewed & signed by William S. Corey, MD on 02/09/2018 at 1:12pm

Amendment closed by William S. Corey, MD on 02/09/2018 at 1:13pm

Encounter Date: 12/19/2017

Patient

Name

MISURACA, PAUL (58yo, M) ID#

Appt. Date/Time

12/19/2017 09:35AM

DOB

Provider

WILLIAM S. COREY, MD

Service Dept.

LCO_Tricom

Insurance

Med Worker's Comp: ARIEL TPA

Policy/Group # :

Referring Provider Name : BOYD, COLLEEN

Employer Name : CHARLESTON COUNTY SHERIFFS OFFICE

Case # :

Case Injury Date : 02/16/2017

Med Worker's Comp: ONE CALL CARE MANAGEMENT - HOME + COMPLEX CARE AND EQUIPMENT + DEVICES

Policy/Group # :

Employer Name : CHARLESTON COUNTY SHERIFFS OFFICE

Case # :

Case Injury Date : 02/16/2017

Prescription: ESI1 - Member is eligible. details

Prescription: ESI1 - Member is eligible. details

Chief Complaint

Followup: Closed fracture of lateral malleolus

Patient's Care Team

Insurance Adjuster (Worker's Comp): JOHN SNELLING: Ph (912) 200-3183, Fax (803) 365-0098

Referring Provider (Worker's Comp): BOYD, COLLEEN: 4600 GOER ROAD, SUITE 205, CHARLESTON, SC 29406, Ph 843-554-1029, Fax 843-554-1103

Patient's Pharmacies

BILO PHARMACY 5726 (ERX): 1000 TANNER FORD BLVD, HANAHAN SC 29410, Ph (843) 553-4077, Fax (843) 553-5889

Vitals

Ht: 6 ft 12/19/2017
10:15 am

Wt: 235 lbs 12/19/2017
10 15 am

BMI: 31.9 12/19/2017
10:15 am

BP: 111/78 sitting
12/19/2017 10:15
am

Pulse: 84 bpm 12/19/2017
10 15 am

Pain Scale: 8 12/19/2017 10:16
am

Pain Scale Type: Numeric
12/19/2017 10:16
am

Allergies

MISURACA, PAUL

Reviewed Allergies

TRAZODONE

Medications

Reviewed Medications

atorvastatin 80 mg tablet

09/23/17 filled

butalbital-acetaminophen-caffeine 50 mg-325 mg-40 mg tablet

07/17/17 filled

clonazepam 1 mg tablet

11/14/17 filled

ergocalciferol (vitamin D2) 50,000 unit capsule

08/29/17 filled

FLUoxetine 40 mg capsule

11/14/17 filled

fluticasone 50 mcg/actuation nasal spray, suspension

08/14/17 filled

glipizide 5 mg tablet

10/17/17 filled

Imitrex 50 mg tablet

Take by oral route.

03/03/17 entered

Internal Note: PRN

levothyroxine 75 mcg tablet

10/10/17 filled

Lyrica 300 mg capsule

10/05/17 filled

metFORMIN 1,000 mg tablet

09/23/17 filled

nortriptyline 10 mg capsule

10/16/17 filled

oxyCODONE 10 mg tablet

10/09/17 filled

sertraline 50 mg tablet

10/09/17 filled

Topamax 100 mg tablet

08/24/16 filled

Viagra 100 mg tablet

09/22/17 filled

Vaccines

Reviewed Vaccines

Vaccine Type	Date	Amt.	Route	Site	Lot #	Mfr.	Exp.	Date on VIS	VIS	Vaccinator
Influenza										
Influenza, injectable, quadrivalent	06/30/17									

Problems

Reviewed Problems

Closed fracture of lateral malleolus - Onset: 03/13/2017

Family History

Reviewed Family History

None Reported

Social History

Reviewed Social History

Smoking Status: Former smoker

Non-smoker

Medical Power of Attorney: N

MISURACA, PAUL

Advance directive: N
Cigar/Pipe Use: N
Chewing tobacco: none
Alcohol intake: Occasional
Hand Dominance: Right

Surgical History

Reviewed Surgical History
Spine Surgery - C-Spine
Hernia Repair
Appendectomy
Cystoscopy - Multiple
Knee arthroscopy/surgery - Bil. Knee Scopes
Wrist arthroscopy/surgery - Lt Wrist/Forearm
Spine Surgery
Open reduction internal fixation, distal fibula (surg) - 11/07/2017

Past Medical History

Reviewed Past Medical History
Anxiety: Y
Depression: Y
Diabetes: Y
Fracture: Y
High Blood Pressure: Y
Kidney Stones: Y
Migraines: Y
Panic Attacks: Y
Sleep Apnea: Y

Screening

None recorded.

HPI

Ankle7388

Reported by patient.

Location: left
Quality: aching; constant; not changing
Severity: moderate; pain level 8/10
Context: work injury
Alleviating Factors: rest; elevation; limited weight bearing; narcotics; previous surgery; crutches; SLC; Knee Scooter
Aggravating Factors: standing; walking; ROM; weightbearing
Associated Symptoms: swelling
Previous Surgery: none
Prior Imaging: x ray
Work Related: yes
Working: no
Notes: Pt presents for PO of LT ankle fx.

58 year old male returns 6 weeks following repair of a left distal fibular nonunion with bone grafting. He has been immobilized in a SLC. He still describes lateral ankle pain. He has numbness to the lateral ankle.

ROS

Patient reports muscle aches, muscle weakness, and arthralgias/joint pain. He reports no fever. He reports no irritation. He reports no difficulty hearing. He reports no nose/sinus problems. He reports no sore throat. He reports no chest pain. He reports no cough. He reports no abdominal pain, no vomiting, and no diarrhea. He reports no jaundice and no rashes. He reports no loss of consciousness. He reports no fatigue. He reports no swollen glands. He reports no runny nose, no sinus pressure, no hives, and no frequent sneezing.

Physical Exam

Patient is a 58-year-old male.

Post Operative Exam: General Appearance: no tenderness or warmth, swelling and neurovascular not intact (numbness of the lateral ankle), and wound clean and dry.

Assessment / Plan

58 year old male 6 weeks following repair of a left lateral malleolar nonunion with bone grafting. He will be transitioned to a CAM walker for which he was fitted. He will start PWB with the goal of being FWB in 1-2 weeks. He will return in 6 weeks with repeat x-rays of the left ankle, wb.

MISURACA, PAUL

1. Ankle pain

M25.572: Pain in left ankle and joints of left foot

• XR, ANKLE

Side: LEFT

2. Closed fracture of lateral malleolus

S82.61XX: Displaced fracture of lateral malleolus of right fibula, subsequent encounter for closed fracture with nonunion

• WORK STATUS REPORT -

Note to Provider:

LCO Workcomp Dep Fax Number: 843-793-5442

Date of Injury: 2/16/17

Next Follow up appt: 02/09/2018 at 10:20am

(X) Work Related () Not Work Related

() Regular Duty () Modified Duty

() Sedentary Duty < 10 lbs wt lifting (X) Off work

() 0 lbs () 1-15 lbs () 16-35 lbs () 36-50 lbs wt lifting restrictions

() R (X) L () B

Climbing, Bending, Stooping: () Never () Occasional () Frequent

Standing, Walking: () Never () Occasional () Frequent

Overhead Work: () Never () Occasional () Frequent

Driving: () Yes () No

Alternate between sit/stand: ()

Comments: Mr. Misuraca may remain out of work until f/u visit.

MMI: () Yes () No Date of MMI:

*Occasionally is defined as up to one third of the time (33%); 1-4 times per hour

*Frequently is defined as up to one third to two thirds (34-66%); 5-12 times per hour

*Constantly is defined as over two thirds (67-100%) of the time

• PNEUMATIC TALL WALKING BOOT - HCPCS L4361 Dispense Qty: 1 Unit

Duration/Estimated Length of Need: 99

XR, ANKLE

• Side: LEFT

Review of xr, ankle taken on 12/19/2017 at LOWCOUNTRY ORTHOPAEDICS & SPORTS MED (N CHARLESTON) shows:

Ankle:

Side: left.

Progressive healing of lateral malleolus s/p ORIF. Good reduction. No medial clear space widening. No syndesmosis widening.

Return to Office

• William S. Corey, MD for RECHECK 5 at LCO_Tricom on 02/09/2018 at 10:20 AM

Encounter Sign-Off

Encounter signed-off by William S. Corey, MD, 12/19/2017.

Encounter performed and documented by William S. Corey, MD

Encounter reviewed & signed by William S. Corey, MD on 12/19/2017 at 6:11pm

Encounter Date: 12/01/2017

Patient

Appt. Date/Time 12/01/2017 09:25AM

Service Dept. LCO_Tricom

Provider

WILLIAM S. COREY, MD

Insurance

MISURACA, PAUL

Employer Name: CHARLESTON COUNTY SHERIFFS OFFICE
Case #: [REDACTED]
Case Injury Date: 02/16/2017
Med Worker's Comp: ONE CALL CARE MANAGEMENT - HOME + COMPLEX CARE AND EQUIPMENT + DEVICES
Policy/Group #: [REDACTED]
Employer Name: CHARLESTON COUNTY SHERIFFS OFFICE
Case #: [REDACTED]
Case Injury Date: 02/16/2017
Prescription: ES11 - Member is eligible. details
Prescription: ES11 - Member is eligible. details

Chief Complaint

Followup: Closed fracture of lateral malleolus

Patient's Care Team

Insurance Adjuster (Worker's Comp): JOHN SNELLING: Ph (912) 200-3183, Fax (803) 365-0098

Referring Provider (Worker's Comp): BOYD, COLLEEN: 4600 GOER ROAD, SUITE 205, CHARLESTON, SC 29406, Ph 843-554-1029, Fax 843-554-1103

Patient's Pharmacies

BILO PHARMACY 5726 (ERX): 1000 TANNER FORD BLVD, HANAHAN SC 29410, Ph (843) 553-4077, Fax (843) 553-5889

Vitals

Ht: 6 ft 12/01/2017
09:20 am

Wt: 235 lbs 12/01/2017
09:21 am

BMI: 31.9 12/01/2017
09:21 am

BP: 125/73 sitting
12/01/2017 09:21
am

Pulse: 94 bpm 12/01/2017
09:21 am

Pain Scale: 8 12/01/2017 09:21
am

Pain Scale Type: Numeric
12/01/2017 09:21
am

Allergies

Reviewed Allergies
TRAZODONE

Medications

Reviewed Medications

atorvastatin 80 mg tablet	09/23/17 filled
butalbital-acetaminophen-caffeine 50 mg-325 mg-40 mg tablet	07/17/17 filled
clonazepam 1 mg tablet	11/14/17 filled
ergocalciferol (vitamin D2) 50,000 unit capsule	08/29/17 filled
FLUoxetine 40 mg capsule	11/14/17 filled
fluticasone 50 mcg/actuation nasal spray, suspension	08/14/17 filled
glipizide 5 mg tablet	10/17/17 filled
Imitrex 50 mg tablet Take by oral route. Internal Note: PRN	03/03/17 entered
levothyroxine 75 mcg tablet	10/10/17 filled
Lyrica 300 mg capsule	10/05/17 filled

MISURACA, PAUL

metFORMIN 1,000 mg tablet

09/23/17 filled

nortriptyline 10 mg capsule

10/16/17 filled

oxyCODONE 10 mg tablet

10/09/17 filled

sertraline 50 mg tablet

10/09/17 filled

Topamax 100 mg tablet

08/24/16 filled

Viagra 100 mg tablet

09/22/17 filled

Vaccines

Reviewed Vaccines

Vaccine Type	Date	Amt.	Route	Site	Lot #	Mfr.	Exp.	Date VIS	Vaccinator
Influenza								Date on VIS Given	
Influenza, injectable, quadrivalent	08/30/17								

Problems

Reviewed Problems

- Closed fracture of lateral malleolus - Onset. 03/13/2017

Family History

Reviewed Family History

None Reported.

Social History

Reviewed Social History

Smoking Status: Former smoker

Non-smoker

Medical Power of Attorney: N

Advance directive: N

Cigar/Pipe Use: N

Chewing tobacco: none

Alcohol intake: Occasional

Hand Dominance: Right

Surgical History

Reviewed Surgical History

Spine Surgery - C-Spine

Hernia Repair

Appendectomy

Cystoscopy - Multiple

Knee arthroscopy/surgery - Bil. Knee Scopes

Wrist arthroscopy/surgery - Lt. Wrist/Forearm

Spine Surgery

Open reduction internal fixation, distal fibula (surg) - 11/07/2017

Past Medical History

Reviewed Past Medical History

Anxiety: Y

Depression: Y

Diabetes: Y

Fracture: Y

High Blood Pressure Y

Kidney Stones: Y

Migraines: Y

Panic Attacks: Y

Sleep Apnea: Y

Screening

None recorded.

HPI

MISURACA, PAUL

Ankle7388

Reported by patient.

Location: left

Quality: aching; throbbing; frequent; not changing

Severity: moderate; pain level 8/10

Context: work injury

Alleviating Factors: rest; elevation; limited weight bearing; narcotics; previous surgery; crutches; SLC; Knee Scooter

Aggravating Factors: standing; walking; ROM; weightbearing

Associated Symptoms: swelling

Previous Surgery: none

Prior Imaging: x ray

Work Related: yes

Working: no

Notes: Pt presents for PO of LT ankle fx. Pt. presents early due to cast breaking down. Pt. admits to WB in his home up and down stairs and to and from his bathroom in the SLC.

58 year old male returns 3 weeks following ORIF of a left lateral malleolar nonunion with bone grafting. He returns due to softening of the heel of his cast.

ROS

Patient reports muscle aches, muscle weakness, and arthralgia/joint pain. He reports no fever. He reports no irritation. He reports no difficulty hearing. He reports no nose/sinus problems. He reports no sore throat. He reports no chest pain. He reports no cough. He reports no abdominal pain, no vomiting, and no diarrhea. He reports no jaundice and no rashes. He reports no loss of consciousness. He reports no fatigue. He reports no swollen glands. He reports no runny nose, no sinus pressure, no hives, and no frequent sneezing.

Physical Exam

Patient is a 58-year-old male.

Post Operative Exam: General Appearance: no tenderness or warmth and wound clean and dry, neurovascular intact, and swelling.

Heel of cast is broken down.

Assessment / Plan

58 year old male with a healing fracture of the left lateral malleolus 3 weeks following ORIF and bone grafting of a nonunion. The cast of his heel was broken down. The cast was reinforced. He will remain nwb. He will return at his regularly scheduled appointment with repeat xrays of the left ankle nwb out of the cast.

1. Ankle pain

M25.572: Pain in left ankle and joints of left foot

• XR, ANKLE

Side: LEFT

• WORK STATUS REPORT -

Note to Provider:

LCO Workcomp Dep Fax Number: 843-793-5442

Date of Injury: 2/16/17

Next Follow up appt: Tuesday, December 19, 2017 09:35 AM

(X) Work Related () Not Work Related

() Regular Duty () Modified Duty

() Sedentary Duty<10lbs wt lifting (X) Off work

() 0lbs () 1-15lbs () 16-35 lbs () 36-50 lbs wt lifting restrictions

() R (X) L () B

Climbing, Bending, Stooping: () Never () Occasional () Frequent

Standing, Walking: () Never () Occasional () Frequent

Overhead Work: () Never () Occasional () Frequent

Driving: () Yes () No

Alternate between sit/stand: ()

Comments: Mr. Misuraca is to remain out of work until f/u visit.

MMI: () Yes () No Date of MMI:

MISURACA, PAUL

- *Occasionally is defined as up to one third of the time (33%); 1-4 times per hour
- *Frequently is defined as up to one third to two thirds (34-66%); 5-12 times per hour
- *Constantly is defined as over two thirds (67-100%) of the time

2. Closed fracture of lateral malleolus

S82.61XK: Displaced fracture of lateral malleolus of right fibula, subsequent encounter for closed fracture with nonunion

BROKEN ANKLE: CARE INSTRUCTIONS

XR, ANKLE

Side: LEFT

Review of xr, ankle taken on 12/01/2017 at LOWCOUNTRY ORTHOPAEDICS & SPORTS MED (N CHARLESTON) shows:

Ankle:

Side: left

Views: ap, lateral, and mortise.

In cast: Well reduced lateral malleolus fracture. Good reduction. Proper position and length of the hardware. Progressive healing.

Return to Office

William S. Corey, MD for RECHECK 10 at LCO_Tricom on 12/19/2017 at 09:35 AM

Encounter Sign-Off

Encounter signed-off by William S. Corey, MD, 12/01/2017.

Encounter performed and documented by William S. Corey, MD

Encounter reviewed & signed by William S. Corey, MD on 12/01/2017 at 3:24pm

Encounter Date: 11/21/2017

Patient

Name

MISURACA, PAUL (58yo, M) ID#

Appt. Date/Time

11/21/2017 10 15AM

DOB

Provider

WILLIAM S. COREY, MD

Service Dept.

LCO_Tricom

Insurance

Med Worker's Comp: ARIEL TPA

Policy/Group #:

Referring Provider Name : BOYD, COLLEEN

Employer Name: CHARLESTON COUNTY SHERIFFS OFFICE

Case #:

Case Injury Date : 02/16/2017

Med Worker's Comp: ONE CALL CARE MANAGEMENT - HOME + COMPLEX CARE AND EQUIPMENT + DEVICES

Policy/Group #:

Employer Name : CHARLESTON COUNTY SHERIFFS OFFICE

Case #:

Case Injury Date : 02/16/2017

Prescription: ESI1 - Member is eligible. details

Prescription: ESI1 - Member is eligible. details

Chief Complaint

Followup: Closed fracture of lateral malleolus

Patient's Care Team

Insurance Adjuster (Worker's Comp): JOHN SNELLING: Ph (912) 200-3183, Fax (803) 365-0098

Referring Provider (Worker's Comp): BOYD, COLLEEN: 4600 GOER ROAD, SUITE 205, CHARLESTON, SC 29406, Ph 843-554-1029, Fax 843-554-1103

Patient's Pharmacies

BILO PHARMACY 5726 (ERX): 1000 TANNER FORD BLVD, HANAHAN SC 29410, Ph (843) 553-4077, Fax (843) 553-5889

Vitals

Ht: 6 ft 11/21/2017
10:31 am

Wt: 235 lbs 11/21/2017
10:31 am

BMI: 31.9 11/21/2017
10:31 am

BP: 106/73 sitting
11/21/2017 10:32
am

Pulse: 103 bpm regular
11/21/2017 10:32
am

Pain Scale: 8 11/21/2017 10:32
am

Pain Scale Type:

MISURACA, PAUL

Numeric
11/21/2017 10:32
am

Allergies

Reviewed Allergies

TRAZODONE

Medications

Reviewed Medications

atorvastatin 80 mg tablet

09/23/17 filled

butalbital-acetaminophen-caffeine 50 mg-325 mg-40 mg tablet

07/17/17 filled

clonazepam 1 mg tablet

11/14/17 filled

ergocalciferol (vitamin D2) 50,000 unit capsule

08/29/17 filled

FLUoxetine 40 mg capsule

11/14/17 filled

fluticasone 50 mcg/actuation nasal spray, suspension

08/14/17 filled

glipizide 5 mg tablet

10/17/17 filled

Imitrex 50 mg tablet

Take by oral route.

03/03/17 entered

Internal Note: PRN

levothyroxine 75 mcg tablet

10/10/17 filled

Lyrica 300 mg capsule

10/05/17 filled

metFORMIN 1,000 mg tablet

09/23/17 filled

nortriptyline 10 mg capsule

10/16/17 filled

oxyCODONE 10 mg tablet

10/09/17 filled

sertraline 50 mg tablet

10/09/17 filled

Topamax 100 mg tablet

08/24/16 filled

Viagra 100 mg tablet

09/22/17 filled

Vaccines

Reviewed Vaccines

Vaccine Type	Date	Amt.	Route	Site	Lot #	Mfr.	Exp. Date	VIS	Vaccinator
Influenza									
Influenza, injectable, quadrivalent	08/30/17								

Problems

Reviewed Problems

• Closed fracture of lateral malleolus - Onset: 03/13/2017

Family History

Reviewed Family History

None Reported.

MISURACA, PAUL

Social History

Reviewed Social History

Smoking Status: Former smoker

Non-smoker

Medical Power of Attorney: N

Advance directive: N

Cigar/Pipe Use: N

Chewing tobacco: none

Alcohol intake: Occasional

Hand Dominance: Right

Surgical History

Reviewed Surgical History

Spine Surgery - C-Spine

Hernia Repair

Appendectomy

Cystoscopy - Multiple

Knee arthroscopy/surgery - Bil. Knee Scopes

Wrist arthroscopy/surgery - Lt Wrist/Forearm

Spine Surgery

Open reduction internal fixation, distal fibula (surg) - 11/07/2017

Past Medical History

Reviewed Past Medical History

Anxiety: Y

Depression: Y

Diabetes: Y

Fracture: Y

High Blood Pressure: Y

Kidney Stones: Y

Migraines: Y

Panic Attacks: Y

Sleep Apnea: Y

Screening

None recorded.

HPI

Ankle7388

Reported by patient.

Location: left

Quality: not changing

Severity: severe; pain level 8/10

Alleviating Factors: orthotics (CAM Walker)

Aggravating Factors: standing; walking; ROM; weightbearing

Previous Surgery: none

Prior Imaging: x ray

Work Related: yes

Working: no

Notes: Pt presents for PO of LT ankle fx. Pt reports he is in a lot of pain still.

58 year old male returns 2 weeks following ORIF of the left lateral malleolar nonunion. He has been having pain. He denies any fevers, chills, drainage or shortness of breath.

ROS

Patient reports muscle aches, muscle weakness, and arthralgias/joint pain. He reports no fever. He reports no irritation. He reports no difficulty hearing. He reports no nose/sinus problems. He reports no sore throat. He reports no chest pain. He reports no cough. He reports no abdominal pain, no vomiting, and no diarrhea. He reports no jaundice and no rashes. He reports no loss of consciousness. He reports no fatigue. He reports no swollen glands. He reports no runny nose, no sinus pressure, no hives, and no frequent sneezing.

Physical Exam

Patient is a 58-year-old male.

Post Operative Exam: General Appearance: swelling, tenderness, passive motion limited, and active motion limited and wound clean and dry, no warmth, and neurovascular intact.

Assessment / Plan

MISURACA, PAUL

58 year old male 2 weeks following repair of a left lateral malleolus nonunion with bone grafting. Stitches were removed. Steri strips placed. He was immobilized in a SLC. He will start using the bone stimulator. He will remain nwb. He will return in 4 weeks with repeat xrays of the left ankle nwb out of the cast,

1. Closed fracture of lateral malleolus

S82.61XK: Displaced fracture of lateral malleolus of right fibula, subsequent encounter for closed fracture with nonunion

WORK STATUS REPORT -

Note to Provider:

LCO Workcomp Dep Fax Number: 843-793-5442

Date of Injury: 02/16/2017

Next Follow up appt: 12/19/2017 @ 0935 am

(X) Work Related () Not Work Related

() Regular Duty () Modified Duty

() Sedentary Duty<10lbs wt lifting (X) Off work

() 0lbs () 1-15lbs () 16-35 lbs () 36-50 lbs wt lifting restrictions

() R (X) L () B

Climbing, Bending, Stooping: () Never () Occasional () Frequent

Standing, Walking: () Never () Occasional () Frequent

Overhead Work: () Never () Occasional () Frequent

Driving: () Yes () No

Alternate between sit/stand: ()

Comments: Mr. Misuraca is to remain out of work until f/u visit.

MMI: () Yes () No Date of MMI:

*Occasionally is defined as up to one third of the time (33%); 1-4 times per hour

*Frequently is defined as up to one third to two thirds (34-66%); 5-12 times per hour

*Constantly is defined as over two thirds (67-100%) of the time

2. Ankle pain

M25.572: Pain in left ankle and joints of left foot

XR, ANKLE

XR, ANKLE

Review of xr, ankle taken on 11/21/2017 at LOWCOUNTRY ORTHOPAEDICS & SPORTS MED (N CHARLESTON) shows:

Ankle:

Side: left.

Views: ap, lateral, and mortise.

s/p ORIF of left lateral malleolus. Good alignment. No medial clear space widening. No syndesmosis widening. No signs of hardware failure or loosening.

Return to Office

William S. Corey, MD for RECHECK 10 at LCO_Tricom on 12/19/2017 at 09:35 AM

Encounter Sign-Off

Encounter signed-off by William S. Corey, MD, 11/21/2017.

Encounter performed and documented by William S. Corey, MD

Encounter reviewed & signed by William S. Corey, MD on 11/21/2017 at 2:52pm

Encounter Date: 11/03/2017

Patient

Name

MISURACA, PAUL (58yo, M) ID#

Appt. Date/Time

11/03/2017 01:30PM

DOB

Service Dept.

LCO_Tricom

Provider

MADISON M. MORIN, PA-C

Insurance

Med Worker's Comp: ARIEL TPA

Policy/Group # :

Referring Provider Name : BOYD, COLLEEN

MISURACA, PAUL

Employer Name: CHARLESTON COUNTY SHERIFFS OFFICE

Case #:

Case Injury Date: 02/16/2017

Prescription: check now

Chief Complaint

Followup: Closed fracture of lateral malleolus

Patient's Care Team

Insurance Adjuster (Worker's Comp): JOHN SNELLING: Ph (912) 200-3183, Fax (803) 365-0098

Referring Provider (Worker's Comp): BOYD, COLLEEN: 4600 GOER ROAD, SUITE 205, CHARLESTON, SC 29406, Ph 843-554-1029, Fax 843-554-1103

Patient's Pharmacies

BILO PHARMACY 5726 (ERX): 1000 TANNER FORD BLVD, HANAHAN SC 29410, Ph (843) 553-4077, Fax (843) 553-5889

Vitals

Ht: 6 ft 11/03/2017
01:29 pm

Wt: 235 lbs 11/03/2017
01:35 pm

BMI: 31.9 11/03/2017
01:35 pm

BP: 104/70 sitting
11/03/2017 01:35
pm

Pulse: 81 bpm 11/03/2017
01:35 pm

Pain Scale: 9 11/03/2017 01:29
pm

Pain Scale Type: Numeric
11/03/2017 01:29
pm

Allergies

Reviewed Allergies

TRAZODONE

Medications

Reviewed Medications

atorvastatin 80 mg tablet

09/23/17 filled

butalbital-acetaminophen-caffeine 50 mg-325 mg-40 mg tablet

07/17/17 filled

clonazepam 1 mg tablet

10/09/17 filled

ergocalciferol (vitamin D2) 50,000 unit capsule

08/29/17 filled

Fluarix Quad 2017-2018 (PF) 60 mcg (15 mcg x 4)/0.5 mL IM syringe

08/30/17 filled

FLUoxetine 40 mg capsule

10/09/17 filled

fluticasone 50 mcg/actuation nasal spray, suspension

08/14/17 filled

glipizide 5 mg tablet

10/17/17 filled

Imitrex 50 mg tablet

Take by oral route.

Internal Note: PRN

03/03/17 entered

levothyroxine 75 mcg tablet

10/10/17 filled

Lyrica 300 mg capsule

10/05/17 filled

metFORMIN 1,000 mg tablet

09/23/17 filled

nortriptyline 10 mg capsule

10/16/17 filled

10/09/17 filled

10/09/17 filled

08/24/16 filled

09/22/17 filled

Reviewed Vaccines

Vaccine Type	Date	Amt.	Route	Site	Lot #	Mfr.	Exp. Date	VIS	Vaccinator
							Date on VIS Given		
Influenza									
Influenza, injectable, quadrivalent	08/30/17								

Reviewed Problems

- Closed fracture of lateral malleolus - Onset: 03/13/2017

Reviewed Family History

None Reported.

Reviewed Social History

Smoking Status: Former smoker

Non-smoker

Cigar/Pipe Use: N

Chewing tobacco: none

Alcohol intake: Occasional

Hand Dominance: Right

Reviewed Surgical History

Spine Surgery - C-Spine

Hernia Repair

Appendectomy

Cystoscopy - Multiple

Knee arthroscopy/surgery - Bil. Knee Scopes

Wrist arthroscopy/surgery - Lt Wrist/Forearm

Spine Surgery

Reviewed Past Medical History

Anxiety: Y

Depression: Y

Diabetes: Y

Fracture: Y

High Blood Pressure: Y

Kidney Stones: Y

Migraines: Y

Panic Attacks: Y

Sleep Apnea: Y

None recorded.

HPI

Ankle7388

Reported by patient.

Location: left

Quality: not changing

Severity: severe; pain level 9/10

Alleviating Factors: orthotics (CAM Walker)

Aggravating Factors: standing; walking; ROM; weightbearing

City Orthopedics Number of 11/7/17
11/7/17
MISURACA, PAUL

Previous Surgery: none

Prior Imaging: x ray

Work Related: yes

Working: no

Notes: Pt. presents today for Pre-op Lt ankle scheduled for 11/7/17 @ TMC.

58 year-old male with left distal fibula nonunion from injury February 2017 confirmed on CT. He is scheduled for ORIF and bonegrafting. Reports reaction to trazodone causing nightmares. Otherwise NKDA. No latex allergy. PMH includes HTN, HPLD, Diabetes mellitus (A1C 6.4 on metformin and glipizide), Depression, Anxiety, panic attacks, migraines, kidney stones, Hypothyroidism, Sleep apnea (on CPAP), and Vitamin D insufficiency- all managed on medications. Patient's Vitamin D level was 23 on 07/24/2017. He was seen by endocrinologist and started on Vitamin D 2000 ius daily, Calcium supplementation 1200mg daily, and Fortesta gel. He takes Oxycodone 10mg prn for chronic back pain, prescribed by Dr. Mahoney and Lyrica for nerve pain. Patient denies, fever, chills, shortness of breath, chest pain, HA, or dizziness.

ROS

Patient reports muscle aches, muscle weakness, and arthralgias/joint pain. He reports no fever. He reports no irritation. He reports no difficulty hearing. He reports no nose/sinus problems. He reports no sore throat. He reports no chest pain. He reports no cough. He reports no abdominal pain, no vomiting, and no diarrhea. He reports no jaundice and no rashes. He reports no loss of consciousness. He reports no fatigue. He reports no swollen glands. He reports no runny nose, no sinus pressure, no hives, and no frequent sneezing.

Physical Exam

Patient is a 58-year-old male.

Constitutional: General Appearance: healthy-appearing and NAD.

Psychiatric: Orientation: oriented to time, place, and person. Mood and Affect: normal mood and affect and active and alert.

Cardiovascular System: Arterial Pulses Left: posterior tibialis normal and dorsalis pedis normal.

Gait and Station: Appearance: ambulating with crutches.

Ankles and Feet: Inspection Left: no erythema, induration, warmth, or deformity and swelling. Bony Palpation of the Ankle/Foot Left: no tenderness of the metatarsals or the tarsometatarsal joints and tenderness of the lateral ankle. Soft Tissue Palpation of the Ankle/Foot Left: no tenderness of the deltoid ligament. Active Range of Motion Left: plantar flexion normal and dorsiflexion (-10 deg.). Strength Left: tibialis anterior (5/5) and gastrocnemius (5/5); unable to assess due to pain.

Neurological System: Sensation on the Left: normal distal extremities.

Skin: Right Lower Extremity: normal.

Heart: regular rate and rhythm

Lungs: CTABL

Assessment / Plan

58 year old male with left distal fibula nonunion confirmed on CT from injury February 2017. Discussed post-op protocol with the patient and all of his questions were answered. He was given an informational handout. Patient was given a knee scooter and has crutches. Follow up 2 weeks post-op with Dr. Corey. Contacted Dr. Mahoney concerning post-op pain management. Call with questions.

The patient's history, physical exam findings, diagnosis, and recommended treatments were discussed with Dr. Corey who was in agreement with the plan outlined above.

1. Ankle pain - Left

M25.572: Pain in left ankle and joints of left foot

• KNEE SCOOTER - HCPCS: E0118, RR Use as directed Dispense Qty: 1 Unit

Duration/Estimated Length of Need: 6 weeks Side: LEFT

Size: Universal

Supply Replacement Duration: As needed

HCPCS code: E0118,RR

Quantity: 1

This DME is medically necessary due to: Surgery/NWB

2. Closed fracture of lateral malleolus

S82.65XK: Nondisplaced fracture of lateral malleolus of left fibula, subsequent encounter for closed fracture with nonunion

• BROKEN ANKLE: CARE INSTRUCTIONS

• BONE GROWTH STIMULATOR - Qty: 1 Unit Refills: 0 Supplier: N/A

MISURACA, PAUL [REDACTED]

Discussion Notes

He understands the risks and benefits of surgery. The risks include but are not limited to bleeding, infection, nerve damage, blood vessel damage, nonunion, malunion, need for further surgery, blood clots and risk of anesthesia. He understands these risks and signed a surgical consent.

Return to Office

- William S. Corey, MD for Surgery at LCO_TMC Surgery on 11/07/2017 at 01:00 PM
- William S. Corey, MD for Post Operative at LCO_Tricom on 11/21/2017 at 10:15 AM

Encounter Sign-Off

Encounter signed-off by William S. Corey, MD, 11/06/2017.

Encounter performed and documented by Madison M. Morin, PA-C

Encounter reviewed & signed by William S. Corey, MD on 11/06/2017 at 8:43am

Encounter Date: 08/04/2017

Patient

Name MISURACA, PAUL (58yo, M) ID# [REDACTED] Appt. Date/Time 08/04/2017 08:40AM

DOB [REDACTED]

Provider

WILLIAM S. COREY, MD

Service Dept. LCO_Tricom

Insurance

Med Worker's Comp: ARIEL TPA

Policy/Group #: [REDACTED]

Referring Provider Name: BOYD, COLLEEN

Employer Name: CHARLESTON COUNTY SHERIFFS OFFICE

Case #: [REDACTED]

Case Injury Date: 02/16/2017

Prescription: ESI1 - Member is eligible. details

Prescription: ESI1 - Member is eligible. details

Chief Complaint

Followup: Closed fracture of lateral malleolus

Patient's Care Team

Insurance Adjuster (Worker's Comp): JOHN SNELLING: Ph (912) 200-3183, Fax (803) 365-0098

Referring Provider (Worker's Comp): BOYD, COLLEEN. 4600 GOER ROAD, SUITE 205, CHARLESTON, SC 29406, Ph 843-554-1029, Fax: 843-554-1103

Patient's Pharmacies

BILO PHARMACY 5726 (ERX): 1000 TANNER FORD BLVD, HANAHAN SC 29410, Ph (843) 553-4077, Fax (843) 553-5889

Vitals

Ht: 6 ft 08/04/2017
08:28 am

Wt: 239 lbs 08/04/2017
08:28 am

BMI: 32.4 08/04/2017
08:28 am

BP: 134/75 sitting
08/04/2017 08:32
am

Pulse: 101 bpm
08/04/2017 08:32
am

Allergies

Reviewed Allergies

TRAZODONE

Medications

Reviewed Medications

atorvastatin 80 mg tablet

06/26/17 filled

butalbital-acetaminophen-caffeine 50 mg-325 mg-40 mg tablet

07/17/17 filled

diazepam 10 mg tablet

03/22/16 filled

MJSURACA, PAUL

fluticasone 50 mcg/actuation nasal spray, suspension

06/06/17 filled

glipizIDE 5 mg tablet

07/29/17 filled

ibuprofen 400 mg tablet

01/09/17 filled

Imitrex 50 mg tablet

Take by oral route.

03/03/17 entered

metFORMIN 500 mg tablet

Take 1 tablet(s) twice a day by oral route.

03/03/17 entered

prazosin 2 mg capsule

09/30/16 filled

QUEtiapine 100 mg tablet

Take 1 tablet(s) twice a day by oral route.

03/03/17 entered

sertraline

03/03/17 entered

Topamax 100 mg tablet

08/24/16 filled

Viagra 100 mg tablet

03/14/17 filled

Vitamin D3 1,000 unit capsule

10/03/16 filled

Vaccines

None recorded.

Problems

Reviewed Problems

- Closed fracture of lateral malleolus - Onset: 03/13/2017

Family History

Reviewed Family History

None Reported.

Social History

Reviewed Social History

Smoking Status: Current every day smoker

Smoker (1 PPW)

Cigar/Pipe Use N

Chewing tobacco: none

Alcohol intake: Occasional

Hand Dominance: Right

Surgical History

Reviewed Surgical History

Past Medical History

Reviewed Past Medical History

Anxiety: Y

Depression: Y

Diabetes: Y

Fracture: Y

High Blood Pressure: Y

Kidney Stones: Y

Migraines: Y

Panic Attacks: Y

Sleep Apnea: Y

Screening

None recorded.

MISURACA, PAUL

HPI

Ankle 7388

Reported by patient.

Location: left

Quality: not changing

Severity: severe; pain level 8/10

Alleviating Factors: orthotics (CAM Walker)

Aggravating Factors: standing, walking, ROM, weightbearing

Work Related: yes

Working: no

Notes: Patient in for follow up on Left ankle to discuss sx options, and discuss bloodwork

58 year old diabetic male with a nonunion of his left lateral malleolus. He continues to have pain. He had his labs done.

ROS

Patient reports muscle aches, muscle weakness, and arthralgias/joint pain. He reports no fever. He reports no irritation. He reports no difficulty hearing. He reports no nose/sinus problems. He reports no sore throat. He reports no chest pain. He reports no cough. He reports no abdominal pain, no vomiting, and no diarrhea. He reports no jaundice and no rashes. He reports no loss of consciousness. He reports no fatigue. He reports no swollen glands. He reports no runny nose, no sinus pressure, no hives, and no frequent sneezing.

Physical Exam

Patient is a 58-year-old male

Constitutional: General Appearance: healthy-appearing and NAD

Psychiatric: Orientation: oriented to time, place, and person. Mood and Affect: normal mood and affect and active and alert.

Cardiovascular System: Arterial Pulses Left: posterior tibialis normal and dorsalis pedis normal.

Gait and Station: Appearance: ambulating with crutches.

Ankles and Feet: Inspection Left: no deformity and swelling. Bony Palpation of the Ankle/Foot Left: no tenderness of the metatarsals or the tarsometatarsal joints and tenderness of the lateral ankle. Soft Tissue Palpation of the Ankle/Foot Left: no tenderness of the deltoid ligament. Active Range of Motion Left: plantar flexion normal and dorsiflexion (-10 deg.). Strength Left: unable to assess due to pain.

Neurological System: Sensation on the Left: normal distal extremities.

Skin: Right Lower Extremity: normal.

Assessment / Plan

58 year old male with a nonunion of his left lateral malleolus. He had Vitamin D insufficiency. He will be sent for an endocrinology consult. He will require ORIF of the nonunion with possible bone grafting.

1. Closed fracture of lateral malleolus

S82.65XG: Nondisplaced fracture of lateral malleolus of left fibula, subsequent encounter for closed fracture with delayed healing

• BROKEN ANKLE: CARE INSTRUCTIONS

• WORK STATUS REPORT -

Note to Provider:

LCO Workcomp Dep Fax Number: 843-793-5442

Date of Injury: 2/16/17

Next Follow up appt:

(XX) Work Related () Not Work Related

() Regular Duty () Modified Duty

() Sedentary Duty <10lbs wt lifting (XX) OUT of Work—Surgery being scheduled

() 0lbs () 1-15lbs () 16-35 lbs () 36-50 lbs wt lifting restrictions

() R (XX) Left ankle () B

Climbing, Bending, Stooping: () Never () Occasional () Frequent
Standing, Walking: () Never () Occasional () Frequent

MISURACA, PAUL

Overhead Work: () Never () Occasional () Frequent
Driving: () Yes () No
Alternate between sit/stand: ()

Comments: Endocrinology consult

MMI: () Yes (XX) No Date of MMI:

*Occasionally is defined as up to one third of the time (33%); 1-4 times per hour
*Frequently is defined as up to one third to two thirds (34-66%); 5-12 times per hour
*Constantly is defined as over two thirds (67-100%) of the time

• ENDOCRINOLOGY REFERRAL - Schedule Within: provider's discretion
Reason for Referral: Low Vitamin D

Return to Office
None recorded.

Encounter Sign-Off

Encounter signed-off by William S. Corey, MD, 08/04/2017

Encounter performed and documented by William S. Corey, MD
Encounter reviewed & signed by William S. Corey, MD on 08/04/2017 at 9:26am

Encounter Date: 07/21/2017

Patient

Name MISURACA, PAUL (58yo, M) ID# Appt. Date/Time 07/21/2017 09:20AM
DOB Service Dept. LCO Tricom
Provider WILLIAM S. COREY, MD
Insurance Med Worker's Comp: ARIEL TPA
Policy/Group # :
Referring Provider Name : BOYD, COLLEEN
Employer Name : CHARLESTON COUNTY SHERIFFS OFFICE
Case # :
Case Injury Date : 02/16/2017
Prescription: check now

Chief Complaint

Left Ankle problem

Patient's Care Team

Insurance Adjuster (Worker's Comp): JOHN SNELLING: Ph (912) 200-3183, Fax (803) 365-0098
Referring Provider (Worker's Comp): BOYD, COLLEEN: 4600 GOER ROAD, SUITE 205, CHARLESTON, SC 29406, Ph 843-554-1029, Fax 843-554-1103

Patient's Pharmacies

BILO PHARMACY 5726 (ERX): 1000 TANNER FORD BLVD, HANAHAN SC 29410, Ph (843) 553-4077, Fax (843) 553-5889

Vitals

Ht: 6 ft 07/21/2017
09:12 am

Wt: 239 lbs 07/21/2017
09:12 am

BMI: 32.4 07/21/2017
09:12 am

BP: 108/75 sitting
07/21/2017 09:15
am

Pulse: 100 bpm
07/21/2017 09:15
am

Allergies

Reviewed Allergies
TRAZODONE

Medications

Reviewed Medications

atorvastatin 80 mg tablet

06/26/17 filled

MISURACA, PAUL

butalbital-acetaminophen-caffeine 50 mg-325 mg-40 mg tablet	07/17/17 filled
diazepam 10 mg tablet	03/22/16 filled
fluticasone 50 mcg/actuation nasal spray,suspension	06/06/17 filled
glipizide 5 mg tablet	05/22/17 filled
ibuprofen 400 mg tablet	01/09/17 filled
Imitrex 50 mg tablet Take by oral route.	03/03/17 entered
metFORMIN 500 mg tablet Take 1 tablet(s) twice a day by oral route.	03/03/17 entered
prazosin 2 mg capsule	09/30/16 filled
QUetiapine 100 mg tablet Take 1 tablet(s) twice a day by oral route.	03/03/17 entered
sertraline	03/03/17 entered
Topamax 100 mg tablet	08/24/16 filled
Viagra 100 mg tablet	03/14/17 filled
Vitamin D3 1,000 unit capsule	10/03/16 filled

Vaccines

None recorded.

Problems

Reviewed Problems

- Closed fracture of lateral malleolus - Onset: 03/13/2017

Family History

Reviewed Family History

None Reported.

Social History

Reviewed Social History

Smoking Status: Current every day smoker

Smoker (1 PPW)

Cigar/Pipe Use: N

Chewing tobacco: none

Alcohol intake: Occasional

Hand Dominance: Right

Surgical History

Reviewed Surgical History

Past Medical History

Reviewed Past Medical History

Anxiety: Y

Depression: Y

Diabetes: Y

Fracture: Y

High Blood Pressure: Y

Kidney Stones: Y

Migraines: Y

MISURACA, PAUL

Panic Attacks: Y

Sleep Apnea: Y

Screening

None recorded.

HPI

Ankle 7388

Reported by patient.

Location: left

Quality: not changing

Severity: severe; pain level 8/10

Aggravating Factors: standing; walking; ROM; weightbearing

Work Related: yes

Working: no

Notes: Patient in for follow up on Left ankle C.T. Scan Patient reports he is still having pain in his ankle, he is unable to put any pressure on this ankle.

58 year old diabetic male returns 5 months following closed management of a left lateral malleolus fracture. He continues to have pain.

ROS

Patient reports muscle aches, muscle weakness, and arthralgias/joint pain. He reports no fever. He reports no irritation. He reports no difficulty hearing. He reports no nose/sinus problems. He reports no sore throat. He reports no chest pain. He reports no cough. He reports no abdominal pain, no vomiting, and no diarrhea. He reports no jaundice and no rashes. He reports no loss of consciousness. He reports no fatigue. He reports no swollen glands. He reports no runny nose, no sinus pressure, no hives, and no frequent sneezing.

Physical Exam

Patient is a 58-year-old male.

Constitutional: General Appearance: healthy-appearing and NAD.

Psychiatric: Orientation: oriented to time, place, and person. Mood and Affect: normal mood and affect and active and alert.

Cardiovascular System: Arterial Pulses Left: posterior tibialis normal and dorsalis pedis normal.

Gait and Station: Appearance: ambulating with crutches.

Ankles and Feet: Inspection Left: no deformity and swelling. Bony Palpation of the Ankle/Foot Left: no tenderness of the metatarsals or the tarsometatarsal joints and tenderness of the lateral ankle. Soft Tissue Palpation of the Ankle/Foot Left: no tenderness of the deltoid ligament. Active Range of Motion Left: plantar flexion normal and dorsiflexion (-10 deg.). Strength Left: unable to assess due to pain.

Neurological System: Sensation on the Left: normal distal extremities.

Skin: Right Lower Extremity: normal.

Assessment / Plan

58 year old male whose CT scan shows delayed union of a left lateral malleolus fracture. He will be sent for labs to include Ca, Vit D, Hgb A1C. He will require repair of a with bone grafting.

1. Ankle pain

M25.572: Pain in left ankle and joints of left foot

• WORK STATUS REPORT -

Note to Provider:

LCO Workcomp Dep Fax Number: 843-793-5442

Date of Injury: 02/16/2017

Next Follow up appt: f/u after Labs

(X) Work Related () Not Work Related

() Regular Duty () Modified Duty

() Sedentary Duty <10lbs wt lifting (X) Off work

() 0lbs () 1-15lbs () 16-35 lbs () 36-50 lbs wt lifting restrictions

MISURACA, PAUL

() R (X) L () B

Climbing, Bending, Stooping: () Never () Occasional () Frequent

Standing, Walking: () Never () Occasional () Frequent

Overhead Work: () Never () Occasional () Frequent

Driving: () Yes () No

Alternate between sit/stand: ()

Comments: Mr. Misuraca is to remain out of work until f/u visit.

MMI: () Yes () No Date of MMI:

*Occasionally is defined as up to one third of the time (33%); 1-4 times per hour

*Frequently is defined as up to one third to two thirds (34-66%); 5-12 times per hour

*Constantly is defined as over two thirds (67-100%) of the time

Side: LEFT

2. Closed fracture of lateral malleolus

S82.65XG: Nondisplaced fracture of lateral malleolus of left fibula, subsequent encounter for closed fracture with delayed healing

BROKEN ANKLE: CARE INSTRUCTIONS

Return to Office

None recorded.

Encounter Sign-Off

Encounter signed-off by William S. Corey, MD, 07/24/2017.

Encounter performed and documented by William S. Corey, MD

Encounter reviewed & signed by William S. Corey, MD on 07/24/2017 at 9:41am

Clinical Documents

POST OPERATIVE HOSPITAL ORDERS, FOOT/ANKLE SURGERY - 11/08/2017

TRIDENT MEDICAL CENTER
9330 MEDICAL PLAZA DRIVE
CHARLESTON, SC 29406

NAME: MISURACA, PAUL L

UNIT#: [REDACTED]

Adm Date: 11/07/17

Dictated By: Corey, William S MD

ROOM #: [REDACTED]

Acc #: [REDACTED]

Report Name: OPERATIVE REPORT

DATE OF PROCEDURE: 11/07/2017

SURGEON:

William S Corey, MD

PREOPERATIVE DIAGNOSIS:

Left lateral malleolar nonunion.

POSTOPERATIVE DIAGNOSIS:

Left lateral malleolar nonunion.

PROCEDURE PERFORMED:

Three-views intraoperative interpretation of left ankle.

DESCRIPTION OF PROCEDURE:

AP, lateral, and oblique of the left ankle were performed, which showed appropriate fixation of the fibular nonunion with appropriate positioning of length of the hardware. No medial clear space widening, no syndesmosis widening.

MISURACA, PAUL ([REDACTED])

Dictated By: William S Corey, MD

WSC:MODL

D: 11/07/2017 14:59:02 / T: 11/07/2017 16:41:15

Voice ID: 502502 / Job ID: 764438164

Authenticated by WILLIAM COREY MD on 11/08/2017 02:40:35 PM

Electronically Signed by William S Corey, MD on 11/08/17 at 1540

Patient Name: MISURACA, PAUL L

Account #: [REDACTED]

OPEN REDUCTION INTERNAL FIXATION, DISTAL FIBULA (SURG) - 11/08/2017

TRIDENT MEDICAL CENTER
9330 MEDICAL PLAZA DRIVE
CHARLESTON, SC 29406

NAME: MISURACA, PAUL L

ROOM #: [REDACTED]

UNIT#: [REDACTED]

Acc #: [REDACTED]

Adm Date: 11/07/17

Dictated By: Corey, William S MD

Report Name: OPERATIVE REPORT

DATE OF PROCEDURE: 11/07/2017

SURGEON:

William S Corey, MD

PREOPERATIVE DIAGNOSIS:

Left lateral malleolus nonunion.

POSTOPERATIVE DIAGNOSIS:

Left lateral malleolus nonunion.

PROCEDURES PERFORMED:

1. Repair of nonunion left distal fibula.
2. Small bone grafting from the calcaneus.

ASSISTANT:

Madison M Morin, PAC.

Physician's assistant was needed for the entire procedure to help with positioning, soft tissue dissection, retraction, debridement of the nonunion, bone grafting, and a hardware placement.

ANESTHESIA:

Dr. Fiorillo with popliteal nerve block plus general.

ESTIMATED BLOOD LOSS:

Minimal.

MISURACA, PAUL

TOURNIQUET TIME:
75 minute.

FLUIDS:

1000 mL.

SPECIMENS REMOVED:

None.

COMPLICATIONS:

None.

DISPOSITION:

To recovery room stable.

Patient Name: MISURACA, PAUL L

Account #: [REDACTED]

IMPLANTS:

Synthes 1/3 tubular locking plate.

INDICATIONS FOR SURGERY:

This is a 58-year-old male, who was injured at work suffering a fracture of his left lateral malleolus. He failed conservative management going onto nonunion. He was found to be have low vitamin D. He was sent for Endocrinology to get a workup and be placed on vitamin D. He understood the risks and benefits of surgery. The risks including, but not limited to, bleeding, infection, nerve damage, blood vessel damage, nonunion, malunion, blood clots, need for further surgery, and risk of anesthesia. He understood these risks and signed the surgical consent.

DESCRIPTION OF PROCEDURE:

The patient was identified in the preop holding area. The left lower extremity was identified and marked as correct operative site. He underwent popliteal nerve block by Anesthesia. He was transferred to the operating room and operating table. All bony prominences were well padded. He underwent general anesthesia. He received preoperative antibiotics per protocol. He was bumped up on the ipsilateral side using a bean bag. A tourniquet was placed on his left thigh. Left lower extremity was prepped and draped in usual sterile fashion. Surgical time-out was performed. Left ankle was determined to be the correct operative site. Left lower extremity was exsanguinated. Tourniquet was placed up to 250 mmHg. Surgical time-out was performed. Left ankle was determined to be the correct operative site.

Left lower extremity was exsanguinated and tourniquet was placed up to 250 mmHg.

I used a straight midline lateral incision centered over the fracture site. I used sharp and blunt dissection. I protected the superficial peroneal nerve throughout the entire procedure. I performed a longitudinal incision of the periosteum overlying the fibula. Soft tissue was elevated off the fracture site. The posterior aspect of the fracture found to be healed. Anterior fracture had a nonunion, which was debrided using a curette and rongeur. The subchondral bone was drilled using a K-wire.

Next, attention was made to the lateral heel. An oblique incision was made approximately 1 cm at the lateral heel. I used blunt dissection. I removed 3 dials of bone from the calcaneus.

Next, the coccygeal bone graft was placed into the nonunion site. We placed 2 Lag screws from anterior to posterior using standard AO technique, one-third tubular 6 hole locking plate by Synthes was contoured to the lateral aspect of the fibula. Nonlocking screw was placed proximal to the fracture bringing the plate down the bone. Then, the locking screw was placed proximally, 2 locking screws distally. The wound was copiously irrigated and closed using interrupted 2-0 Vicryl, 3-0 Vicryl, and 3-0 nylon suture. The patient's wounds were clean, dry, and dressed with sterile Xeroform, 4x4s, ABD, Webriil, and AO splint. The tourniquet was let down at 75 minutes. The patient was awakened and transferred to postop recovery in stable condition.

MISURACA, PAUL

WSC:MODL

Account #:

Voice ID: 502502 / Job ID: 764416411

Account #:

MISURACA, PAUL

Interpretation

Review of xr, ankle taken on 12/19/2017 at LOWCOUNTRY ORTHOPAEDICS & SPORTS MED (N CHARLESTON) shows:
Ankle:
Side: left.
Progressive healing of lateral malleolus s/p ORIF. Good reduction. No medial clear space widening. No syndesmosis widening.

XR, ANKLE 12/01/2017 - LEFT (#10921389)

Interpretation

Review of xr, ankle taken on 12/01/2017 at LOWCOUNTRY ORTHOPAEDICS & SPORTS MED (N CHARLESTON) shows:
Ankle:
Side: left.
Views: ap, lateral, and mortise.
In cast: Well reduced lateral malleolus fracture. Good reduction. Proper position and length of the hardware.
Progressive healing

XR, ANKLE 11/21/2017 (#10893035)

Interpretation

Review of xr, ankle taken on 11/21/2017 at LOWCOUNTRY ORTHOPAEDICS & SPORTS MED (N CHARLESTON) shows:
Ankle:
Side: left.
Views: ap, lateral, and mortise.
s/p ORIF of left lateral malleolus. Good alignment. No medial clear space widening. No syndesmosis widening. No signs of hardware failure or loosening.

CT LEFT ANKLE WITHOUT CONTRAST

(#10518323, Final, 07/18/2017 10:15am)

PATIENT: Misuraca, Paul

DOB:

MRN:

PHYSICIAN: Corey-S-William-SS-MD

EXAM DATE: 07/18/2017 10:15 A

EXAM: CT Left Ankle without Contrast

REASON FOR EXAM: Pain in left ankle and joints of left foot

TECHNIQUE: Helical CT of the left ankle. 1.25 mm collimation. Reformatted images in the sagittal and coronal plane. Total DLP 335.73 mGy-cm. CTDI vol 21.45 mGy.

COMPARISON: None.

FINDINGS: Age indeterminate oblique nondisplaced, intra-articular, fracture of the distal fibula, there is evidence for early bridging callus but persistent lucency along the central and distal aspect of the fracture. There is a partially incorporated anterior distal fibula 2.3 x 0.7 x 0.5 cm butterfly fragment, partially fused proximally but unfused distally. Less than 3 mm of articular step-off (axial images 50 and 52). Intact medial malleolus. The ankle joint is congruent.

No osteochondral lesions of the talar dome. Subtle lucency along the medial aspect of the navicular suggesting prominent vascular channel versus remote trauma. There is a 5 mm type I os naviculare noted. There is thickening of the anterior and posterior talofibular ligaments and the calcaneofibular ligament consistent with prior trauma and mild lateral ankle sprain. The deep fibers of the deltoid ligament not well seen on noncontrast CT appear grossly intact.

IMPRESSION:

1. Age indeterminate nondisplaced multipart intraarticular fracture of the distal fibula, with a partially incorporated anterior 2.3 x 0.7 x 0.5 cm butterfly fragment. No significant articular step-off.
2. By report, the injury was several months ago, the findings suggest delayed healing or partial nonunion fracture of the distal fibula.

Donald E Olofsson, DO

MISURACA, PAUL

DD: 07/19/2017 08:59 A

DT: 07/19/2017 09:22 A

Accession#: 08-2644265 VS#: 121353793 CS#: 2380644
cc:

Electronically Signed and Reviewed by
Donald E Olofsson, DO 07/19/2017 09:30 A

MISURACA, PAUL

Patient

Name MISURACA, PAUL (58yo, M) ID# Appt. Date/Time 07/14/2017 09:20AM

DOB

Provider

WILLIAM S. COREY, MD

Service Dept.

LCO_Tricom

Insurance

Med Worker's Comp: ARIEL TPA

Policy/Group # :

Referring Provider Name: BOYD, COLLEEN

Employer Name: CHARLESTON COUNTY SHERIFFS OFFICE

Case # :

Case Injury Date: 02/16/2017

Prescription: ESI1 - Member is eligible.

Prescription: ESI1 - Member is eligible.

Chief Complaint

Left Ankle problem

Patient's Care Team

Insurance Adjuster (Worker's Comp): JOHN SNELLING: Ph (912) 200-3183, Fax (803) 365-0098

Referring Provider (Worker's Comp): BOYD, COLLEEN 4600 GOER ROAD, SUITE 205, CHARLESTON, SC 29406, Ph 843-554-1029, Fax 843-554-1103

Patient's Pharmacies

BILO PHARMACY 5726 (ERX): 1000 TANNER FORD BLVD, HANAHAN SC 29410, Ph (843) 553-4077, Fax (843) 553-5889

Vitals

07/14/2017 09:12 am

Ht: 6 ft

Wt: 239 lbs

BMI: 32.4

BP: 110/68 sitting

Pulse: 99 bpm

Allergies

Reviewed Allergies

TRAZODONE

Medications

Reviewed Medications

atorvastatin 80 mg tablet

06/26/17 filled

diazepam 10 mg tablet

03/22/16 filled

fluticasone 50 mcg/actuation nasal spray, suspension

06/06/17 filled

glipizide 5 mg tablet

05/22/17 filled

ibuprofen 400 mg tablet

01/09/17 filled

Imitrex 50 mg tablet

03/03/17 entered

Take by oral route.

metFORMIN 500 mg tablet

03/03/17 entered

Take 1 tablet(s) twice a day by oral route.

prazosin 2 mg capsule

09/30/16 filled

QUetiapine 100 mg tablet

03/03/17 entered

Take 1 tablet(s) twice a day by oral route.

sertraline

03/03/17 entered

MISURACA, PAUL

Topamax 100 mg tablet	08/24/16 filled
Viagra 100 mg tablet	03/14/17 filled
Vitamin D3 1,000 unit capsule	10/03/16 filled

Vaccines

None recorded.

Problems

Reviewed Problems

- Closed fracture of lateral malleolus - Onset: 03/13/2017

Family History

Reviewed Family History

None Reported.

Social History

Reviewed Social History

Smoking Status: Current every day smoker

Smoker: (1 PPW)

Cigar/Pipe Use: N

Chewing tobacco: none

Alcohol intake: Occasional

Hand Dominance: Right

Surgical History

Reviewed Surgical History

Past Medical History

Reviewed Past Medical History

Anxiety: Y

Depression: Y

Diabetes: Y

Fracture: Y

High Blood Pressure: Y

Kidney Stones: Y

Migraines: Y

Panic Attacks: Y

Sleep Apnea: Y

Screening

None recorded.

HPI

Ankle 7388

Reported by patient.

Location: left

Quality: aching; throbbing; not changing

Severity: moderate; pain level 6/10

Timing: cannot identify

Alleviating Factors: rest; elevation

Aggravating Factors: standing; walking; ROM; weightbearing

Work Related: yes

Working: no

Notes: Patient reports he is still having ankle pain, states he is unable to put any weight on his left ankle, patient continues to wear his cam walker and using his Crutches.

58 year old male returns 4 1/2 months following closed management of a left lateral malleolus fracture. He notes it still hurts laterally with radiation proximally. He has remained in the CAM walker and has been unable to come off the crutches.

ROS

Patient reports no fever. He reports no irritation. He reports no difficulty hearing. He reports no nose/sinus problems. He reports no sore throat. He reports no chest pain. He reports no cough. He reports no abdominal pain, no vomiting, and no diarrhea. He reports no jaundice and no rashes. He reports no loss of consciousness. He reports no fatigue. He reports no

MISURACA, PAUL

swollen glands. He reports no runny nose, no sinus pressure, no hives, and no frequent sneezing.

Physical Exam

Patient is a 58-year-old male.

Constitutional: General Appearance: healthy-appearing and NAD.

Psychiatric: Orientation: oriented to time, place, and person. Mood and Affect: normal mood and affect and active and alert.

Cardiovascular System: Arterial Pulses Left: posterior tibialis normal and dorsalis pedis normal.

Gait and Station: Appearance: ambulating with crutches.

Ankles and Feet: Inspection Left: no deformity and swelling. Bony Palpation of the Ankle/Foot Left: no tenderness of the metatarsals or the tarsometatarsal joints and tenderness of the lateral ankle. Soft Tissue Palpation of the Ankle/Foot Left: no tenderness of the deltoid ligament. Active Range of Motion Left: plantar flexion normal and dorsiflexion (-10 deg.). Strength, Left: unable to assess due to pain

Neurological System: Sensation on the Left: normal distal extremities.

Skin: Right Lower Extremity: normal.

Assessment / Plan

58-year old male with continued pain 4 1/2 months following closed management of a left lateral malleolus fracture. He will be kept on sedentary duty. He will return after a CT of the left ankle.

1. Ankle pain

M25.572: Pain in left ankle and joints of left foot

• XR, ANKLE

• **WORK STATUS REPORT -**

Note to Provider:

LCO Workcomp Dep Fax Number: 843-793-5442

Date of Injury: 2/16/17

Next Follow up appt: After C.T. Scan

(X) Work Related () Not Work Related

() Regular Duty () Modified Duty

(x) Sedentary Duty <10lbs w/ lifting () Off work

() 0lbs () 1-15lbs () 16-35 lbs () 36-50 lbs w/ lifting restrictions

() R (X) L () B

Climbing, Bending, Stooping: (x) Never () Occasional () Frequent

Standing, Walking: () Never (x) Occasional as tolerated w/ CAM Boot & Crutches () Frequent

Overhead Work: () Never () Occasional () Frequent

Driving: () Yes () No

Alternate between sit/stand: ()

Comments:

MMI: () Yes () No Date of MMI:

*Occasionally is defined as up to one third of the time (33%); 1-4 times per hour

*Frequently is defined as up to one third to two thirds (34-66%); 5-12 times per hour

*Constantly is defined as over two thirds (67-100%) of the time

• **CT, ANKLE, W/O CONTRAST -**

Note to Imaging Facility:

73700

Height (ft.) 6'0

Side: LEFT

Special Instructions: Please give pt disk

Weight (lbs): 239

2. Closed fracture of lateral malleolus

S82.65XD: Nondisplaced fracture of lateral malleolus of left fibula, subsequent encounter for closed fracture with routine

MISURACA, PAUL [REDACTED]

- healing
- BROKEN ANKLE: CARE INSTRUCTIONS

XR, ANKLE

Review of xr, ankle taken on 07/14/2017 at LOWCOUNTRY ORTHOPAEDICS & SPORTS MED (N CHARLESTON) shows:

Ankle:

Side: left

Views: ap, lateral, and mortise.

Lateral malleolus fracture. Non displaced. Questionable healing. No medial clear space widening. No syndesmosis widening.

Return to Office

None recorded.

Encounter Sign-Off

Encounter signed-off by William S. Corey, MD, 07/14/2017.

Encounter performed and documented by William S. Corey, MD

Encounter reviewed & signed by William S. Corey, MD on 07/14/2017 at 9:37am

MISURACA, PAUL

Patient

Name MISURACA, PAUL (58yo, M) ID# Appt. Date/Time 06/30/2017 09:30AM

DOB

Provider WILLIAM S. COREY, MD Service Dept. LCO_Tricom

Insurance

Med Worker's Comp: ARIEL TPA
Policy/Group # :
Referring Provider Name: BOYD, COLLEEN
Employer Name: CHARLESTON COUNTY SHERIFFS OFFICE
Case # :
Case Injury Date: 02/16/2017
Prescription: ESI1 - Member is eligible.
Prescription: ESI1 - Member is eligible.

Chief Complaint

Left Ankle problem
Followup: Closed fracture of lateral malleolus

Patient's Care Team

Insurance Adjuster (Worker's Comp): JOHN SNELLING: Ph (912) 200-3183, Fax (803) 365-0098
Referring Provider (Worker's Comp): BOYD, COLLEEN: 4600 GOER ROAD, SUITE 205, CHARLESTON, SC 29406, Ph 843-554-1029, Fax 843-554-1103

Patient's Pharmacies

BILO PHARMACY 5726 (ERX): 1000 TANNER FORD BLVD, HANAHAN SC 29410, Ph (843) 553-4077, Fax (843) 553-5889

Vitals

Ht: 6 ft 11 in

Wt: 239 lbs

BMI: 32.4

BP: 99/68 sitting

Pulse: 114 bpm

Allergies

Reviewed Allergies

TRAZODONE

Medications

Reviewed Medications

atorvastatin 80 mg tablet	01/09/17 filled
diazepam 10 mg tablet	03/22/16 filled
glipizide 5 mg tablet	05/22/17 filled
ibuprofen 400 mg tablet	01/09/17 filled
Imitrex 50 mg tablet Take by oral route.	03/03/17 entered
metFORMIN 500 mg tablet Take 1 tablet(s) twice a day by oral route.	03/03/17 entered
prazosin 2 mg capsule	09/30/16 filled
QUetiapine 100 mg tablet Take 1 tablet(s) twice a day by oral route.	03/03/17 entered
sertraline	03/03/17 entered

MISURACA, PAUL

Topamax 100 mg tablet

08/24/16 filled

Viagra 100 mg tablet

03/14/17 filled

Vitamin D3 1,000 unit capsule

10/03/16 filled

Vaccines

None recorded.

Problems

Reviewed Problems

- Closed fracture of lateral malleolus - Onset: 03/13/2017

Family History

Reviewed Family History

None Reported.

Social History

Reviewed Social History

Smoking Status: Current every day smoker

Smoker (1-PPW)

Cigar/Pipe Use: N

Chewing tobacco: none

Alcohol intake: Occasional

Hand Dominance: Right

Surgical History

Reviewed Surgical History

Past Medical History

Reviewed Past Medical History

Anxiety: Y

Depression: Y

Diabetes: Y

Fracture: Y

High Blood Pressure: Y

Kidney Stones: Y

Migraines: Y

Panic Attacks: Y

Sleep Apnea: Y

Screening

None recorded.

HPI

Ankle7388

Reported by patient.

Location: left

Quality: aching; throbbing; frequent

Severity: moderate

Duration: date of onset: (2/16/17)

Context: work injury

Alleviating Factors: rest; elevation; limited weight bearing; crutches; CAM Boot

Aggravating Factors: standing; walking; weightbearing

Associated Symptoms: swelling (by the end of the day)

Previous Surgery: none

Prior Imaging: x ray

Work Related: yes

Working: no

Notes: Pt. presents today for f/u lt ankle.

58-year old male returns 3 months following closed management of a left lateral malleolus fracture. He has been immobilized in a CAM walker. He has yet to transition off of the crutches due to pain.

ROS

MISURACA, PAUL

Patient reports no fever. He reports no irritation. He reports no difficulty hearing. He reports no nose/sinus problems. He reports no sore throat. He reports no chest pain. He reports no cough. He reports no abdominal pain, no vomiting, and no diarrhea. He reports no jaundice and no rashes. He reports no loss of consciousness. He reports no fatigue. He reports no swollen glands. He reports no runny nose, no sinus pressure, no hives, and no frequent sneezing.

Physical Exam

Patient is a 58-year-old male.

Fracture Follow Up: General Appearance: skin in tact, neurovascular intact, capillary refill normal, and swelling.

tip of the left lateral malleolus. Limited motion

Assessment / Plan

58 year old male with a healing left lateral malleolus fracture 3 months following closed management. He was encouraged to transition off of the crutches. He will require sedentary work. He will return in 6 weeks with repeat xrays of the left ankle. At that point I would hope to transition him out of the CAM walker.

1. Ankle pain

M25.572: Pain in left ankle and joints of left foot

• **XR, ANKLE**

Side:
LEFT

• **WORK STATUS REPORT -**

Note to Provider:

LCO Workcomp Dep Fax Number: 843-793-5442

Date of Injury: 2/16/17

Next Follow up appt: 6 wks

(X) Work Related () Not Work Related

() Regular Duty () Modified Duty

(X) Sedentary Duty <10lbs wt lifting 5/31/17 () Off work

() 0lbs () 1-15lbs () 16-35 lbs () 36-50 lbs wt lifting restrictions

() R (X) L () B

Climbing, Bending, Stooping: (X) Never () Occasional () Frequent

Standing, Walking: () Never (X) Occasional as tolerated w/ CAM Boot & Crutches () Frequent

Overhead Work: () Never () Occasional () Frequent

Driving: () Yes () No

Alternate between sit/stand: ()

Comments:

MMI: () Yes () No Date of MMI:

*Occasionally is defined as up to one third of the time (33%); 1-4 times per hour

*Frequently is defined as up to one third to two thirds (34-66%); 5-12 times per hour

*Constantly is defined as over two thirds (67-100%) of the time

2. Closed fracture of lateral malleolus

S82.65XD: Nondisplaced fracture of lateral malleolus of left fibula, subsequent encounter for closed fracture with routine healing

XR, ANKLE

• **Side: LEFT**

Review of xr, ankle taken on 05/30/2017 at LOWCOUNTRY ORTHOPAEDICS & SPORTS MED (N CHARLESTON) shows:

Ankle:

Side: left.

Views: ap, lateral, and mortise.

Progressive healing of lateral malleolus fracture. No medial clear space widening. No syndesmosis widening.

Return to Office

- William S. Corey, MD for RECHECK 5 at LCO_Tricom on 07/14/2017 at 09:20 AM

Encounter Sign-Off

~~CONFIDENTIAL - FOR OFFICIAL USE ONLY~~
MISURACA, PAUL [REDACTED]

Encounter signed-off by William S. Corey, MD, 05/30/2017.

Encounter performed and documented by William S. Corey, MD

Encounter reviewed & signed by William S. Corey, MD on 05/30/2017 at 1:55pm

MISURACA, PAUL

Imaging Results

XR, ANKLE 05/30/2017 - LEFT (#10346982)

Interpretation	Review of xr, ankle taken on 05/30/2017 at LOWCOUNTRY ORTHOPAEDICS & SPORTS MED (N CHARLESTON) shows: Ankle: Side: left, Views: ap, lateral, and mortise. Progressive healing of lateral malleolus fracture. No medial clear space widening. No syndesmosis widening.

XR, ANKLE 04/28/2017 - LEFT (#9386266)

Interpretation	Review of xr, ankle taken on 04/28/2017 at LOWCOUNTRY ORTHOPAEDICS & SPORTS MED (N CHARLESTON) shows: Ankle: Side: left, Views: ap, lateral, and mortise. Progressive, incomplete healing of left lateral malleolus. No medial clear space widening. No syndesmosis widening.

XR, ANKLE 04/18/2017 (#9039058)

Interpretation	Healing minimally displaced lateral malleolus fracture. No interval displacement. No medial clear space widening. No syndesmosis widening.

MISURACA, PAUL

Patient
Name MISURACA, PAUL (58yo, M) ID# Appt. Date/Time 04/28/2017 02:30PM
DOB [REDACTED] Service Dept. LCO_Tricom
Provider WILLIAM S. COREY, MD
Insurance Med Worker's Comp: ARIEL TPA
Policy/Group #: [REDACTED]
Referring Provider Name: BOYD, COLLEEN
Employer Name: CHARLESTON COUNTY SHERIFFS OFFICE
Case #: [REDACTED]
Case Injury Date: 02/16/2017
Prescription: ES11 - Member is eligible.
Prescription: ES11 - Member is eligible.

Chief Complaint

Followup: Closed fracture of lateral malleolus

Patient's Care Team

Insurance Adjuster (Worker's Comp): JOHN SNELLING: Ph (912) 200-3183, Fax (803) 365-0098
Referring Provider (Worker's Comp): BOYD, COLLEEN: 4600 GOER ROAD, SUITE 205, CHARLESTON, SC 29406, Ph 843-554-1029, Fax 843-554-1103

Patient's Pharmacies

BILO PHARMACY 5726 (ERX): 1000 TANNER FORD BLVD, HANAHAN SC 29410, Ph (843) 553-4077, Fax (843) 553-5889

Vitals

HT: 6 ft 4 in (194 cm)

Wt: 239 lbs (108 kg)

BMI: 32.4 kg/m²

BP: 135/93 sitting
(04/28/2017 02:30 PM)

Pulse: 101 bpm (04/28/2017 02:30 PM)

Allergies

Reviewed Allergies

TRAZODONE

Medications

Reviewed Medications

atorvastatin 80 mg tablet	01/09/17 filled
diazepam 10 mg tablet	03/22/16 filled
glipizide 5 mg tablet	03/13/17 filled
ibuprofen 400 mg tablet	01/09/17 filled
Imitrex 50 mg tablet Take by oral route.	03/03/17 entered
metFORMIN 500 mg tablet Take 1 tablet(s) twice a day by oral route.	03/03/17 entered
prazosin 2 mg capsule	09/30/16 filled
QUETiapine 100 mg tablet Take 1 tablet(s) twice a day by oral route.	03/03/17 entered
sertraline	03/03/17 entered

MISURACA, PAUL

Topamax 100 mg tablet

08/24/16 filled

Viagra 100 mg tablet

03/14/17 filled

Vitamin D3 1,000 unit capsule

10/03/16 filled

Vaccines

None recorded.

Problems

Reviewed Problems

- Closed fracture of lateral malleolus - Onset: 03/13/2017

Family History

Reviewed Family History

None Reported.

Social History

Reviewed Social History

Smoking Status: Current every day smoker

Smoker (1 PPW)

Cigar/Pipe Use: N

Chewing tobacco: none

Alcohol intake: Occasional

Hand Dominance: Right

Surgical History

Reviewed Surgical History

Past Medical History

Reviewed Past Medical History

Anxiety: Y

Depression: Y

Diabetes: Y

High Blood Pressure: Y

Kidney Stones: Y

Migraines: Y

Panic Attacks: Y

Sleep Apnea: Y

Screening

None recorded.

HPI

Ankle7388

Reported by patient.

Location: left

Quality: aching; throbbing; frequent; worsening

Severity: moderate

Duration: date of onset: (2/16/17)

Context: work injury

Alleviating Factors: rest; elevation; limited weight bearing; crutches; CAM Boot

Aggravating Factors: standing; walking; weightbearing

Associated Symptoms: swelling (by the end of the day)

Previous Surgery: none

Prior Imaging: x ray

Work Related: yes

Working: no

Notes: Pt. presents today for increased pain of the lt ankle.

58 year-old male returns before his scheduled appointment due to worsening left ankle pain. He is 2 1/2 months out from conservative management of a left lateral malleolus fracture. He has been unable to bear weight in the CAM walker.

ROS

Patient reports no fever. He reports no irritation. He reports no difficulty hearing. He reports no nose/sinus problems. He reports no sore throat. He reports no chest pain. He reports no cough. He reports no abdominal pain, no vomiting, and no diarrhea. He reports no jaundice and no rashes. He reports no loss of consciousness. He reports no fatigue. He reports no

MISURACA, PAUL

swollen glands. He reports no runny nose, no sinus pressure, no hives, and no frequent sneezing.

Physical Exam

Patient is a 58-year-old male.

Fracture Follow Up: General Appearance: skin in tact, neurovascular intact, capillary refill normal, and swelling.

tip of the left lateral malleolus. Limited motion

Assessment / Plan

58 year old male with a healing left lateral malleolus fracture 2 1/2 months following conservative management. I encourage PT to work on ROM. I recommend on weight-bearing in the CAM walker. HE will keep his regularly scheduled appointment with repeat xrays of the left ankle nwb.

1. Ankle pain

M25.572: Pain in left ankle and joints of left foot

- XR, ANKLE

Side:

LEFT

2. Closed fracture of lateral malleolus

S82.65XD: Nondisplaced fracture of lateral malleolus of left fibula, subsequent encounter for closed fracture with routine healing

- WORK STATUS REPORT.

Note to Provider:

LCO Workcomp Dep Fax Number: 843-793-5442

Date of Injury: 2/16/17

Next Follow up appt: 5/30/16

(X) Work Related () Not Work Related

() Regular Duty () Modified Duty

() Sedentary Duty <10lbs wt lifting (X) Off work

() 0lbs () 1-15lbs () 16-35 lbs () 36-50 lbs wt lifting restrictions

() R (X) L () B

Climbing, Bending, Stooping: () Never () Occasional () Frequent

Standing, Walking: () Never () Occasional () Frequent

Overhead Work: () Never () Occasional () Frequent

Driving: () Yes () No

Alternate between sit/stand: ()

Comments: Mr. Misuraca is to remain out of work until f/u apt.

MMI: () Yes () No Date of MMI:

*Occasionally is defined as up to one third of the time (33%); 1-4 times per hour

*Frequently is defined as up to one third to two thirds (34-66%); 5-12 times per hour

*Constantly is defined as over two thirds (67-100%) of the time

XR, ANKLE

- Side: LEFT

Review of xr, ankle taken on 04/28/2017 at LOWCOUNTRY ORTHOPAEDICS & SPORTS MED (N CHARLESTON) shows:

Ankle:

Side: left.

Views: ap, lateral, and mortise.

Progressive, incomplete healing of left lateral malleolus. No medial clear space widening. No syndesmosis widening.

Return to Office

- William S. Corey, MD for RECHECK 5 at LCO_Tricom on 05/30/2017 at 09:30 AM

Encounter Sign-Off

Encounter signed-off by William S. Corey, MD, 04/29/2017.

Encounter performed and documented by William S. Corey, MD

Encounter reviewed & signed by William S. Corey, MD on 04/29/2017 at 8:37pm

MISURACA, PAUL

Patient
Name MISURACA, PAUL (58yo, M) ID# Appt. Date/Time 04/18/2017 09:55AM
DOB [REDACTED] Service Dept. LCO_Tricom
Provider WILLIAM S. COREY, MD
Insurance Med Worker's Comp: ARIEL TPA
Policy/Group #: [REDACTED]
Referring Provider Name: BOYD, COLLEEN
Employer Name: CHARLESTON COUNTY SHERIFFS OFFICE
Case #: [REDACTED]
Case Injury Date: 02/16/2017
Prescription: ESI1 - Member is eligible.
Prescription: ESI1 - Member is eligible.

Chief Complaint

Followup: Closed fracture of lateral malleolus

Patient's Care Team

Insurance Adjuster (Worker's Comp): JOHN SNELLING: Ph (912) 200-3183, Fax (803) 365-0098
Referring Provider (Worker's Comp): BOYD, COLLEEN: 4600 GOER ROAD, SUITE 205, CHARLESTON, SC 29406, Ph 843-554-1029, Fax 843-554-1103

Patient's Pharmacies

BILO PHARMACY 5726 (ERX): 1000 TANNER FORD BLVD, HANAHAN SC 29410, Ph (843) 553-4077, Fax (843) 553-5689

Vitals

Ht: 6 ft 0 in

Wt: 239 lbs

BMI: 32.4

BP: 119/80 sitting

Pulse: 86 bpm

Allergies

Reviewed Allergies

TRAZODONE

Medications

Reviewed Medications

atorvastatin 80 mg tablet 01/09/17 filled

diazepam 10 mg tablet 03/22/16 filled

glipizide 5 mg tablet 03/13/17 filled

HYDROcodone 5 mg-acetaminophen 325 mg tablet 03/10/17 filled
Take 1 tablet(s) every 6 hours by oral route as needed.

ibuprofen 400 mg tablet 01/09/17 filled

Imitrex 50 mg tablet 03/03/17 entered
Take by oral route.

metFORMIN 500 mg tablet 03/03/17 entered
Take 1 tablet(s) twice a day by oral route.

prazosin 2 mg capsule 09/30/16 filled

QUETiapine 100 mg tablet 03/03/17 entered
Take 1 tablet(s) twice a day by oral route.

MISURACA, PAUL

sertraline

03/03/17 entered

Topamax 100 mg tablet

08/24/16 filled

Viagra 100 mg tablet

03/14/17 filled

Vitamin D3 1,000 unit capsule

10/03/16 filled

Vaccines

None recorded.

Problems

Reviewed Problems

- Closed fracture of lateral malleolus - Onset: 03/13/2017

Family History

Reviewed Family History

None Reported.

Social History

Reviewed Social History

Smoking Status: Current every day smoker

Smoker (1 PPW)

Cigar/Pipe Use: N

Chewing tobacco: none

Alcohol intake: Occasional

Hand Dominance: Right

Surgical History

Reviewed Surgical History

Past Medical History

Reviewed Past Medical History

Anxiety: Y

Depression: Y

Diabetes: Y

High Blood Pressure: Y

Kidney Stones: Y

Migraines: Y

Panic Attacks: Y

Sleep Apnea: Y

Screening

None recorded.

HPI

Ankle7388

Reported by patient.

Location: left

Quality: aching; throbbing; frequent; worsening

Severity: moderate

Duration: date of onset: (2/16/17)

Context: work injury

Alleviating Factors: rest; elevation; limited weight bearing; narcotics; SLC; Knee Scooter

Aggravating Factors: standing; walking; weightbearing

Associated Symptoms: swelling (by the end of the day)

Previous Surgery: none

Prior Imaging: x ray

Work Related: yes

Working: no

Notes: Pt. presents today for f/u lt ankle. Pt. reports increased pain, which has caused him to have multiple anxiety attacks and increased depression.

58 year old male returns 6 weeks following closed management of a left lateral malleolus fracture. He has remained nwb in a

MISURACA, PAUL

SLC. He continues to have pain to the lateral left ankle. He believes the whole situation is causing worsening of his depression.
ROS

Patient reports no fever. He reports no irritation. He reports no difficulty hearing. He reports no nose/sinus problems. He reports no sore throat. He reports no chest pain. He reports no cough. He reports no abdominal pain, no vomiting, and no diarrhea. He reports no jaundice and no rashes. He reports no loss of consciousness. He reports no fatigue. He reports no swollen glands. He reports no runny nose, no sinus pressure, no hives, and no frequent sneezing.

Physical Exam

Patient is a 58-year-old male.

Fracture Follow Up: General Appearance: skin intact, neurovascular intact, capillary refill normal, and swelling.

Assessment / Plan

58 year old male with a healing left lateral malleolus fracture 6 weeks following closed management. He was fitted with a CAM walker and can start PWB with the goal of being FWB in 2 weeks. He was instructed on ROM exercises. He can work sedentary duty. He will return in 6 weeks with repeat xrays of the left ankle w/.

1. Closed fracture of lateral malleolus

S82.65XD: Nondisplaced fracture of lateral malleolus of left fibula, subsequent encounter for closed fracture with routine healing

- PHYSICAL THERAPY ANKLE REFERRAL - Schedule Within: provider's discretion Note to Provider: 6 weeks following closed management of left lateral malleolus fracture. ROM as tolerated. PWB with the goal of being FWB in 2 weeks. Boot for 6 more weeks. No strengthening for 6 weeks. 1-2 times a week for 12 weeks.

2. Ankle pain

M26.672: Pain in left ankle and joints of left foot

- XR, ANKLE - Note to Imaging Facility: 2 views

- WORK STATUS REPORT -

Note to Provider:

LCO Workcomp Dep Fax Number: 843-793-5442

Date of Injury: 2/24/17

Next Follow up appt: Tuesday, May 30, 2017 09:30 AM

(X) Work Related () Not Work Related

() Regular Duty () Modified Duty

(X) Sedentary Duty <10lbs wt lifting () Off work

() 0lbs () 1-15lbs () 16-35 lbs () 36-50 lbs wt lifting restrictions

() R (X) L () B

Climbing, Bending, Stooping: (X) Never () Occasional () Frequent

Standing, Walking: () Never (X) Occasional as tolerated () Frequent

Overhead Work: () Never () Occasional () Frequent

Driving: () Yes () No

Alternate between sit/stand: ()

Comments: Mr. Misuraca may return to sedentary position w/ above restrictions.

MMI: () Yes () No Date of MMI:

*Occasionally is defined as up to one third of the time (33%); 1-4 times per hour

*Frequently is defined as up to one third to two thirds (34-66%); 5-12 times per hour

*Constantly is defined as over two thirds (67-100%) of the time

- PNEUMATIC TALL WALKING BOOT - HCPCS: L4360 Pneumatic Walking Boot, Tall, Pre-Fab, Customized to Fit
Dispense Qty: 1 Unit
Duration/Estimated Length of Need: Side:
89 LEFT

XR, ANKLE

Healing minimally displaced lateral malleolus fracture. No interval displacement. No medial clear space widening. No syndesmosis widening.

Return to Office



ISLAND P.T., LLC

469 Coor Dr.
Suite 203
North Charleston, SC 29405
(843) 744-5517 (843) 746-9246 fax

1797 Main Rd
Johns Island, SC 29455
(843) 550-7859
(843) 550-2155 fax

1145 Savannah Hwy
Charleston, SC 29407
(843) 766-5505
(843) 766-5552 fax

90 Springview Lane
Suite B
Summerville, SC 29485
(843) 875-2959 (843) 875-2836 fax

Patient: Misuraca, Paul
DOB: [REDACTED]
Referred by: Dr. William Corey
Payor: One Care
D/C:aim/HIC 2017SCAC068413
Certification 2/27/2018 to 4/28/2018
Dr Dx: malice'ar malunion fracture

Treatment Date: 04/12/2018
Evaluation Date: 03/05/2018
Onset Date: 2017-02-16
Surgery Date: N/A
Away Until: N/A
Auth Visits: 10 of 36
Canx/NS: 1

Tx Dx: S82.61xK | Dispx of lateral malleolus of r fibula, 7thK

Comorbidities:
Precautions: N/A

Ankle Progress Evaluation

Subjective Findings: "It still hurts on the bottom and outside of my foot "

Pain Scale: 7/10

Medications: scanned into patients record

Functional: Cannot FWR on L LE due to foot and ankle pain.
Deficits:

Treatment Plan: PROM, AAROM, AROM, Resistance strengthening BAPS Board, balance training, Russian electric stimulation PROM, scar tissue massage, manual resistance strengthening, PNF, STW Step training, walking/gait training, lift/carry, standing tolerance Cold pack application, High Voltage Galvanic Electric Stimulation, Compression Techniques

Objective Findings:

	Initial Eval Findings								Re Eval Findings							
	AROM		PROM		PAIN		STRENGTH		AROM		PROM		PAIN		STRENGTH	
	R	L	R	L	R	L	R	L	R	L	R	L	R	L	R	L
Dorsiflexion	10	5				Y		3		5				Y		3+
Plantarflexion	50	40				Y		3-		40				Y		3
Inversion	35	35				Y		3+		35				Y		3+
Eversion	10	10				Y		3+		10				Y		3+
Great Toe	10	10				N		3+		10				N		3+

Assessment: Patient continues to have significant pain in left foot with any type of WB activity. Cannot fully bear weight on foot without walking on heel. is still in need of scooter in order to get around without significantly increased pain and gait dysfunction.

Paul Misuraca [REDACTED]

Page 1

ISLAND PT., LLC

4000 Coor Dr.
Suite 204
North Charleston, SC 29405
(843)744-5527 (843)746-9146 fax

1397 Main Rd
Johns Island, SC 29455
(843)550-7889
(843)550-1355 fax

1245 Savannah Hwy
Charleston, SC 29407
(843)766-6593
(843)766-6352 fax

99 Springview Lane
Suite B
Summerville, SC 29155
(843)875-2959 (843)875-2516 fax

Goals: Within four to six weeks:

1. Patient to wean off assisted devices pending bone healing. 2. Patient to achieve functional and range of motion measurements not in non weight-bearing. 3. Patient will be able to self manage edema with increasing activities. 4. Patient to begin increased compressive functional activities including stair climbing in balance training. 5. Patient will return to normal ADLs. 6. Patient progress to 50% of the non weight-bearing tolerance to return to normal gait activities.

Rationale for Continued Treatment: Patient needs continued PT in order to return to PLOF. I am concerned at this point however regarding the amount of pain that he is experiencing in his foot.

Comments:

Recommended Extension of the Plan of Care: rest of authorized visits

Duration:	Visits per week:	For:	Weeks

Thank you for your Referral.

Electronically Signed By: Caill'n Batten, DPT

License: 7146

Date: 4/12/2018

I certify that the above services are required for the patient's care.

Patient understands diagnosis/prognosis and consents to treatment plan and goals.

Referring Physician:

Dr. William Corey

Date

Patient: Misuraca, Paul

Date of Birth:

Paul Misuraca [REDACTED] #2717

Page 2

MISURACA, PAUL I

Page: 2/3 Date: 9/28/2018 2:09:32 AM

CHARLESTON SURGERY CENTER

an affiliate of **SCA**

OPERATIVE REPORT

PATIENT: MISURACA, PAUL

DOB: [REDACTED]

MR #: [REDACTED]

DATE: 09/27/2018

SURGEON:

CHRISTOPHER J. KESTNER, MD

ASSISTANT:

None.

ANESTHESIA:

General.

PREOPERATIVE DIAGNOSIS:

Left distal fibula nonunion.

POSTOPERATIVE DIAGNOSIS:

Left distal fibula nonunion.

PROCEDURE PERFORMED:

Removal of hardware, excision of nonunion and repair of lateral ligaments, left ankle.

ESTIMATED BLOOD LOSS:

Minimal.

TOURNIQUET TIME:

49 minutes at 300 mmHg.

COMPLICATIONS:

None.

DRAINS:

None.

IMPLANTS:

Smith & Nephew 3.5 mm suture anchor.

SPECIMEN:

None.

INDICATIONS: The patient is a 59-year-old male who had undergone previous repair of left distal fibular fracture. He had had continued pain and CAT scan revealed possible nonunion of the distal anterior fragment. All treatment options were reviewed in great detail including surgical and nonsurgical management and he elected for surgical fixation. All risks and benefits were described in great detail including not limited to bleeding, infection, need for reoperation, pain, stiffness, malunion, nonunion, blood clot, amputation, and death. He signed consent form willingly with Dr. Kestner. All of his questions were answered to his full satisfaction.

DESCRIPTION OF PROCEDURE: On the date of the operative procedure, both correct patient and operative site were identified by attending surgeon, Dr. Christopher Kestner. The patient was placed on the operating table in supine position where general anesthesia was induced. Left lower extremity was prepped and draped in a sterile fashion. Pneumatic tourniquet was placed on the left thigh. Time-out was performed to ensure the correct patient, correct operative site, all necessary personnel were present, that SCDs were present on his nonoperative leg and he received appropriate preoperative antibiotics. The limb was exsanguinated using Esmarch bandage and the tourniquet was inflated at 300 mmHg.

A linear incision was made over the lateral aspect of the ankle subcutaneous tissue down to the plate, which was removed. The anterior interfragmentary screws were also removed. There was a small fragment of bone and an established nonunion with intervening scar tissue. This was completely removed using a sharp blade and rongeur. The fragments deemed to be too small and friable for repair of nonunion. The anterior aspect of the fibula was then roughened using a rongeur and a Smith & Nephew 3.5 mm suture anchor was then placed and the footprint of the

MISURACA, PAUL L

Page: 3/3 Date: 9/28/2018 2:09:32 AM

MISURACA, PAUL

Page 2

ATFL was then repaired back down to the fibula. X-rays taken in AP, oblique and lateral planes revealed anatomic alignment of the ankle. External rotation stress view revealed no widening of the syndesmosis. Wound was copiously irrigated with sterile saline and closed in layered fashion using 2-0 Vicryl, 3-0 Vicryl and 3-0 nylon. Sterile dressings were placed. A posterior U splint was placed. The patient was awoken from anesthesia without incident and taken to PACU in stable condition.

Christopher J. Kestner, MD

Date: _____ Time: _____

MOP/1893667/O

D: 09/27/2018 09:01:48 AM

T: 09/28/2018 02:04:50 AM

sent using Secure-Fax service. Visit <http://www.secure-fax.com> for information

DME Orders

SOUTH CAROLINA SPORTS MEDICINE AND ORTHOPAEDIC CENTER • 9100 Medcom Street, North Charleston SC 29406-9167

MISURACA, PAUL L**Encounters and Procedures**

Clinical Encounter Summaries

Encounter Date: 11/09/2018

Patient

Name

MISURACA, PAUL (59yo, M) ID#

Appt. Date/Time 11/09/2018 09:15AM

DOB

Service Dept.

SC Sports Medicine & Orthopaedic Center

Provider

CHRIS J KESTNER, MD

Insurance

Med Worker's Comp: ARIEL TPA
Employer Name: CHARLESTON COUNTY
Case #:

Case Injury Date: 02/16/2017

Prescription: ESIL - Member is eligible, details
Prescription: ESIL - Member is eligible, details**Chief Complaint**in room 2
DOS 9-27-18
Last apt 10-9-18

status post removal hardware excision nonunion repair lateral ligaments left ankle. Doing very well. We'll placement Arcast boot and he may bear weight as tolerated on this. We'll see him back in 4 weeks.

he is feeling great
able to walk without boot. Only time this causes pain is when going down stairs**Patient's Care Team****Insurance Adjuster (Worker's Comp):** JOHN SNELLING: Ph (912) 200-3183, Fax (803) 528-8059**Patient's Pharmacies****BILO PHARMACY 5726 (ERX):** 1000 TANNER FORD BLVD, HANAHAN SC 29410, Ph (843) 553-4077, Fax (843) 553-5889**Vitals**

11/09/2018 09:17 AM

Ht: 6 ft**Wt:** 230 lbs**BMI:** 31.2**BP:** 142/78**Pulse:** 76 bpm**Allergies**

Reviewed Allergies

TRAZODONE: - nightmares**Medications**

Reviewed Medications

aspirin 325 mg tablet

Take 1 tablet(s) every day by oral route.

09/28/18 prescribed

atorvastatin 80 mg tablet

10/12/18 filled

clonazepam 1 mg tablet

11/14/17 filled

Colace 100 mg capsule

Take 1 capsule(s) twice a day by oral route.

09/27/18 prescribed

ergocalciferol (vitamin D2) 50,000 unit capsule

08/29/17 filled

finasteride 5 mg tablet

10/09/18 filled

Flucelvax Quad 2018-2019 (PF) 60 mcg (15 mcg x 4)/0.5 mL IM syringe

09/27/18 filled

MISURACA, PAUL L

FLUoxetine 20 mg capsule	09/18/17 filled
glipiZIDE 5 mg tablet	10/12/18 filled
Imitrex 100 mg tablet 2 tab qday	12/21/17 entered
levothyroxine 75 mcg tablet	09/24/18 filled
Lyrice 300 mg capsule	10/31/18 filled
metFORMIN 1,000 mg tablet	10/31/18 filled
Muse 1,000 mcg urethral suppository	02/23/18 filled
oxyCODONE 5 mg capsule Take 1 capsule(s) every 4 hours by oral route.	09/27/18 prescribed
Phenergan 25 mg tablet Take 1 tablet(s) every 6 hours by oral route.	09/27/18 prescribed
prazosin 2 mg capsule Take 1 capsule(s) 3 times a day by oral route.	12/21/17 entered
QUetiapine 100 mg tablet Take 1 tablet(s) twice a day by oral route.	12/21/17 entered
rosuvastatin 40 mg tablet	09/24/18 filled
SUMatriptan 6 mg/0.5 mL subcutaneous pen injector	10/31/18 filled
tamsulosin 0.4 mg capsule	08/22/18 filled
tIZANidine 4 mg tablet Take 1 tablet(s) every 8 hours by oral route.	12/21/17 entered
topiramate 100 mg tablet Take 1 tablet(s) twice a day by oral route.	10/25/18 filled
topiramate 200 mg tablet	01/19/18 entered
vardeafil 20 mg tablet every 24 hours.	01/19/18 entered
Viagra 100 mg tablet	09/22/17 filled
Vitamin D3 1,000 unit capsule	01/19/18 entered
Vyvanse 40 mg capsule	07/16/18 filled
Zanaflex start 12/12/2017	12/12/17 filled

Problems

Reviewed Problems

- Knee pain - Onset: 11/22/2016
- Displacement of cervical intervertebral disc without myelopathy - Onset: 12/21/2017
- Displacement of lumbar intervertebral disc without myelopathy - Onset: 12/21/2017
- Neck pain - Onset: 12/21/2017

MISURACA, PAUL L

- Spinal stenosis of lumbar region - Onset: 12/21/2017
- Low back pain - Onset: 11/22/2016
- Pain radiating to head - Onset: 11/22/2016
- Fracture of lateral malleolus - Onset: 08/01/2018

Family History

Reviewed Family History

- Mother - Diabetes mellitus
- Father - Myocardial infarction

Social History

Reviewed Social History

Ortho

Smoking Status: Former smoker
Occupation: work comp
Marital status: Married
Alcohol intake: Occasional
Exercise level: None

Surgical History

Reviewed Surgical History

- Appendectomy
- Knee Arthroscopy - bilateral
- Other - pilonidal
- Orthopaedic Surgery - discectomy
- Orthopaedic Surgery - neck
- Repair of fibula nonunion/malunion with internal fixation - 09/27/2018

GBDT - 12/26/18 - LT ANKLE

Past Medical History

Reviewed Past Medical History

Diabetes: Y
Thyroid Problems: Y
cholesterol: Y

Screening

None recorded.

ROS

Constitutional: Constitutional: no significant weight gain or loss and no fever, night sweats, or exercise intolerance.

Eyes: Eyes: no irritation, dry eyes, or vision change.

ENMT: Ears: no difficulty hearing or ear pain. Nose: no frequent nosebleeds or nose/sinus problems. Mouth/Throat: no snoring, sore throat, bleeding gums, dry mouth, mouth ulcers, oral abnormalities, or teeth problems.

Cardiovascular: Cardiovascular: no shortness of breath when walking or breath when lying down and no palpitations, chest pain, arm pain on exertion, or known heart murmur.

Respiratory: Respiratory: no cough, wheezing, shortness of breath, or coughing up blood.

Gastrointestinal: Gastrointestinal: no vomiting, diarrhea, or abdominal pain and normal appetite and not vomiting blood.

Genitourinary: Genitourinary: no incontinence, hematuria, difficulty urinating, or increased frequency.

Musculoskeletal: Musculoskeletal: no muscle aches or weakness and no arthralgias/joint pain, back pain, or swelling in the extremities.

Integumentary: Skin: no jaundice, rashes, or abnormal mole.

Neurologic: Neurologic: no weakness, numbness, seizures, dizziness, headaches, or loss of consciousness.

Psychiatric: Psych: no depression, sleep disturbances, or alcohol abuse and feeling safe in relationship.

Endocrine: Endocrine: no fatigue.

Hematologic/Lymphatic: Hematologic/Lymphatic no bruising or swollen glands.

Allergic/Immunologic: Allergy/Immunologic: no itching, hives, runny nose, sinus pressure, or frequent sneezing.

MISURACA, PAUL L**Assessment / Plan**

Paul returns for evaluation of his ankle. He reports his feels remarkably better. He's able to walk without the boot and even do a double heel raises. She is unable do prior to surgery.

Physical examination: Incision well-healed. Minimal tenderness. Outstanding range of motion equal bilaterally. Strength out of 5 for lower muscle groups. Sensation intact light touch and Refills in 3 seconds.

System plan: 6 weeks as post excision nonunion repair lateral ligaments left ankle. Doing very well. We'll provide with an ASO ankle brace and start some physical therapy. We'll see him back in 4 weeks.

1. Fracture of lateral malleolus

S82.62XK: Displaced fracture of lateral malleolus of left fibula, subsequent encounter for closed fracture with nonunion

2. Ankle pain

M25.572: Pain in left ankle and joints of left foot

- ASO BRACE - Use as directed. Dispense Qty: 1 Unit

Return to Office.

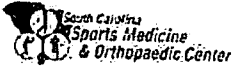
- to see Chris J Kestner, MD at SC Sports Medicine & Orthopaedic Center on or around 12/07/2018

Encounter Sign-Off

Encounter signed-off by Chris J Kestner, MD, 11/09/2018.

Encounter performed and documented by Chris J Kestner, MD

Encounter reviewed & signed by Chris J Kestner, MD on 11/09/2018 at 9:25am

Seth P. Kupferman, MD Orthopaedic Surgery Sports Medicine	James O. Dalton, Jr., MD Orthopaedic Surgery Sports Medicine	 South Carolina Sports Medicine & Orthopaedic Center	Jon P. DeVids, MD Orthopaedic Surgery Hand Surgery	John T. Mulvey, Jr., MD Primary Care Sports Medicine
George Pappas, MD, PhD Orthopaedic Surgery Sports Medicine	Christopher J. Kestner, MD Orthopaedic Surgery Foot & Ankle Surgery	Todd J. Lansford, MD Orthopaedic Surgery Spine Surgery	Daniel A. Wardinbee, MD Orthopaedic Surgery Hand Surgery	Dustin S. Himbright, MD Orthopaedic Surgery Adult Hip and Knee Reconstruction
Michael R. Byers, PA-C Certified Orthopedic Assistant Certified Athletic Trainer	Sarah J. Burkhardt, PA-C Licensed Physical Assistant Certified Athletic Trainer	Lamar C. Hood, PA-C Licensed Physical Assistant	Brett R. Harman, PA-C Licensed Physical Assistant	Laura L. Jones, OTR/L Occupational Therapist Hand Therapy
				Rachael J. Evans, OTR/L Occupational Therapist Hand Therapy

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Return to Work / School

Patient: Misuraca, Paul L
DOB: [REDACTED]
Address: [REDACTED]

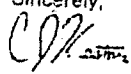
Date: 11/09/2018
Patient ID: [REDACTED]

Note to Patient:

☒ Was Seen in my office on: 11-9-18

☒ May Not return to work/school until cleared by clinic.

MR Misuraca had surgery on 9-27-18 and was seen at a post op follow up appointment on 10-9-18 and today 11-9-18. He should remain out of work until cleared. Follow up in 4 weeks for re-evaluation.

Sincerely,
 Christopher Kestner
Electronically Signed by: CHRIS J KESTNER, MD

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SETH P. KUPFERMAN, M.D.
 DEA #BK 1774052 LIC #14913

JOHN T. HULVEY, M.D.
 DEA #B1 8532877 LIC #21844

TODD J. LANSFORD, M.D.
 DEA #FL 0455360 LIC #35138

JAMES D. DALTON JR., M.D.
 DEA #BD 3491840 LIC #15492

GEORGE PAPPAS, M.D.
 DEA #FP 1425785 LIC #33348

DANIEL A. WARDENBEE, M.D.
 DEA #FW 3793735 LIC #35433

No. 50153

CENTER, P.A.

Telephone: (843) 572-2683

JOHN R. DEYRIES, M.D.
 DEA #BD 6111537 LIC #22140

CHRISTOPHER J. KESTNER, M.D.
 DEA #FK 3225572 LIC #36181

DUSTIN S. HANBRIGHT, M.D.
 DEA #FH 6519075 LIC #45892

MICHAEL R. BYERS, PA-C
 PRESC. AUTH. # 10952085

LAMAR C. HCOO, PA-C
 DEA #KIN 039760 RX # 2183

SARAH J. BUTKINAP, PA-C
 PRESC. AUTH. # 1122085

BRETT A. HARMAN, PA-C
 DEA #DA 161730 SCREC # 52-55007

Patient Name Paul M. Saroca Date 11/9/16

Address _____

R PT eval + treat
 Lanku gentle ROM, strengthen, proprioception
 ITCR w/47. no impact

☐ Label Dr. slip to lateral ligament reconstruction

Refill 0 1-2-3-4-PRN

Dr. C. J. PL

MISURACA, PAUL L

Patient
Name

MISURACA, PAUL (59yo, M) ID#

Appt. Date/Time

12/07/2018 09:30AM

DOB

Service Dept.

SC Sports Medicine & Orthopaedic
Center

Provider
Insurance

CHRIS J KESTNER, MD

Med. Worker's Comp: ARIEL TPA

Employer Name: CHARLESTON COUNTY

Case #:

Case Injury Date: 02/16/2017

Prescription: ESI1 - Member is eligible.

Prescription: ESI1 - Member is eligible

Chief Complaint

10 week s/p excision nonunion repair lateral ligaments left ankle. Ankle not bother him still going to P.T. but showing signs of
Planter fasciitis in left foot.

Patient's Care Team

Insurance Adjuster (Worker's Comp): JOHN SNELLING Ph (912) 200-3183, Fax (803) 528-8059

Patient's Pharmacies

BILO PHARMACY 5726 (ERX): 1000 TANNER FORD BLVD, HANAHAN SC 29410, Ph (843) 553-4077, Fax (843) 553-5889

Vitals

Ht: 6 ft

Wt: 230 lbs

BMI: 31.2

Allergies

Reviewed Allergies

TRAZODONE: - nightmares

Medications

Reviewed Medications

aspirin 325 mg tablet

Take 1 tablet(s) every day by oral route

09/28/18 prescribed

atorvastatin 80 mg tablet

10/12/18 filled

clonazepam 1 mg tablet

11/14/17 filled

Colace 100 mg capsule

Take 1 capsule(s) twice a day by oral route.

09/27/18 prescribed

ergocalciferol (vitamin D2) 50,000 unit capsule

08/29/17 filled

finasteride 5 mg tablet

10/09/18 filled

Flucelvax Quad 2018-2019 (PF) 60 mcg (15 mcg x 4)/0.5 mL IM syringe

09/27/18 filled

FLUoxetine 20 mg capsule

09/18/17 filled

glipizide 5 mg tablet

10/12/18 filled

Imitrex 100 mg tablet

2 tab qday

12/21/17 entered

levothyroxine 75 mcg tablet

09/24/18 filled

MISURACA, PAUL L [REDACTED]

Lyrice 300 mg capsule	10/31/18 filled
metFORMIN 1,000 mg tablet	10/31/18 filled
Muse 1,000 mcg urethral suppository	02/23/18 filled
oxyCODONE 5 mg capsule Take 1 capsule(s) every 4 hours by oral route	09/27/18 prescribed
Phenergan 25 mg tablet Take 1 tablet(s) every 6 hours by oral route.	09/27/18 prescribed
prazosin 2 mg capsule Take 1 capsule(s) 3 times a day by oral route	12/21/17 entered
QUETiapine 100 mg tablet Take 1 tablet(s) twice a day by oral route.	12/21/17 entered
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vardeafil 20 mg tablet every 24 hours	01/19/18 entered
Viagra 100 mg tablet	09/22/17 filled
Vitamin D3 1,000 unit capsule	01/19/18 entered
Vyvanse 40 mg capsule	07/16/18 filled
Zanaflex start 12/12/2017	12/12/17 filled

Problems

Reviewed Problems

- Knee pain - Onset: 11/22/2016
- Displacement of cervical intervertebral disc without myelopathy - Onset: 12/21/2017
- Displacement of lumbar intervertebral disc without myelopathy - Onset: 12/21/2017
- Neck pain - Onset: 12/21/2017
- Spinal stenosis of lumbar region - Onset: 12/21/2017
- Low back pain - Onset: 11/22/2016
- Pain radiating to head - Onset: 11/22/2016
- Fracture of lateral malleolus - Onset: 08/01/2018

Family History

DATE'S NOTE

MISURACA, PAUL L [REDACTED]

Reviewed Family History

Mother

- Diabetes mellitus

Father

- Myocardial infarction

Social History

Reviewed Social History

Ortho

Smoking Status: Former smoker

Occupation: work comp

Marital status: Married

Alcohol intake: Occasional

Exercise level: None

Surgical History

Reviewed Surgical History

Appendectomy

Knee Arthroscopy - bilateral

Other - pilonidal

Orthopaedic Surgery - discectomy

Orthopaedic Surgery - neck

Repair of fibula nonunion/malunion with internal fixation - 09/27/2018

GBDT - 12/26/18 - LT ANKLE

Past Medical History

Reviewed Past Medical History

Diabetes: Y

Thyroid Problems: Y

cholesterol: Y

Screening

None recorded.

ROS

Constitutional: Constitutional: no significant weight gain or loss and no fever, night sweats, or exercise intolerance.

Eyes: Eyes: no irritation, dry eyes, or vision change.

ENMT: Ears: no difficulty hearing or ear pain. Nose: no frequent nosebleeds or nose/sinus problems. Mouth/Throat: no snoring, sore throat, bleeding gums, dry mouth, mouth ulcers, oral abnormalities, or teeth problems

Cardiovascular: Cardiovascular: no shortness of breath when walking or breath when lying down and no palpitations, chest pain, arm pain on exertion, or known heart murmur.

Respiratory: Respiratory: no cough, wheezing, shortness of breath, or coughing up blood.

Gastrointestinal: Gastrointestinal: no vomiting, diarrhea, or abdominal pain and normal appetite and not vomiting blood.

Genitourinary: Genitourinary: no incontinence, hematuria, difficulty urinating, or increased frequency.

Musculoskeletal: Musculoskeletal: no muscle aches or weakness and no arthralgias/joint pain, back pain, or swelling in the extremities.

Integumentary: Skin: no jaundice, rashes, or abnormal 

Neurologic: Neurologic: no weakness, numbness, seizures, dizziness, headaches, or loss of consciousness

Psychiatric: Psych: no depression, sleep disturbances, or alcohol abuse and feeling safe in relationship.

Endocrine: Endocrine: no fatigue.

Hematologic/Lymphatic: Hematologic/Lymphatic no bruising or swollen glands.

Allergic/Immunologic: Allergy/Immunologic: no itching, hives, runny nose, sinus pressure, or frequent sneezing.

Assessment / Plan

Paul returns for evaluation of his ankle to report his ankle is feeling great. He has been going to physical therapy. He has

Seth P. Kupferman, MD
Orthopaedic Surgery
Sports Medicine

James D. Dalton, Jr., MD
Orthopaedic Surgery
Sports Medicine



Jon P. DeVries, MD
Orthopaedic Surgery
Hand Surgery

John T. Hulvey, Jr., MD
Primary Care
Sports Medicine

George Pappas, MD, PhD
Orthopaedic Surgery
Sports Medicine

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Michael R. Byers, PA-C
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Certified Athletic Trainer

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Lamar C. Hood, PA-C
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Laura L. Jones, OTR/L
Occupational Therapist
Hand Therapy

Rachael J. Evans, OTR/L
Occupational Therapist
Hand Therapy

9100 Medcom St • North Charleston, SC 29406-9167 • Phone: (843) 572-2663 • Fax (843) 764-3577

Return to Work / School

Patient: Misuraca, Paul L

DOB: [REDACTED]

Address: [REDACTED]

Date: 12/07/2018

Patient ID: [REDACTED]

Note to Patient:

☒ Was Seen in my office on: 12/7/18

☐ May return to work/school on: _____

☒ May Not return to work/school on: 4 week fu

☒ Work limitations: no work until fu visit in 4 weeks

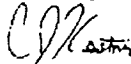
☐ May Not participate in physical education: _____

☐ May return to physical education: _____

☐ Limitations for physical education: _____

☐ May Not participate in jury duty: _____

Sincerely,

 Christopher Kestner

Electronically Signed by: CHRIS J KESTNER, MD

www.scsportsmedicine.com

MISURACA, PAUL L

Patient
Name

MISURACA, PAUL (59yo, M) ID#

Appt. Date/Time

01/04/2019 09:30AM

DOB

Service Dept.

SC Sports Medicine & Orthopaedic
Center

Provider
Insurance

CHRIS J KESTNER, MD

Med Worker's Comp: ARIEL TPA
Employer Name: CHASE COUNTY
Case #: [REDACTED]
Case Injury Date: 02/15/2017
Prescription: ESII - Member is eligible.
Prescription: ESII - Member is eligible.

Chief Complaint

in room 1

DOS 9-27-18

Last apt 12-7-18

status post excision nonunion repair lateral ligaments left ankle. Doing extremely well. Continue with therapy for stretching specifically on his plantar fascia as well. May slowly increase his activity as he can tolerate. We will see him back in 4 weeks at which point he can be cleared for full duty versus do some work hardening versus he suspects he may retire at that point in which case there will be no need for work hardening work simulation.

Patient's Care Team

Insurance Adjuster (Worker's Comp): JOHN SNELLING Ph (912) 200-3183, Fax (803) 528-8059

Patient's Pharmacies

BILO PHARMACY 5726 (ERX): 1000 TANNER FORD BLVD, HANAHAN SC 29410, Ph (843) 553-4077, Fax (843) 553-5889

Vitals

Ht: 6'4"

Wt: 230 lbs

BMI: 31.2

Allergies

Reviewed Allergies

TRAZODONE - nightmares

Medications

Reviewed Medications

aspirin 325 mg tablet

Take 1 tablet(s) every day by oral route.

09/28/18 prescribed

atorvastatin 80 mg tablet

12/22/18 filled

clonazepam 1 mg tablet

11/14/17 filled

Colace 100 mg capsule

Take 1 capsule(s) twice a day by oral route

09/27/18 prescribed

ergocalciferol (vitamin D2) 50,000 unit capsule

08/29/17 filled

finasteride 5 mg tablet

10/09/18 filled

Flucelvax Quad 2018-2019 (PF) 60 mcg (15 mcg x 4)/0.5 mL IM syringe

09/27/18 filled

FLUoxetine 20 mg capsule

09/18/17 filled

glipizide 5 mg tablet

12/30/18 filled

MISURACA, PAUL L ([REDACTED]

Imitrex 100 mg tablet 2 tab qday	12/21/17 entered
levothyroxine 75 mcg tablet	09/24/18 filled
Lyrica 300 mg capsule	12/22/18 filled
metFORMIN 1,000 mg tablet	10/31/18 filled
Muse 1,000 mcg urethral suppository	02/23/18 filled
oxyCODONE 5 mg capsule Take 1 capsule(s) every 4 hours by oral route	09/27/18 prescribed
Phenergan 25 mg tablet Take 1 tablet(s) every 6 hours by oral route.	09/27/18 prescribed
prazosin 2 mg capsule Take 1 capsule(s) 3 times a day by oral route.	12/21/17 entered
QUetiapine 100 mg tablet Take 1 tablet(s) twice a day by oral route	12/21/17 entered
rosuvastatin 40 mg tablet	09/24/18 filled
SUMatriptan 6 mg/0.5 mL subcutaneous pen injector	10/31/18 filled
tamsulosin 0.4 mg capsule	08/22/18 filled
tiZANidine 4 mg tablet Take 1 tablet(s) every 8 hours by oral route	12/21/17 entered
topiramate 100 mg tablet Take 1 tablet(s) twice a day by oral route	10/25/18 filled
topiramate 200 mg tablet	01/19/18 entered
varденаfil 20 mg tablet every 24 hours	01/19/18 entered
Viagra 100 mg tablet	09/22/17 filled
Vitamin D3 1,000 unit capsule	01/19/18 entered
Vyvanse 40 mg capsule	07/16/18 filled
Zanaflex start 12/12/2017	12/12/17 filled

Problems

Reviewed Problems

- Knee pain - Onset: 11/22/2016
- Displacement of cervical intervertebral disc without myelopathy - Onset: 12/21/2017
- Displacement of lumbar intervertebral disc without myelopathy - Onset: 12/21/2017
- Neck pain - Onset: 12/21/2017

MISURACA, PAUL L

- Spinal stenosis of lumbar region - Onset: 12/21/2017
- Low back pain - Onset: 11/22/2016
- Pain radiating to head - Onset: 11/22/2016
- Fracture of lateral malleolus - Onset: 08/01/2018

Family History

Family History not reviewed (last reviewed 12/07/2018)

Mother - Diabetes mellitus
Father - Myocardial infarction

Social History

Social History not reviewed (last reviewed 12/07/2018)

Ortho.

Smoking Status Former smoker

Occupation work comp

Marital status Married

Alcohol intake Occasional

Exercise level None

Surgical History

Surgical History not reviewed (last reviewed 12/07/2018)

Appendectomy

Knee Arthroscopy - bilateral

Other - pilonidal

Orthopaedic Surgery - discectomy

Orthopaedic Surgery - neck

Repair of fibula nonunion/malunion with internal fixation - 09/27/2018

GBDT - 12/26/18 - LT ANKLE

Past Medical History

Past Medical History not reviewed (last reviewed 12/07/2018)

Diabetes Y

Thyroid Problems Y

cholesterol Y

Screening

None recorded

ROS

Constitutional: Constitutional: no significant weight gain or loss and no fever, night sweats, or exercise intolerance

Eyes: Eyes: no irritation, dry eyes, or vision change

ENMT: Ears: no difficulty hearing or ear pain. Nose: no frequent nosebleeds or nose/sinus problems. Mouth/Throat: no snoring, sore throat, bleeding gums, dry mouth, mouth ulcers, oral abnormalities, or teeth problems.

Cardiovascular: Cardiovascular: no shortness of breath when walking or breath when lying down and no palpitations, chest pain, arm pain on exertion, or known heart murmur.

Respiratory: Respiratory: no cough, wheezing, shortness of breath, or coughing up blood.

Gastrointestinal: Gastrointestinal: no vomiting, diarrhea, or abdominal pain and normal appetite and not vomiting blood

Genitourinary: Genitourinary: no incontinence, hematuria, difficulty urinating, or increased frequency.

Musculoskeletal: Musculoskeletal: no muscle aches or weakness and no arthralgias/joint pain, back pain, or swelling in the extremities.

Integumentary: Skin: no jaundice, rashes, or abnormal mole.

Neurologic: Neurologic: no weakness, numbness, seizures, dizziness, headaches, or loss of consciousness

Psychiatric: Psych: no depression, sleep disturbances, or alcohol abuse and feeling safe in relationship.

Endocrine: Endocrine: no fatigue.

Hematologic/Lymphatic: Hematologic/Lymphatic: no bruising or swollen glands.

MISURACA, PAUL L [REDACTED]

Allergic/Immunologic: Allergy/Immunologic, no itching, hives, runny nose, sinus pressure or frequent sneezing.
Assessment / Plan

Paul returns for evaluation of his ankle. He reports doing extremely well.

Physical examination: Incision completely healed. Full range motion equal bilaterally. Strength 5 of 5 for lower muscle groups and equal bilaterally. Sensation intact light touch and cap refill less than 3 seconds.

Assessment plan: Over 3 month status post excision of nonunion repair lateral ligaments left ankle. Doing extremely well. May progress to home therapy at this point. May start to increase his activity to include mild impact speed we will see him back in 4-6 weeks for final checkup.

1. Fracture of lateral malleolus

- S82.62XX Displaced fracture of lateral malleolus of left fibula, subsequent encounter for closed fracture with nonunion
- ANKLE FRACTURE REHAB EXERCISES
- BROKEN ANKLE CARE INSTRUCTIONS

Return to Office

- to see Chris J Kestner, MD at SC Sports Medicine & Orthopaedic Center on or around 02/01/2019

Encounter Sign-Off

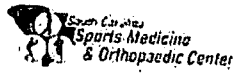
Encounter signed-off by Chris J Kestner, MD, 01/04/2019.

Encounter performed and documented by Chris J Kestner, MD

Encounter reviewed & signed by Chris J Kestner, MD on 01/04/2019 at 9:37am.

S

i

Seith P. Kupferman, MD
 Orthopaedic Surgery
 Sports Medicine
James D. Dalton, Jr., MD
 Orthopaedic Surgery
 Sports Medicine

Jan P. DeVries, MD
 Orthopaedic Surgery
 Hand Surgery
John T. Hulvey, Jr., MD
 Primary Care
 Sports Medicine
George Pappas, MD, PhD
 Orthopaedic Surgery
 Sports Medicine
Christopher J. Kestner, MD
 Orthopaedic Surgery
 Foot & Ankle Surgery
Todd J. Lainsford, MD
 Orthopaedic Surgery
 Spine Surgery
Daniel A. Wartinbee, MD
 Orthopaedic Surgery
 Plantar Surgery
Dustin S. Hambricht, MD
 Orthopaedic Surgery
 Adult Hip and Knee Replacement
Michael R. Byers, PA-C
 Licensed Physician Assistant
 Certified Athletic Trainer
Sarah J. Burkhardt, PA-C
 Licensed Physician Assistant
 Certified Athletic Trainer
Lamar C. Hood, PA-C
 Licensed Physician Assistant
Brett R. Harman, PA-C
 Licensed Physician Assistant
Leura L. Jones, OTR/L
 Occupational Therapist
 Hand Therapist
Rachael J. Evans, OTR/L
 Occupational Therapist
 Hand Therapist

9100 Medcom St • North Charleston, SC 29406-9167 • Phone: (843) 572-2663 • Fax: (843) 764-3577

Return to Work / School

Patient: Misuraca, Paul L
 DOB: [REDACTED]
 Address: [REDACTED]

Date: 01/04/2019
 Patient ID: [REDACTED]

Note to Patient

☒ Was Seen in my office on: 01/04/19
☒ May Not return to work/school until cleared by clinic.

Continue with no work, follow up in 4-6 weeks.

Sincerely,

Chris Kestner Christopher Kestner

Electronically Signed by: CHRIS J KESTNER, MD

www.scsportsmedicine.com

INDEPENDENT MEDICAL EVALUATION**RE: MISURACA, PAUL****EMPLOYER: Charleston County Sheriff Department****WCC FILE #: 1701642****DATE OF INJURY: 02/16/2017****DATE OF EVALUATION: 06/03/2019**

The patient is seen at the request of attorney, David T. Pearlman, c/o Steinberg Law Firm, LLP. Mailing address is P.O. Box 9, Charleston, SC 29401.

Dear Mr. Pearlman:

Mr. Paul Misuraca was seen in the office today, June 3, 2019, for purposes of independent medical evaluation regarding a work-related injury to his left ankle and low leg.

As you are aware, this now 60-year-old white male was employed at the Charleston County Sheriff's Department. By review of accompanying record and patient history today, he sustained an injury to his left low leg and ankle on February 16, 2017. This apparently occurred when he was involved with trying to subdue a defendant. During this altercation, he sustained injury when he struck the lateral aspect of his left ankle against a piece of furniture in the courtroom. The patient noted increased swelling and discomfort with weightbearing. He states he was able to move his ankle fairly freely. However, he was seen on the date of injury at Coastal Carolina Occupational Health.

On review of the medical records provided, those records were not included. By patient history, he states that x-rays were obtained, which did not reveal any obvious fracture based upon his report. He was placed into a soft splint.

There is an office note from Coastal Carolina Occupational Health in the records provided dated 04/24/2017. This reflects that he was being seen for some aggravation of his left ankle pain, having had a cast removed approximately six days previously.

The patient states that he was referred for orthopedic evaluation from Coastal Carolina Occupational Health and was seen by Dr. William Corey, a foot and ankle specialist with Lowcountry Orthopedics. The first medical record available for review was dated 04/18/2017 from Dr. Corey's office. This note reflects that he was being followed for a closed fracture of his lateral malleolus to his left ankle. X-rays were provided, and one available for review was dated 02/28/2017. This did confirm a minimally displaced fracture of the left distal fibula. The patient was treated non-surgically at that time and was placed in a short leg cast and was told to remain non-weightbearing.

CLIENT: MISURACA, PAUL
DATE OF SERVICE: 06/03/2019
PAGE 2

CLIENT #:

On the office note of 04/18/2017, he was having persistence of pain along the lateral aspect of his ankle. At that point, he was placed into a CAM walker and was instructed to begin partial weightbearing and to progress to full weightbearing status as tolerated. Physical therapy referral was also placed.

The patient was followed sequentially by Dr. Corey. Medical records reflect continued pain with attempted weightbearing while in the CAM walker. X-ray report dated 04/28/2017 revealed progressive but incomplete healing of the left lateral malleolar fracture.

On 07/14/2017, he was five months status post injury and was seen back by Dr. Corey. He was still unable to bear weight of any significance and had persistence of ankle pain laterally. X-ray obtained at that time revealed no further displacement, but questionable healing. CT of the left ankle was then recommended.

CT evaluation was carried out on 07/18/2017. This revealed a non-displaced fracture of the distal fibula with partially incorporated anterior butterfly segment. There appeared to be a delayed union or partial union noted.

The patient was seen back by Dr. Corey after the CT scan on 07/21/2017. Based upon his lack of healing, it was felt that surgical repair with bone graft would be required. Additionally, laboratory data to include serum calcium, vitamin D level, and hemoglobin A1c were recommended. The patient is a diabetic.

The patient was seen back by Dr. Corey on 08/04/2017. This note reflects that the patient was found to have vitamin D insufficiency, although the lab value was not noted on my review. Endocrinology consult was recommended. The patient was subsequently treated with vitamin D supplementation. The patient was seen back on 11/03/2017 by the physician's assistant. Surgical intervention was recommended for his nonunion repair. The recommendation for surgery was accepted by the patient and on 11/07/2017 the patient did undergo excision of the fibula nonunion with open reduction internal fixation as well as calcaneal autogenous bone grafting.

The patient was followed subsequently by Dr. Corey. He was placed on non-weightbearing with the use of an ankle scooter. On 12/19/2017, he was seen for followup. Ankle incision was noted to be healing well. He was placed on a partial weightbearing program at that time and transitioned to a CAM walker. X-rays at that time revealed some progressive healing of his lateral malleolus fracture.

On subsequent office visits, the patient's primary complication was persistence of pain when attempting to return to progressive weightbearing. The pain remained along the lateral aspect of his ankle. On the office note of 04/13/2018, he was still having persistence of pain. A CT scan of his surgical site was recommended.

CLIENT: MISURACA, PAUL
DATE OF SERVICE: 06/03/2019
PAGE 3

CLIENT #:

Second CT scan was obtained on 04/24/2018. This revealed some persistent lucency along the distal aspect of the fracture anteriorly suggestive of incomplete healing. Additionally, some tendinosis within the peroneal tendon and possible split tear in the peroneus brevis tendon was noted. No evidence for full thickness pathology.

The patient was seen back by Dr. Corey on 05/07/2018. His CT scan was reviewed. At that point, a second orthopedic opinion was requested and approved.

The patient subsequently came under the care of Dr. Christopher Kestner, a foot and ankle specialist with South Carolina Sports Medicine and Orthopedic Center. The patient was seen initially on August 1, 2018. On review of that office note, his history was basically as outlined above. Radiographic evaluation revealed possible nonunion of the most distal aspect of the anterior fibula. At that point, it was felt that the best option would be to consider removal of his hardware and excision of the distal fibula fragment. This would also necessitate repair of the anterolateral stabilizing ligaments of his ankle.

The surgery was accepted by the patient and was authorized. On September 27, 2018, the patient did undergo his second procedure on his left ankle carried out by Dr. Kestner. On review of that operative narrative, he was found to have a small fragment of bone anteriorly with an established nonunion. This was sharply excised. Hardware was removed. The patient also underwent surgical repair of the anterior talofibular ligament utilizing suture anchor fixation.

The patient was followed sequentially by Dr. Kestner. His wounds healed well without complication. He was gradually advanced to progressive weightbearing as tolerated. He was subsequently placed in an Aircast boot with progressive weightbearing. Physical therapy had been initiated. On the office note of 12/07/2018, the patient was making improvements and stated that his ankle discomfort had significantly improved. There was some question about plantar fasciitis occurring in the left foot at that time.

The patient continued to improve. He was last seen by Dr. Kestner on 02/08/2019. He was released at that time with no specific limitations given with respect to his left ankle. Office note also reflects he was having some problems with his back secondary to degenerative disc disease.

The patient states he has not been seen back by Dr. Kestner since that office visit in February.

The patient has no prior history of previous ankle instability or injury prior to the work related event of February 16, 2017.

The patient states he has not returned to work as a sheriff's deputy, secondary to disability retirement through the VA.

With respect to current management, the patient states he is not utilizing any type of ankle lacers or braces. He is not taking any medications specifically for residuals in his left foot or ankle.

CLIENT: MISURACA, PAUL
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PAGE 4

CLIENT #:

With respect to current symptoms, the patient has some residual discomfort back in the calcaneal region of his left foot. He still notes some occasional soreness along the distal fibula. He notes occasional snapping, which is intermittently painful. He does not note any episodes of ankle instability or giving way. He does note some stiffness in his ankle. He has some mild numbness along the incision site laterally. He denies any dorsal or plantar numbness or significant pain at present. He denies any midfoot or forefoot pain.

PHYSICAL EXAMINATION: Today reveals the patient to be alert and appropriate throughout the evaluation. On observation of his gait pattern, he walks with essentially a nonantalgic gait pattern.

In a seated position, he has painless range of motion of his left hip and left knee. Examination of his left leg and ankle reveals a well healed surgical incision overlying the distal fibula. The patient demonstrates approximately 20 degrees of dorsiflexion today and 40 degrees of plantarflexion. He has 30 degrees of inversion and 10 degrees of eversion. He has minimal discomfort in the retrofibular region along the peroneal tendon sheath. However, his strength on isolated peroneal testing is 5/5. No evidence for peroneal subluxation.

Circumferential calf measurements were obtained in the office today. His right uninvolved calf circumference at maximal diameter is 37.5 cm. On the left involved calf, this measures 35.0 cm for a 2.5 cm calf circumference discrepancy.

Diagnostic images available for review including MRI scan, CT scan, and plain x-rays were reviewed. Findings are essentially as noted above.

IMPRESSION:

1. Status post surgical repair with ligament reconstruction for nonunion left lateral malleolar fracture.
2. Persistent gastrosoleus atrophy.

DISPOSITION: From a practical standpoint, this patient has reached maximum medical improvement. He will have some degree of residual impairment as outlined by the AMA Guidelines for the Evaluation of Permanent Impairment, fifth edition. Based upon table 17-6, this patient does demonstrate moderate category of calf atrophy. This is assessed a 10% impairment of his left lower extremity. This is the equivalent of a 4% whole person impairment.

It is my opinion that the patient will not require further surgical intervention with respect to residuals in his left ankle. Ongoing medical treatment should include attention for maintenance of progressive strength and balance, which could be continued after physical therapy instruction in a self-supervised basis.

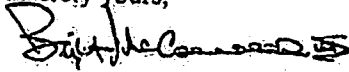
With respect to permanent work restrictions regarding his left ankle residuals, this patient should avoid those types of activity or occupational requirements, which would require repetitious kneeling, squatting, stooping, or negotiating uneven ground.

CLIENT: MISURACA, PAUL
DATE OF SERVICE: 06/03/2019
PAGE 5

CLIENT #:

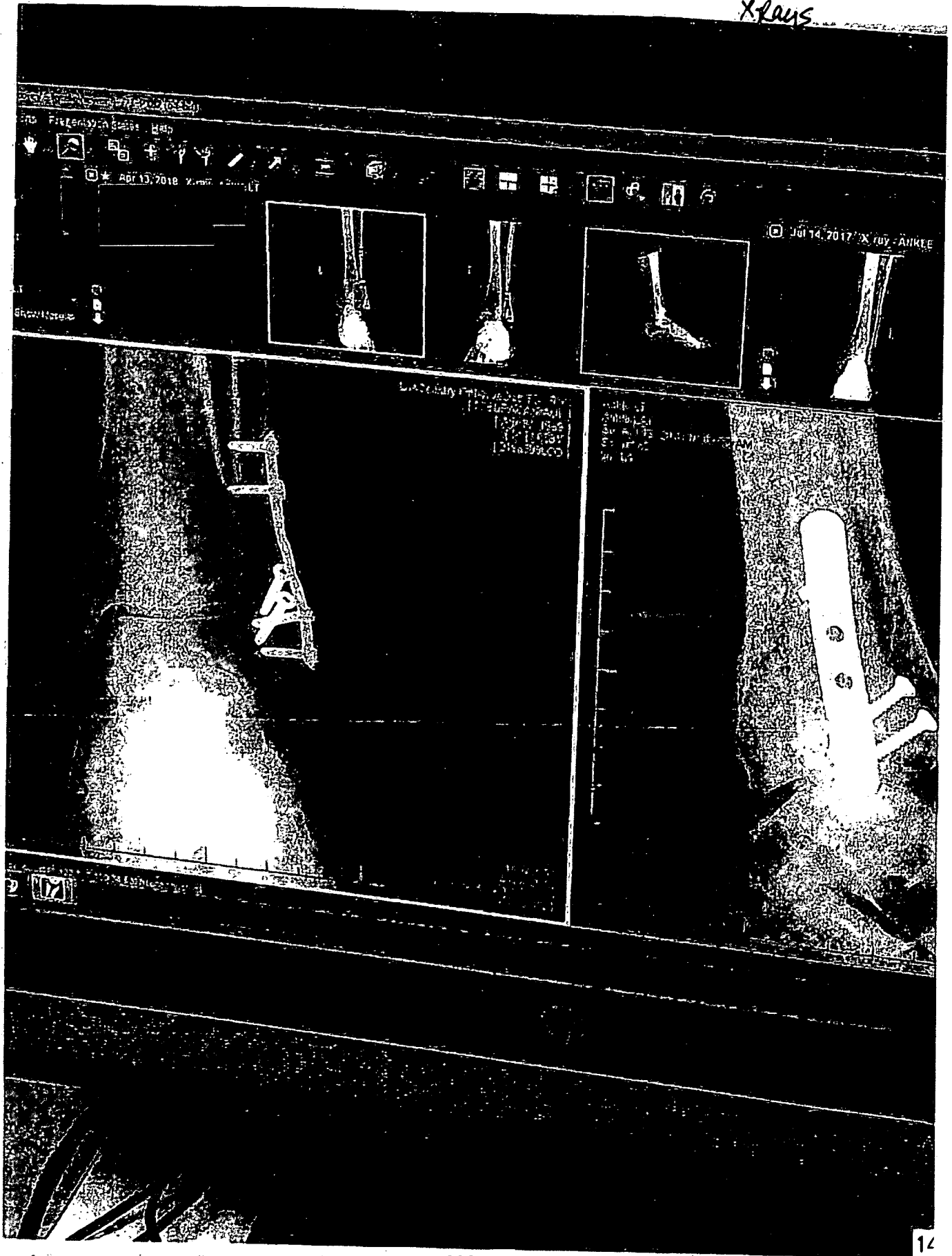
If there are any further questions, please do not hesitate to contact me.

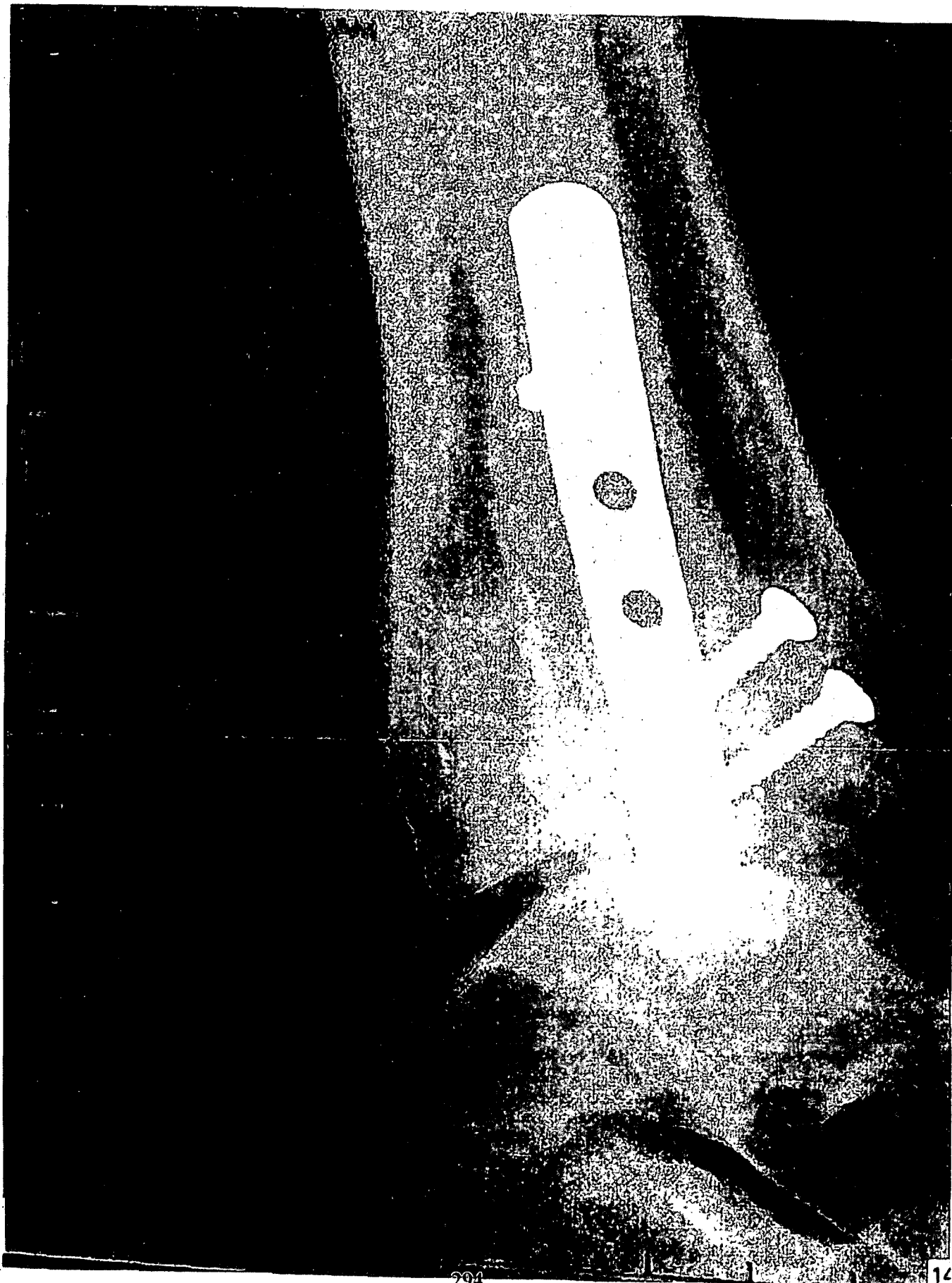
Sincerely yours,



Bright McConnell, III, M.D.
BMCC:ATL 002

X-rays





RATING NUMERIC	MERIT	
	DEFINITION	%
3.45	Exceeds Standards	1.5

Charleston County Employee Performance Appraisal

Employee Name Misuraca, Paul L. Employee ID [REDACTED]
 Job Title Master Deputy Sheriff Department Sheriff's Office/Special Ops.

Type of Evaluation: Annual XXX Probation (New Hire) _____
 Probation (Promotion) _____ Probation (Transfer) _____
 Probation (Demotion) _____ Probation (Disciplinary) _____
 Other _____ Specify _____

Evaluation Period From: July 07, 2015 to July 06, 2016

All "outstanding", "inconsistent", and "unsatisfactory" ratings must have a justification statement. "Inconsistent" and "unsatisfactory" ratings must indicate areas for improvement. "Outstanding" evaluations must indicate areas of superior accomplishment. Use additional sheets of paper if necessary for your justification statements. Use whole numbers or numbers rounded to the nearest half. Do not use numbers with any other decimals.

Section I - Personal work Traits

The overall rating for WORK HABITS is made up of the ratings for punctuality (P), attendance (A), initiative (I), dependability (D), and safety (S). In the space provided, indicate the performance level for WORK HABITS and write your justification statement.

Note: If, during this rating period, the employee has been out on leave for one of the reasons listed below, check the appropriate space and do not rate Attendance (and divide by 4 instead of 5). In addition, indicate in the justification statement the specific reason for not evaluating Attendance.

This employee has been absent for Family/Medical Leave _____ Chronic Illness/Surgery _____ Other Disability _____
Overall Rating for WORK HABITS Rating

P 3.5 + A 2.0 + I 3.5 + D 2.0 + S 3.5 + 5 = Rating 3.0

Justification Statement: Master Deputy Paul Misuraca arrives early for duty and prepared for his shift. He conducts himself in a professional manner on and off duty. He plans his annual & comp time leave well in advance and used (104) hours, (13) days of sick leave this rating period. He used (10) additional sick leave days for an OJI. He maintains a good work schedule unless he is out on sick leave. He is safety conscious and practices good officer safety when on and working off duty.

The overall rating for INTERPERSONAL RELATIONSHIPS is made up of the ratings for ability to work well with others (W), ability to communicate (C), public relations/professional conduct with the general public (PR), and disposition/outlook (D). In the space provided, indicate the performance level for INTERPERSONAL RELATIONSHIPS and write the justification statement.

Overall Rating for INTERPERSONAL RELATIONSHIPS Rating

W 4.0 + C 3.5 + PR 3.5 + D 3.5 + 4 = Rating 3.5

Justification Statement: Deputy Misuraca works very well with his co-workers and is well respected. He has good communication skills with the public and is very patient and understanding with all parties involving hearings in the courts. He maintains a professional demeanor in all situations he handles at the courthouse. He has a positive disposition and is an asset to the Charleston County Sheriff's Office.

The overall rating for INDIVIDUAL DEVELOPMENT is made up of job knowledge (J), adaptability to change (A), and desire for self improvement (SI). In the space provided, indicate the performance level for INDIVIDUAL DEVELOPMENT and write the justification statement.

Overall Rating for INDIVIDUAL DEVELOPMENT

Rating

J 3.5 +A 3.5 +SI 4.0 +3 = Rating

3.5

Justification Statement: Deputy Misuraca understands and properly applies all policies and procedures concerning judicial security. He is quick to ask for guidance from his supervisors when needed and adapts well to any changes. He continually looks to improve the security operations at the Judicial Center and his courtroom. He conducts his courtroom security sweeps daily. He takes advantage of all in-house training that is made available to him.

Section II - Job Performance

Indicate the job duty/element which is being evaluated and its rating. Write the appropriate justification statements. Attach additional sheets for justification statements if necessary. (These job duties/elements are in the employee's personnel file and do not have to be resubmitted to the Personnel Department at this time.)

Job Duty/Element

Rating

(1) REPORT WRITING

3.0

Justification Statement: Deputy Misuraca's reports are complete, concise and grammatically correct with occasional minor (in-house) rejections from his supervisors. He accurately documents all incidents, completes arrest & booking and supplemental reports, submitting them in a timely manner. He ensures that his court statistical reports are accurate and complete prior to submitting them for review and tabulation.

Job Duty/Element

Rating

(2) APPEARANCE / MAINTENANCE & OPERATION OF EQUIPMENT

3.5

Justification Statement: Deputy Misuraca maintains a professional appearance in court. All assigned equipment is well maintained with no documented discrepancies. He is always prepared for his shift and maintains all equipment appropriately. He portrays a strong professional image through his appearance and attitude. His assigned vehicle is always clean, presentable and uncluttered. Vehicle preventative maintenance appointments (PMs) are always met early or on time.

Job Duty/Element

Rating

(3) PROFESSIONAL RESPONSIBILITIES

3.5

Justification Statement: Deputy Misuraca attends all roll call meetings and attends all training assignments as scheduled. He responds to calls for service within the Judicial Center when available. He takes control of security within his assigned courtroom during his tour of duty. He is quick to assist the public with non-emergency and emergency situations while patrolling the Judicial Center. He is extremely respectful and helpful to the judges and public he comes in contact with while working in the Judicial Center. He is a member of the Crisis Negotiation Team (collateral duty), takes call out and attends training when courts will allow. He was verbally (non-disciplinary) counseled on using profanity on 05-29-16 during a therapeutic call-out that was captured by a NCPD body camera. A use of force package was completed and the mild profanity was reviewed on the supplied video disk.

Job Duty/Element

Rating

(4) INTER-OFFICE COMMUNICATIONS

3.5

Justification Statement: Deputy Misuraca is able to effectively communicate with judges, court staff, civilian employees and his peers. He promotes a positive work environment through his professionalism. He is very courteous to all he comes in contact while on duty. He is respectful to his chain-of-command supervisors and all other civilians and supervisors he encounters. He portrays a professional demeanor in the courtroom/courthouse.

Job Duty/Element

Rating

(5) CIVIL PROCESS / WARRANT SERVICE

4.0

Justification Statement: Deputy Misuraca serves all family court and civil papers in accordance with current policies and procedures. He ensures that all accompanying paperwork is completed correctly and returned in a timely manner.

Job Duty/Element

Rating

(6) COURT SAFETY / SECURITY

3.5

Justification Statement: Deputy Misuraca follows all policies and procedures that are set forth while securing his assigned courtroom. He always conducts a protective sweep of his assigned courtroom prior to the start of courtroom activities. He makes extra patrols of the Judicial Center to ensure the proper level of security is being maintained and to identify any problems or discrepancies with security. He makes the proper notifications when problems or safety hazards are identified within the Judicial Center.

Job Duty/Element

Rating

(7) TRANSPORTATION / HANDLING OF PRISONERS

3.5

Justification Statement: Deputy Misuraca complies with the Charleston County Sheriff's Office Policy and Procedure concerning the proper handling of prisoners. He always practices good officer safety and ensures that all restraints are applied correctly for the safety and security of everyone within the Judicial Center. He assists therapeutic transport when on weekend rotational call-out.

Section III - Employee Development Plan

What was the employee's goal(s) objectives set during the last rating period? To attend another court security school if one becomes available during the next rating period.

Did the employee complete the goals(s)/objective(s)? Yes _____ No XXX

Explain answer below. Complete development plan for next rating period and submit it with this rating sheet. No additional court security classes were offered this rating period.

Section IV - Supervisory Duties/Responsibilities (If Applicable)

Rating

Include supervisory appraisal sheet with this rating sheet.

N/A

Justification Statement:

Overall Evaluation:

Total Points 34.5 + Total Items 10 = Overall Numeric Rating 3.450

PERFORMANCE LEVEL DESCRIPTIONS AND DEFINITIONS:

OUTSTANDING	3.75 - 4.0	Performance and results ALWAYS exceed the standards and expectations for the position requirements and objectives.
EXCEEDS STANDARDS	3.0 - 3.74	Performance and results OFTEN exceed the standards and expectations for the position requirements and objectives.
MEETS STANDARDS	2.0 - 2.99	Performance and results achieved GENERALLY meet the standards and expectations for the position requirements and objectives.
INCONSISTENT	1.0 - 1.99	Performance and results are INCONSISTENT with the standards and expectations for the position requirements and objectives. Possess most of the knowledge skills and abilities required for job success but additional training or commitment is needed.
UNSATISFACTORY	0 - 0.99	Performance and results CONSISTENTLY DO NOT meet the minimal standards and expectations for the position requirements and objectives.

An evaluation with an overall numerical rating below 2.0 or with two (2) or more ratings of Inconsistent/Unsatisfactory indicates substandard performance, and the rating definition will be "Marginal" (regardless of the numerical average). On an annual evaluation, the employee will be placed in a probationary status and shall receive performance counseling and additional evaluation. The employee is expected to meet performance expectations within this probationary time period and to continue to meet expectations throughout employment with Charleston County. (See Charleston County's Personnel Policies for specific procedures.)

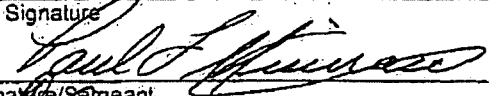
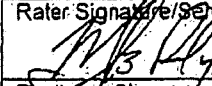
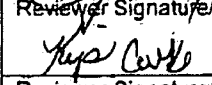
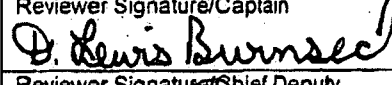
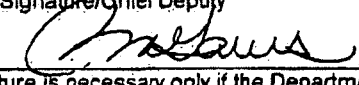
General comments from Supervisor: (if desired): Deputy Paul Misuraca continuously commits to doing a good job in court security at the Judicial Center. It is a pleasure to have him here assigned to family court!

Employee Notice:

Review the entire appraisal to make sure that you understand its contents. If you have questions, it is your responsibility to have these clarified for you. Sign your name in the appropriate space. (Your signature does not indicate that you necessarily agree with the evaluation. Use the comment section to express yourself regarding the evaluation.)

Employee Comments:

Your signature indicates that your evaluation has been completed and your supervisor has had an evaluation conference with you. An unsigned evaluation will be considered incomplete. No personnel actions (for example, longevity increases) will be processed if the evaluation form is incomplete. An employee who fails to sign his/her appraisal is subject to disciplinary action. (Refer to Charleston County's Personnel Policies and Procedures for details.)

Employee Signature			6-20-16
Rater Signature/Sergeant		Michael Ringley	06-20-16
Reviewer Signature/Lieutenant		Kipton Cooke	06-20-16
Reviewer Signature/Captain		David Burnsed	06-21-2016
Reviewer Signature/Chief Deputy		Patricia Garrison	6-21-2016

*This signature is necessary only if the Department Head is a person other than the reviewer.

CHARLESTON COUNTY GOVERNMENT
EMPLOYEE PERFORMANCE APPRAISAL FORM

Section III: DEVELOPMENT PLAN

Name:	Paul Misuraca	ID#		Dept.	Sheriff's Office

For Appraisal Period: July 7, 2016 through July 6, 2017

A.

Goals/Objectives (Each employee should have a job-related goal/objective which they expect to accomplish during the appraisal period. The supervisor and employee will work together in formulating the goal/objective for the appraisal period. The goal/objective listed below should be within the employee's ability to achieve during the upcoming performance appraisal period.)

To apply and attend any court related security school if one becomes available during the next rating period.

B. Personal/Professional Development Plan (This plan includes long-term career and personal development goals which the employee hopes to achieve. This item is for information purposes regarding the employee's interest regarding job enlargement, promotional opportunities, and training needs.)

Maintain all certifications for my law enforcement career. Continue with the Crisis Negotiation Team.

Signature:

Paul Misuraca
Employee

Date: 6-14-16

Signature:

[Signature]
Rater

H. K. Webb
Reviewer

Date: 6-14-16

DEVPLAN.1094

Capt. Burnsed 06-21-2016

Great Job!

Wonderful job / pmg

2016 JUN 29 PM 1:33

Charleston County Employee Performance Appraisal Rating Sheet for:

Employee Name	Paul Misuraca	ID#	
Job Title	Deputy Sheriff	Department	Sheriff's Office/Special Ops

Type of Evaluation:	Annual <u>XXX</u>	Probationary (New Hire) _____
	Probation (Promotional) _____	Probation (Disciplinary) _____
	Other _____	Specify _____

Evaluation Period From	July 7, 2014	to	July 6, 2015

All "outstanding", "marginal", and "unsatisfactory" ratings must have a justification statement. "Marginal" and "unsatisfactory" ratings must indicate areas for improvement. "Outstanding" evaluations must indicate areas of superior accomplishment. Use additional sheets of paper if necessary for your justification statements. Use whole numbers or numbers rounded to the nearest half. Do not use numbers with any other decimals.

Section I - Personal work Traits

The overall rating for WORK HABITS is made up of the ratings for punctuality (P), attendance (A), initiative (I), dependability (D), and safety (S). In the space provided, indicate the performance level for WORK HABITS and write your justification statement.

Note: If, during this rating period, the employee has been out on leave for one of the reasons listed below, check the appropriate space and do not rate Attendance (and divide by 4 instead of 5). In addition, indicate in the justification statement the specific reason for not evaluating Attendance.

This employee has been absent for Family/Medical Leave N/A Chronic Illness/Surgery N/A Other Disability N/A

Overall Rating for WORK HABITS

Rating

P 3.5 +A 2.0 +I 3.5 +D 2.0 +S 3.5 + 5 = Rating

3.0

Justification Statement:

Deputy Paul Misuraca arrives early for duty always prepared for his shift. He conducts himself in a professional manner at all times. He used (13) approved sick leave days during this rating period. He is safety conscious and always practices good officer safety. He is respected by his peers, judges and citizens in any courtroom he is assigned. He arrives early for roll call for his courthouse assignment.

The overall rating for INTERPERSONAL RELATIONSHIPS is made up of the ratings for ability to work well with others (W), ability to communicate (C), public relations/professional conduct with the general public (PR), and disposition/outlook (D). In the space provided, indicate the performance level for INTERPERSONAL RELATIONSHIPS and write the justification statement.

Overall Rating for INTERPERSONAL RELATIONSHIPS

Rating

W 3.5 +C 3.0 +PR 4.0 +D 3.5 + 4 = Rating

3.5

Justification Statement:

Deputy Misuraca always works well with all his co-workers. He has excellent communication skills with the public and is very patient and understanding when dealing with the public in the court rooms. He always maintains a professional demeanor in any situation. He has a positive disposition and is a valued asset to the Charleston County Sheriff's Office and the Citizens of Charleston County.

The overall rating for INDIVIDUAL DEVELOPMENT is made up of job knowledge (J), adaptability to change (A), and desire for self improvement (SI). In the space provided, indicate the performance level for INDIVIDUAL DEVELOPMENT and write the justification statement.

Overall Rating for INDIVIDUAL DEVELOPMENT

J 3.5 +A 3.0 +SI 3.5 + 3 = Rating

Rating

3.5

Justification Statement:

Deputy Misuraca understands and properly applies all procedures for Judicial Security. He is quick to ask for guidance from his supervisors when needed and adapts well to any changes in procedure. He continually looks to improve the operations of the security provided at the Judicial Center. He attends all training that is made available to him while assigned to the Judicial Security Division. He attended a week long Court Security Class at FLETC in Glynco, Georgia during this rating period.

Section II - Job Performance

Indicate the job duty/element which is being evaluated and its rating. Write the appropriate justification statements. Attach additional sheets for justification statements if necessary. (These job duties/elements are in the employee's personnel file and do not have to be resubmitted to the Personnel Department at this time.)

Job Duty/Element

(1) REPORT WRITING

Rating

3.0

Justification Statement:

Deputy Misuraca's reports are complete, concise and grammatically correct with little to no rejections from his supervisors or the records division. He accurately documents all incidents he handles and completes the reports in a timely manner. He ensures his courtroom statistical forms and reports are complete and accurate prior to submitting them for review and monthly tabulation.

Job Duty/Element

(2) APPEARANCE / MAINTENANCE AND OPERATION OF EQUIPMENT

Rating

3.0

Justification Statement:

Deputy Misuraca always maintains a professional appearance. All assigned equipment is well maintained with no documented discrepancies. He is always prepared for his shift and maintains all equipment properly. He portrays a strong professional image through his appearance and attitude. His vehicle and equipment is always clean and in order with no documented collisions or vehicle mishaps. He did have an accidental taser discharge off-duty at home Dec 9, 2014. No damage or injury noted and received non-disciplinary verbal counseling.

Job Duty/Element

(3) PROFESSIONAL RESPONSIBILITIES

Rating

3.0

Justification Statement:

Deputy Misuraca attends all roll call meetings and attends all training assignments as scheduled. He always responds to calls for service within the Judicial Center. He takes control of security within his assigned courtroom at all times. He is quick to assist the public with non-emergency and emergency situations while patrolling the Judicial Center. He had minor issues with defensive tactics during block training and will recertify with an instructor when he returns from his annual leave.

Job Duty/Element

Rating

(4) INTER-OFFICE COMMUNICATIONS

3.5

Justification Statement:

Deputy Misuraca is able to effectively communicate with court staff, civilian employees and his peers. He promotes a positive work environment through his professionalism. He is very courteous to all people he comes in contact with while on duty. He is a respectful subordinate and respectful to all his supervisors in his chain of command.

Job Duty/Element

Rating

(5) CIVIL PROCESS/WARRANT SERVICE

3.0

Justification Statement:

Deputy Misuraca serves all warrants and civil papers in accordance with current policies and procedures. He ensures that all accompanying paperwork is completed correctly and returned in a timely manner.

Job Duty/Element

Rating

(6) COURT SAFETY/SECURITY

4.0

Justification Statement:

Deputy Misuraca follows all current policies and procedures that are in place while securing his assigned courtrooms for court. He always conducts a protective sweep of his assigned courtroom prior to the start of courtroom activities for the day. He makes extra patrols of the Judicial Center to ensure that the proper level of security is being maintained and to identify any problems with security. He makes the proper notifications when problems, issues or safety hazards are identified within the Judicial Center.

Job Duty/Element

Rating

(7) TRANSPORTATION / HANDLING OF PRISONERS

3.0

Justification Statement:

Deputy Misuraca complies with Sheriff's Office Policy and Procedures when handling prisoners. He always practices proper officer safety and ensures that all restraints are applied correctly to ensure both officer and prisoner safety. No reported infractions.

Section III - Employee Development Plan

What was the employee's goal(s) objectives set during the last rating period?

To attend any available training to enhance my knowledge of court security.

Did the employee complete the goal(s)/objective(s)?

Yes

xx

No

Explain answer below. Complete development plan for next rating period and submit it with this rating sheet.
He did attend a week long USMC court security class June 15, 2015 through June 19, 2015 in Glynnco, Georgia.

Section IV - Supervisory Duties/Responsibilities (If Applicable)

Rating

Include supervisory appraisal sheet with this rating sheet.

N/A

Justification Statement

Overall Evaluation:

Total Points 32.5 + Total Items 10 = Overall Numeric Rating 3.250

The scale to be used for the rating definition of the average indicated above is 0.0 to 0.000, Unsatisfactory; 1.0 to 1.999, Marginal (Also, see note below regarding probationary evaluations.); 2.0 to 2.999, Meets Expectations; 3.0 to 3.799, Exceeds Expectations; 3.8 to 4.0, Outstanding.

An evaluation with an overall numerical rating below 2.0 or with two (2) or more ratings of Marginal/Unsatisfactory indicates substandard performance, and the rating definition will be Marginal (regardless of the numerical average). On an annual evaluation, the employee will be placed in a probationary status and shall receive performance counseling and additional evaluation. The employee is expected to meet performance expectations within this probationary time period and to continue to meet expectations throughout employment with Charleston County. (See Charleston County's Personnel Policies for specific procedures.)

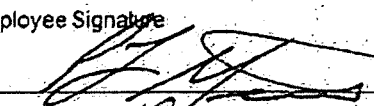
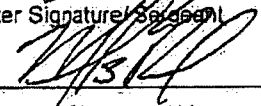
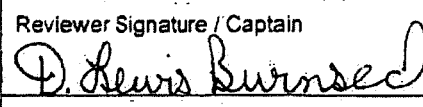
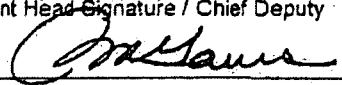
General comments from Supervisor (if desired): Deputy Paul Misuraca continues to do a good job for the Sheriff's Office and the citizens he serves in his position at the judicial security division, family court security assignment.

Employee Notice:

Review the entire appraisal to make sure that you understand its contents. If you have questions, it is your responsibility to have these clarified for you. Sign your name in the appropriate space. (Your signature does not indicate that you necessarily agree with the evaluation. Use the comment section to express yourself regarding the evaluation.)

Employee Comments:

Your signature indicates that your evaluation has been completed and your supervisor has had an evaluation conference with you. An unsigned evaluation will be considered incomplete. No personnel actions (for example, longevity increases) will be processed if the evaluation form is incomplete. An employee who fails to sign his/her appraisal is subject to disciplinary action. (Refer to Charleston County's Personnel Policies and Procedures for details.)

Employee Signature		
	Date	7-15-15
Rater Signature / Sergeant		
 Michael Ringley	Date	07-02-15
Reviewer Signature / Lieutenant		
 Clarice Narana	Date	07-05-15
Reviewer Signature / Captain		
 David Burnsed	Date	07-07-2015
Review Signature / Major		
N/A	Date	
Department Head Signature / Chief Deputy		
 Patricia Garrison	Date	7-8-2015

*This signature is necessary only if the Department Head is a person other than the Reviewer.

CHARLESTON COUNTY GOVERNMENT
EMPLOYEE PERFORMANCE APPRAISAL FORM

Section III: DEVELOPMENT PLAN

Name:	Paul Misuraca	ID#		Dept.	Sheriff's Office

For Appraisal Period: July 7, 2015 through July 6, 2016

A.

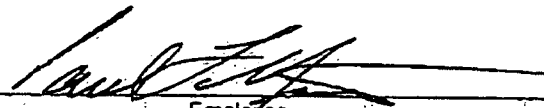
Goals/Objectives (Each employee should have a job-related goal/objective which they expect to accomplish during the appraisal period. The supervisor and employee will work together in formulating the goal/objective for the appraisal period. The goal/objective listed below should be within the employee's ability to achieve during the upcoming performance appraisal period.)

To attend another court security school if one becomes available during the next rating period.

B. Personal/Professional Development Plan (This plan includes long-term career and personal development goals which the employee hopes to achieve. This item is for information purposes regarding the employee's interest regarding job enlargement, promotional opportunities, and training needs.)

Maintain all certifications for my law enforcement career.

Signature:

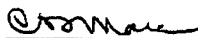

Employee

Date:

7-15-15

Signature:


Rater


Reviewer

Date: 07-02-15

DEVPLAN.1094

Capt. Burnseed 07-07-2015
Thank you for your service!

Good job! [illegible]

RECEIVED
CHARLESTON COUNTY GOV
HUMAN RESOURCES DEPT

2015 JUL 20 AM 11:21

Charleston Cour Employee Performance Appraisal Rating Sheet for:

Employee Name Paul Misuraca Employee ID [REDACTED]
 Job Title Deputy Sheriff Department Sheriff's Office

Type of Evaluation: Annual XXX Probationary (New Hire) _____
 Probation (Promotional) _____ Probation (Disciplinary) _____
 Other _____ Specify _____

Evaluation Period From July 7, 2013 to July 6, 2014

All outstanding, marginal, and unsatisfactory ratings must have a justification statement. Marginal and unsatisfactory ratings must indicate areas for improvement. Outstanding evaluations must indicate areas of superior accomplishment. Use additional sheets of paper if necessary for your justification statements. Use whole numbers or numbers rounded to the nearest half. Do not use numbers with any other decimals.

Section I - Personal work Traits

The overall rating for WORK HABITS is made up of the ratings for punctuality (P), attendance (A), initiative (I), dependability (D), and safety (S). In the space provided, indicate the performance level for WORK HABITS and write your justification statement.

Note: If, during this rating period, the employee has been out on leave for one of the reasons listed below, check the appropriate space and do not rate Attendance (and divide by 4 instead of 5). In addition, indicate in the justification statement the specific reason for not evaluating Attendance:

This employee has been absent for Family/Medical Leave N/A Chronic Illness/Surgery N/A Other Disability NA

Overall Rating for WORK HABITS

Rating

P 4 A+ 2.5 +I 3 +D 3 +S 3.5) 5 = Rating

3

Justification Statement

Deputy Misuraca shows up on time and is often early for his shift. Upon arrival he is prepared for duty. Deputy Misuraca usually submits his leave well in advance and has no documented abuse of sick leave. Deputy Misuraca can be relied upon to accomplish his assignments with minimal supervision. Deputy Misuraca is dependable and completes any task assigned to him correctly and in a timely manner. Deputy Misuraca adheres to prescribed safety measures, promoting a safe environment for all.

The overall rating for INTERPERSONAL RELATIONSHIPS is made up of the ratings for ability to work well with others (W), ability to communicate (C), public relations/professional conduct with the general public (PR), and disposition/outlook (D). In the space provided, indicate the performance level for INTERPERSONAL RELATIONSHIPS and write the justification statement.

Overall Rating for INTERPERSONAL RELATIONSHIPS

Rating

W 3.5 +C 3 +PR 3 +D 3) 4 = Rating

3

Justification Statement

Deputy Misuraca works well with his peers and displays a high degree of respect toward his peers and supervisors. He has no problem with interpersonal communication and he exhibits a high degree of professionalism. He always strives to build an outstanding working relationship with the public, law enforcement agencies and other professional colleagues. Deputy Misuraca is enthusiastic and eager to accomplish his duties and he does so in a pleasant manner.

RECEIVED
CHARLESTON COUNTY GOVT.
HUMAN RESOURCES DEPT
2014 JUN 25 AM 10:34

The overall rating for INDIVIDUAL DEVELOPMENT is made up of job knowledge (J), adaptability to change (A), and desire for self improvement (SI). In the space provided, indicate the performance level for INDIVIDUAL DEVELOPMENT and write the justification statement.

Overall Rating for INDIVIDUAL DEVELOPMENT

Rating

J 3 +A 3 +SI 3) 3 = Rating

3

Justification Statement

Deputy Misuraca is proficient in his job. Deputy Misuraca quickly adapts to environmental and situational changes he encounters. Deputy Misuraca strives to keep abreast of any changes in procedures or laws and seeks additional training when available.

Section II - Job Performance

Indicate the job duty/element which is being evaluated and its rating. Write the appropriate justification statements. Attach additional sheets for justification statements if necessary. (These job duties/elements are in the employee's personnel file and do not have to be resubmitted to the Personnel Department at this time.)

Job Duty/Element

Rating

(1) REPORT WRITING

3.5

Justification Statement

Deputy Misuraca writes a good report containing all pertinent information. The report is chronological, accurate and grammatically correct. He submits reports and other required paperwork in a timely manner. He ensures that all appropriate documentation is completed and checked for accuracy with monthly reports and statistics being turned in on time.

Job Duty/Element

Rating

(2) APPEARANCE- EQUIPMENT
MAINTENANCE/OPERATION

3

Justification Statement

Deputy Misuraca always looks sharp and professional and he complies with the agency's grooming and appearance standards. He always keeps his issued equipment in excellent working condition with no notable discrepancies and ensures all preventive maintenance schedules are met. Deputy Misuraca has no chargeable accidents during this evaluation period.

Job Duty/Element

Rating

(3) PROFESSIONAL RESPONSIBILITIES

3.5

Justification Statement

Deputy Misuraca attends all training functions and scheduled court appearances. He projects a positive and professional image for the Charleston County Sheriff's Office to all he encounters. The quality of his work reflects high professional standards. He has had no formal disciplinary action during this appraisal period.

Job Duty/Element

Rating

(4) PICK-UP ORDER INVESTIGATIONS

3.5

Justification Statement

Deputy Misuraca thoroughly interviews all applicants to attain information that may prove crucial to the safe pickup and transport of therapeutic patients. He performs record checks prior to transports for outstanding warrants, and visually inspects all paperwork to ensure that they are properly completed. In preparation for transport, he will notify and request assistance from the respective agency of jurisdiction. He is well versed with the therapeutic documentation of assigned cases, and has ensured proper documentation of all transport events.

Job Duty/Element

Rating

(5) PATIENT TRANSPORTATION

3.5

Justification Statement

Deputy Misuraca immediately responds to all transport requests. He properly searches all subjects, applies the appropriate restraints and maintains the proper control. Deputy Misuraca strictly adheres to our agency's policies and procedures to ensure the safety of all detainees, the public and fellow law enforcement officers. He notifies his supervisors of all potential issues in a timely manner.

Job Duty/Element

Rating

(6) CROSS TRAINING & ADAPTABILITY WITH
FUGITIVE EXTRADITIONS/WARRANTS

2

Justification Statement

Deputy Misuraca is an experienced Therapeutic Deputy. He is familiar with Fugitive and Warrants procedures. He could show more effort in the service of warrants.

Section III - Employee Development Plan

What was the employee's goal(s) objectives set during the last rating period?

To pursue selection and attendance of any and all law enforcement training related courses related to my current assignment and available through our agency or other outside law enforcement agencies.

Did the employee complete the goals(s)/objective(s)? Yes _____ No X

Explain answer below. Complete development plan for next rating period and submit it with this rating sheet.
No classes were budgeted or available to attend.

Section IV - Supervisory Duties/Responsibilities (If Applicable)

Rating

Include supervisory appraisal sheet with this rating sheet.

Justification Statement

Overall Evaluation:

Total Points 28) Total Items 9 = Overall Numeric Rating 3.11

The scale to be used for the rating definition of the average indicated above is: 0.0 to 0.000, Unsatisfactory; 1.0 to 1.999, Marginal (Also, see note below regarding probationary evaluations.); 2.0 to 2.999, Meets Expectations; 3.0 to 3.799, Exceeds Expectations; 3.8 to 4.0, Outstanding.

An evaluation with an overall numerical rating below 2.0 or with two (2) or more ratings of Marginal/Unsatisfactory indicates substandard performance, and the rating definition will be Marginal (regardless of the numerical average). On an annual evaluation, the employee will be placed in a probationary status and shall receive performance counseling and additional evaluation. The employee is expected to meet performance expectations within this probationary time period and to continue to meet expectations throughout employment with Charleston County. (See Charleston County's Personnel Policies for specific procedures.)

General comments from Supervisor: (if desired)

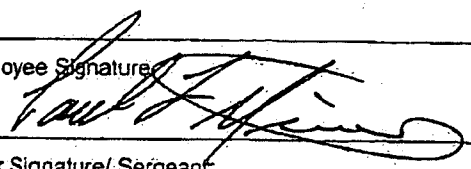
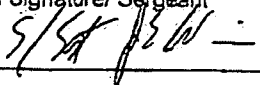
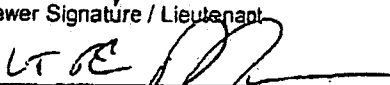
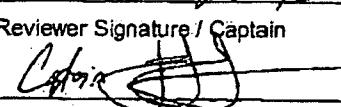
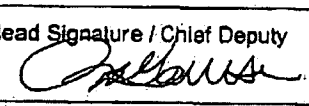
Deputy Misuraca is an experienced member of the Therapeutic Unit. He has proven himself over the years and will be an asset to Court Security.

Employee Notice:

Review the entire appraisal to make sure that you understand its contents. If you have questions, it is your responsibility to have these clarified for you. Sign your name in the appropriate space. (Your signature does not indicate that you necessarily agree with the evaluation. Use the comment section to express yourself regarding the evaluation.)

Employee Comments:

Your signature indicates that your evaluation has been completed and your supervisor has had an evaluation conference with you. An unsigned evaluation will be considered incomplete. No personnel actions (for example, longevity increases) will be processed if the evaluation form is incomplete. An employee who fails to sign his/her appraisal is subject to disciplinary action. (Refer to Charleston County's Personnel Policies and Procedures for details.)

Employee Signature		Date	6-23-14
Rater Signature/ Sergeant	 John Wilson	Date	6-10-14
Reviewer Signature / Lieutenant	 Ronald Mangens	Date	6.18.14
Reviewer Signature / Captain	 John Jacobik	Date	06-18-2014
Review Signature / Major		Date	
Department Head Signature / Chief Deputy	 Patricia Garrison	Date	6/18/2014

*This signature is necessary only if the Department Head is a person other than the Reviewer.

CHARLESTON COUNTY GOVERNMENT
EMPLOYEE PERFORMANCE APPRAISAL FORM

Section III: DEVELOPMENT PLAN

Name: Misuraca, Paul ID No: [REDACTED] Dept. Sheriff's Office/Special Ops

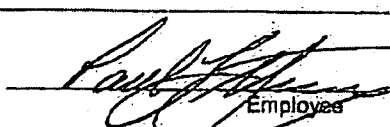
For Appraisal Period: July 7, 2014 Through July 6, 2015

- A. Goals/Objectives (Each employee should have a job-related goal/objective which they expect to accomplish during the appraisal period. The supervisor and employee will work together in formulating the goal/objective for the appraisal period. The goal/objective listed below should be within the employee's ability to achieve during the upcoming performance appraisal period.)

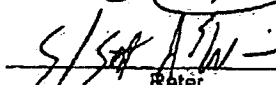
To attend any available training to enhance my knowledge of court security.

- B. Personal/Professional Development Plan (This plan includes long-term career and personal development goals which the employee hopes to achieve. This item is for information purposes regarding the employee's interest regarding job enlargement, promotional opportunities, and training needs.)

To attend college and obtain a higher degree.

Signature: 
Employee

Date: 6-10-14

Signature: 
Supervisor

Reviewer

Date: 6-10-14

Charleston County Employee Performance Appraisal Rating Sheet for:

Employee Name	Misuraca, Paul	Employee ID	[REDACTED]
Job Title	Master Deputy Sheriff	Department	Sheriff's Office

Type of Evaluation:	Annual	XXX	Probationary (New Hire)	
	Probation (Promotional)		Probation (Disciplinary)	
	Other		Specify	

Evaluation Period From	July 7, 2012	to	July 6, 2013

All outstanding, marginal, and unsatisfactory ratings must have a justification statement. Marginal and unsatisfactory ratings must indicate areas for improvement. Outstanding evaluations must indicate areas of superior accomplishment. Use additional sheets of paper if necessary for your justification statements. Use whole numbers or numbers rounded to the nearest half. Do not use numbers with any other decimals.

Section I - Personal work Traits

The overall rating for WORK HABITS is made up of the ratings for punctuality (P), attendance (A), initiative (I), dependability (D), and safety (S). In the space provided, indicate the performance level for WORK HABITS and write your justification statement.

Note: If, during this rating period, the employee has been out on leave for one of the reasons listed below, check the appropriate space and do not rate Attendance (and divide by 4 instead of 5). In addition, indicate in the justification statement the specific reason for not evaluating Attendance.

This employee has been absent for Family/Medical Leave N/A Chronic Illness/Surgery N/A Other Disability NA

Overall Rating for WORK HABITS

Rating	
P 3.0 +A 3.0 +I 3.0 +D 3.0 +S 3.0) 5 = Rating	3.0

Justification Statement

M/Deputy Misuraca is always on time and prepared for work. M/Deputy Misuraca reviews every warrant and all therapeutic paperwork for accuracy prior to service and is able to identify problems before they become an issue. He displays good initiative and readily accepts responsibility and feedback. M/Deputy Misuraca is willing to help others and needs little supervision. He takes the necessary action to correct potential problems and can be depended upon to complete any assignment in an effective and efficient manner ensuring proper notification to his supervisor when necessary. He observes all applicable safety rules and regulations without fail.

The overall rating for INTERPERSONAL RELATIONSHIPS is made up of the ratings for ability to work well with others (W), ability to communicate (C), public relations/professional conduct with the general public (PR), and disposition/outlook (D). In the space provided, indicate the performance level for INTERPERSONAL RELATIONSHIPS and write the justification statement.

Overall Rating for INTERPERSONAL RELATIONSHIPS

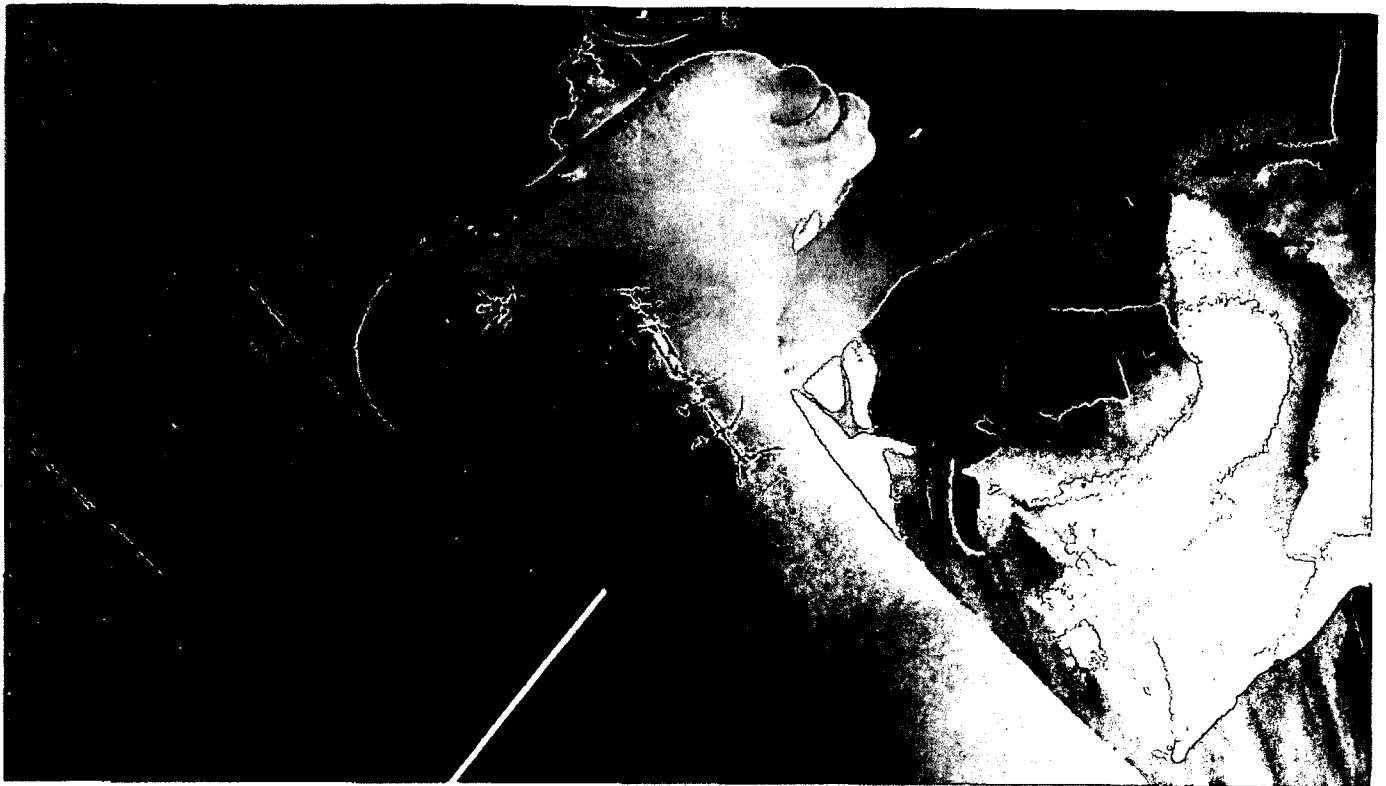
Rating	
W 3.5 +C 3.5 +PR 3.5 +D 3.5) 4 = Rating	3.6

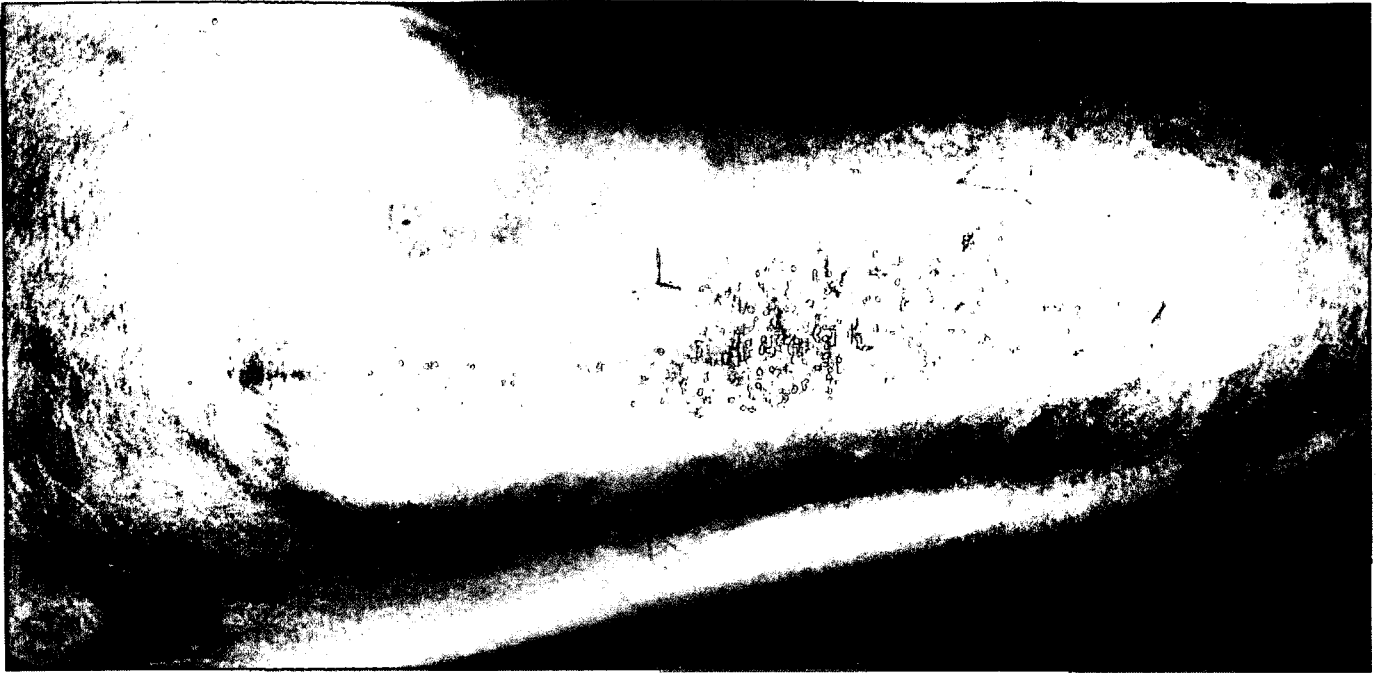
Justification Statement

M/Deputy Misuraca is a knowledgeable employee, who maintains a positive working relationship by displaying a high degree of respect toward his peers and supervisors. His interpersonal communication and his degree of professionalism are very skillful and pleasant. M/Deputy Misuraca always strives to build a good working relationship with the public, law enforcement agencies, and other professional colleagues.

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CHARLESTON COUNTY GOV,
HUMAN RESOURCES DEPT

2013 SEP 11 AM 10:48







OFFICE OF THE
ATTORNEY GENERAL
STATE OF ALABAMA

THE STATE OF SOUTH CAROLINA
In The Court of Appeals

APPEAL FROM SOUTH CAROLINA
Workers' Compensation Commission

Appellate Case No. 2020-001220

Paul Misuraca,

Employee, Respondent,

v.

Charleston County,

Employer,

&

SC Association of Counties SIF,

Carrier, Appellants.

CERTIFICATE OF COUNSEL

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

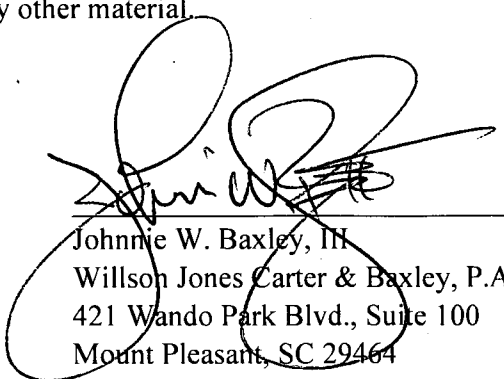
Date:

2/9/2021

RECEIVED

FEB 12 2021

SC Court of Appeals


Johnnie W. Baxley, III
Willson Jones Carter & Baxley, P.A.
421 Wando Park Blvd., Suite 100
Mount Pleasant, SC 29464
(843) 284-1082
jwbaxley@wjlaw.net
Attorney for Appellants