

THE STATE OF SOUTH CAROLINA
In The Court of Appeals
[In The Supreme Court]
Frank Wilson v. American LaFrance
Appellate Case No. 2013-000354
MOTION dated April 3, 2013

RECEIVED

APR 03 2013

SC Court of Appeals

Frank Wilson, Appellant,

v.

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

RECORD ON APPEAL

Frank Wilson
8755 Jessica Court
North Charleston, SC 29406
(843) 327-9616
Appellant

Erin Hantske
McAngus, Goudelock and Courie
P. O. Box 650007
Mount Pleasant, SC 29465
(843) 576-2900
Attorney for Respondent

MOTION

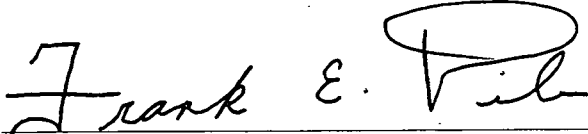
Frank Wilson, Appellant respectfully request that the following **SUPPLEMENTAL RECORDS** be made a part of the Appellant's STATE OF SOUTH CAROLINA Court of Appeals Appellate Case No. 2013-00354- Frank Wilson v. American LaFrance:

- 1.) The Appellant's South Carolina Workers' Compensation Commission Hearing transcript from the Hearing with Commissioner J. Alan Bass on April 10, 2007-
PAGES: 1 thru 39
- 2.) The Appellant's Southeastern Spine Institute patient medical report dated October 12, 2009
- 3.) The Appellant's Southeastern Spine Institute patient medical report dated January 25, 2010
- 4.) The Appellant's Southeastern Spine Institute Physician's Statement (Donald R.

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Johnson, II, MD) dated June 18, 2011

- 5.) The Appellant's Southeastern Spine Institute patient medical report dated November 22, 2011- PAGES: 1 thru 2**
- 6.) The Appellant's Southeastern Spine Institute patient medical report dated December 29, 2011- PAGES: 1 thru 2**
- 7.) The Appellant's Southeastern Spine Institute patient medical report dated February 24, 2012- PAGES: 1 thru 2**
- 8.) The Appellant's Southeastern Spine Institute Pain Management Physician's Statement (William Blane Richardson, MD) dated February 24, 2012- PAGES: 1 thru 2**



DATE: APRIL 3, 2013

Frank Wilson
8755 Jessica Court
North Charleston, SC 29406
(843) 327-9616
(Appellant)

PROOF OF SERVICE OF Appellant's MOTION dated April 3, 2013

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Appellate Case No. 2013-000354

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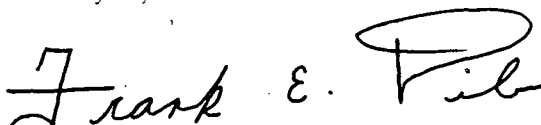
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American LaFrance, Employer, and AIG C/O Gallagher Bassett Services, Inc.,
Carrier, Respondents.

Erin Hantske
McAngus, Goudelock and Courie
P. O. Box 650007
Mount Pleasant, SC 29465
(843) 576-2900
Attorney for Respondents

PROOF OF SERVICE

I hereby certify that I have served the **Appellant's MOTION** dated April 3, 2013- PAGES: 1 thru 2 on American LaFrance and AIG: C/O Gallagher Bassett Services, Inc. by depositing a copy of it in the United States Mail, postage paid, on April 3, 2013, addressed to the attorney of record, Erin Hantske of McAngus, Goudelock and Courie, P. O. Box 650007, Mount Pleasant, SC 29465 with an enclosed copy of: the Appellant's South Carolina Workers' Compensation Commission Hearing transcript from the Hearing with Commissioner J. Alan Bass held on April 10, 2007- PAGES: 1 thru 39, the Appellant's Southeastern Spine Institute patient medical report dated October 12, 2009, the Appellant's Southeastern Spine Institute patient medical report dated January 25, 2010, the Appellant's Southeastern Spine Institute Physician's Statement (Donald R. Johnson, II, MD) dated June 18, 2011, the Appellant's Southeastern Spine Institute patient medical report dated November 22, 2011- PAGES: 1 thru 2, the Appellant's Southeastern Spine Institute patient medical report dated December 29, 2011- PAGES: 1 thru 2, the Appellant's Southeastern Spine Institute patient medical report dated February 24, 2012- PAGES: 1 thru 2 and the Appellant's Southeastern Spine Institute Pain Management Physician's Statement (William Blane Richardson, MD) dated February 24, 2012- PAGES: 1 thru 2.



Frank E. Wilson
8755 Jessica Court
North Charleston, SC 29406
(843) 327-9616
(Appellant)

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[In The Supreme Court]
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Appellate Case No. 2013-000354

Frank Wilson, Appellant,

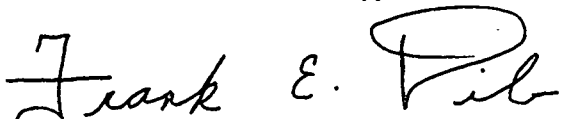
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Erin Hantske
McAngus, Goudelock and Courie
P. O. Box 650007
Mount Pleasant, SC 29465
(843) 576-2900
Attorney for Respondents

PROOF OF SERVICE

I hereby certify that I have filed the **Appellant's MOTION** dated April 3, 2013- PAGES: 1 thru 2 with THE STATE OF SOUTH CAROLINA Court of Appeals with an enclosed copy of: the Appellant's South Carolina Workers' Compensation Commission Hearing transcript from the Hearing with Commissioner J. Alan Bass on April 10, 2007- PAGES: 1 thru 39, the Appellant's Southeastern Spine Institute patient medical report dated October 12, 2009, the Appellant's Southeastern Spine Institute patient medical report dated January 25, 2010, the Appellant's Southeastern Spine Institute Physician's Statement (Donald R. Johnson, II, MD) dated June 18, 2011, the Appellant's Southeastern Spine Institute patient medical report dated November 22, 2011- PAGES: 1 thru 2, the Appellant's Southeastern Spine Institute patient medical report dated December 29, 2011- PAGES: 1 thru 2, the Appellant's Southeastern Spine Institute patient medical report dated February 24, 2012- PAGES: 1 thru 2 and the Appellant's Southeastern Spine Institute Pain Management Physician's Statement (William Blane Richardson, MD) dated February 24, 2012- PAGES: 1 thru 2 by **DELIVERING** a copy of it to THE STATE OF SOUTH CAROLINA Court of Appeals, 1205 Pendleton Street, Columbia, SC 29201.



Frank E. Wilson
8755 Jessica Court
North Charleston, SC 29406
(843) 327-9616
(Appellant)

PROOF OF SERVICE OF Appellant's MOTION dated April 3, 2013

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Appellate Case No. 2013-000354

Frank Wilson, Appellant;

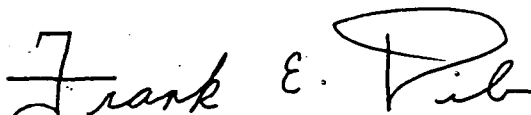
v.

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Carrier, Respondents.

Erin Hantske
McAngus, Goudelock and Courie
P. O. Box 650007
Mount Pleasant, SC 29465
(843) 576-2900
Attorney for Respondents

PROOF OF SERVICE

I hereby certify that I have filed the **Appellant's MOTION** dated April 3, 2013- PAGES: 1 thru 2 with the South Carolina Workers' Compensation Commission with an enclosed copy of: the Appellant's South Carolina Workers' Compensation Commission Hearing transcript from the Hearing with Commissioner J. Alan Bass on April 10, 2007- PAGES: 1 thru 39, the Appellant's Southeastern Spine Institute patient medical report dated October 12, 2009, the Appellant's Southeastern Spine Institute patient medical report dated January 25, 2010, the Appellant's Southeastern Spine Institute Physician's Statement (Donald R. Johnson, II, MD) dated June 18, 2011, the Appellant's Southeastern Spine Institute patient medical report dated November 22, 2011- PAGES: 1 thru 2, the Appellant's Southeastern Spine Institute patient medical report dated December 29, 2011- PAGES: 1 thru 2, the Appellant's Southeastern Spine Institute patient medical report dated February 24, 2012- PAGES: 1 thru 2 and the Appellant's Southeastern Spine Institute Pain Management Physician's Statement (William Blane Richardson, MD) dated February 24, 2012- PAGES: 1 thru 2 by **DELIVERING** of it to the South Carolina Workers' Compensation Commission, 1333 Main Street, Suite 500, Columbia, SC 29201



Frank E. Wilson
8755 Jessica Court
North Charleston, SC 29406
(843) 327-9616
(Appellant)

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BEFORE THE
SOUTH CAROLINA WORKERS' COMPENSATION COMMISSION
WCC FILE NO.: 0506037

FRANK WILSON,
Employee/Claimant,

vs.

AMERICAN LaFRANCE, LLC and
AIG AMERICAN HOME ASSURANCE,
Employer/Carrier.

ORIGINAL

HELD BEFORE: COMMISSIONER J. ALAN BASS
DATE TAKEN: April 10, 2007
TIME TAKEN: 12:15 to 12:52 p.m.
LOCATION: PERIMETER CENTER
4050 BRIDGEVIEW DRIVE
NORTH CHARLESTON, SC
REPORTED BY: Beth W. Kornuta

RECEIVED
JAN 14 2008
S.C. WORKERS COMP. COMM.
OFFICE OF COMMS BASS

LOWCOUNTRY LEGAL MEDIA
COURT REPORTING & VIDEOGRAPHY
920 Trent Street Charleston, SC 29414
(843) 763-9590 (843) 225-5256 fax
llm@knology.net

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A-P-P-E-A-R-A-N-C-E-S

Appearances for the Employee/Claimant

By: Steven E. Goldberg, Esquire
THE STEINBERG LAW FIRM, LLP
P. O. Box 9
Charleston, SC 29402-0009
(843) 720-2800

Appearances for the Employer/Carrier

By: Amanda M. Morgan, Esquire
McANGUS, GOUDELOCK, & COURIE, LLC
P. O. Box 877
Charleston, SC 29402
(843) 534-0101

(INDEX AT REAR OF TRANSCRIPT)

1 COMMISSIONER BASS: This is April
2 10th, 2007. It's 12:15 in the afternoon. This is
3 WCC File Number 0506037. This is the claim of
4 Frank Wilson. Mr. Wilson is present and
5 represented by Steven Goldberg. American LaFrance
6 is the Employer. AIG American Home Assurance is
7 the Carrier. They're represented by Amanda
8 Morgan. This is a hearing on the Defendants' Form
9 21.

10 Prior to the call of the hearing, a
11 prehearing conference was held with Counsel. As a
12 result, there are a few things I need to place on
13 the record.

14 First of all, there are no stated
15 objections to jurisdiction, venue, or to the
16 Commission file being made a part of the record,
17 with the exception of self-serving declarations
18 and unstipulated medical.

19 I have APA submissions from both
20 sides. There are no objections to the Defendants
21 APA. The Defendants object to the report of
22 Dr. Fechter dated ...

23 MS. MORGAN: March 23rd.

24 COMMISSIONER BASS: March 23rd, 2007.
25 Their objection is that the report wasn't

1 submitted within 10 days from the date that this
2 hearing was first scheduled, which was April 2nd.
3 I think they said they got it on the 26th. It was
4 submitted within 10 days from the date of this
5 hearing, so that motion is denied and the record
6 will be let in.

7 Defendants also move to leave the
8 record open for them to get a pulmonologist's IME.
9 That request is denied. This is their hearing and
10 we're going to go forward today.

11 The Defendants admit injuries to the
12 neck and low back, the right shoulder, and the
13 ribs. They claim MMI was reached as to all
14 injuries on October 11th of '06.

15 They ask for credit for any temporary
16 total paid after that date, and they contend that
17 the Claimant is limited to an award of permanent
18 partial disability, with some Dodge medical as
19 called for in the medical records.

20 The Claimant alleges injuries to the
21 back and neck, the lungs -- or at least one of
22 them -- the right shoulder, and arm. He's asking
23 for a determination of compensability as to any
24 denied body parts.

25 He contends that he's not at MMI, that

1 he needs additional treatment for the lungs and an
2 MRI to the shoulder or the neck to determine
3 what's wrong with the neck and the left shoulder.
4 If he is at MMI, he asks for PPD to the affected
5 body parts with Dodge medical.

6 The parties agree to an average weekly
7 wage of \$764.20, a comp. rate of \$509.49. This is
8 an admitted accident that occurred on May 16th,
9 2005.

10 Those are the issues. Ms. Morgan,
11 anything further from you?

12 MS. MORGAN: Do the Defendants have
13 the right to depose Dr. Fechter?

14 COMMISSIONER BASS: You do.

15 MS. MORGAN: Nothing further from the
16 Defendants.

17 COMMISSIONER BASS: Do you want to?

18 MS. MORGAN: Yes.

19 COMMISSIONER BASS: Okay. All right.
20 The record will be left open for the Defendants to
21 depose Dr. Fechter, as is their right to do under
22 the APAs.

23 MR. GOLDBERG: Commissioner?

24 COMMISSIONER BASS: Yes?

25 MR. GOLDBERG: If I may add from the

1 Claimant, we've asked that we be able to submit
2 any physical therapy or work-hardening records,
3 Commissioner, we've just received.

4 COMMISSIONER BASS: Nope.

5 MR. GOLDBERG: Okay.

6 COMMISSIONER BASS: Thank you. Excuse
7 me. I'm sorry. Your motion is denied,
8 respectfully.

9 MR. GOLDBERG: Thank you.

10 COMMISSIONER BASS: Thirty days on the
11 deposition, if you would, please.

12 MS. MORGAN: All right. Thank you.

13 COMMISSIONER BASS: Okay. Ms. Morgan,
14 as I understand it, you wish to call the Claimant
15 as an adverse witness in your case-in-chief; is
16 that right?

17 MS. MORGAN: Correct.

18 COMMISSIONER BASS: Mr. Wilson, raise
19 your right hand, please.

20 (FRANK WILSON, having first been duly sworn,
21 testifies as follows:)

22 COMMISSIONER BASS: All right.

23 Ms. Morgan, as an adverse witness, you may cross
24 him.

25

1 CROSS EXAMINATION

2 BY MS. MORGAN:

3 Q Mr. Wilson, you graduated from high
4 school, correct?

5 A Yes, ma'am.

6 Q And then after high school, you went
7 into the military?

8 A Yes, ma'am.

9 Q And you were honorably discharged,
10 correct?

11 A Yes, ma'am.

12 Q After you left the military you began
13 working in shipping and receiving?

14 A Yes, ma'am.

15 Q So from shipping and receiving, then
16 you also worked in an assembly plant, correct?

17 A Yes, ma'am.

18 Q And following the job, I believe, at
19 Diesel --

20 A Diesel.

21 Q -- Diesel Recon, you started at
22 American LaFrance?

23 A Yes, ma'am.

24 Q Were you originally hired at American
25 LaFrance as an assembly associate?

1 A Yes, ma'am.

2 Q Did that job then lead into the
3 Quality Assurance Department?

4 A Yes, ma'am.

5 Q And can you just give me a brief
6 description of what you did in the Quality
7 Assurance Department?

8 A Basically just ensured quality was
9 inputted into the workmanship that was performed,
10 addressed all safety issues, ensured all processes
11 were conducted according to processes that data
12 put in place as far as quality and safety was
13 concerned.

14 Q Were you just -- would you say overall
15 inspection of the trucks was part of your job?

16 A Yes, ma'am.

17 Q And you received raises throughout the
18 whole time you worked at American LaFrance,
19 correct?

20 A Yes, ma'am.

21 Q And before you were injured you worked
22 there for approximately three years?

23 A Yes, ma'am. My start date was October
24 the 21st, 2002.

25 Q Were you involved in a motor vehicle

1 accident on May 16th, 2005?

2 A Yes, ma'am.

3 Q And you were transported to the
4 emergency room from that accident?

5 A Yes, ma'am.

6 Q You immediately were given x-rays and
7 CT scans of all different body parts, correct?

8 A Yes, ma'am.

9 Q You stopped work from various rib
10 fractures, true?

11 A Yes, ma'am.

12 Q And do you recall that all those rib
13 fractures eventually just healed themselves?

14 A I didn't have any verification that
15 they were healed.

16 Q Did the emergency room then refer you
17 to your family physician?

18 A No.

19 Q Okay. Who is Dr. Benner?

20 A Dr. Benner, he's the workmans' comp.
21 doctor that I was seeing initially for my ribs and
22 my lung.

23 Q Did Dr. Benner eventually clear you
24 after he got a CT scan of your chest?

25 COMMISSIONER BASS: What do you mean

1 by "clear?"

2 BY MS. MORGAN:

3 Q The fractures were healed and so that
4 you could go treat for your back and your neck and
5 your shoulder?

6 A According to his statement he sent
7 out, they were in the process of healing. And
8 based on the CT scan that he submitted, he
9 reported that they were in the process of healing.

10 But as far as a follow-up to verify
11 that they healed and there was no further damage
12 to my ribs or to my lung, that didn't take place.
13 And that was a great concern for myself.

14 Q So after you treated with Dr. Benner,
15 just -- I want to get a brief idea of the
16 different type of treatment from Dr. Stovall.
17 Didn't he prescribe physical therapy?

18 A Yes.

19 Q And then also he performed injections
20 on your neck and your lower back, correct?

21 A Actually on my neck, my lower back,
22 middle of my back, and my right shoulder.

23 Q Did you complain to Dr. Stovall at any
24 point about your left shoulder?

25 A No.

1 Q Did Dr. Stovall know about your
2 complaints about your chest and your ribs?

3 A Yes.

4 Q Okay. And he didn't recommend any
5 treatment, did he?

6 A We had several conversations. One of
7 the conversations, he recommended that I see my
8 family physician. He also made a comment as far
9 as it could be gas, which I knew couldn't be the
10 case because I had just had multiple fractured
11 ribs and a chest wall injury. And --

12 Q Did you follow up with your family
13 physician?

14 COMMISSIONER BASS: Hold on a second.
15 Were you finished?

16 THE WITNESS: Yes. Yes.

17 MS. MORGAN: All right. I'm sorry.

18 COMMISSIONER BASS: Go ahead.

19 BY MS. MORGAN:

20 Q You can finish.

21 A Okay. Basically I wasn't comfortable
22 with the comment he made as far as it could be
23 gas. Because basically having the trauma to my
24 chest wall and the punctured lung and still
25 remaining to have chest pains, I would have felt

1 very comfortable getting a follow-up CT scan to
2 determine why I'm still having chest pains and
3 still remaining to have breathing problems. And
4 that didn't take place.

5 Q Okay. Who is your family physician?

6 A Dr. Lloyd Hepburn.

7 Q Did you follow up with Dr. Lloyd
8 Hepburn?

9 A I actually went in on a check-up. I
10 mentioned it to him. And he's just basically a
11 family doctor, so he couldn't really comment in
12 depth.

13 Q Did he refer you to anybody else?

14 A No. He said that should be something
15 that I bring up at the workmans' comp.

16 Q When you were treating with
17 Dr. Stovall, you were written out of work until
18 about January 2006; is that true?

19 A Basically just going back and forth.
20 And I would get written out in spurts, then go
21 back. He'd take me out, try different treatment
22 methods, and basically as of September -- between
23 August and September of 2005, anywhere between
24 that time frame was actually less physical time I
25 worked at American LaFrance due to Dr. Stovall

1 just trying different methods on treating me as
2 far as my back, my neck, and my shoulder. Doing
3 injections, physical therapy. Yes, physical
4 therapy and injections.

5 Q Well, I want to ask you more about
6 what -- I mean, were you written completely out of
7 work but you continued to go back to American
8 LaFrance, correct?

9 A No, no. I only went back when
10 authorized.

11 Q Is there any point that you went back
12 before you were written back to work?

13 A There was one occasion I went back.
14 Dr. Stovall, he wrote me out for four weeks and
15 the four weeks expired. Not knowing any better, I
16 went back due to the four weeks being expired.
17 And at that time I was instructed to get
18 verification from Dr. Stovall that I was actually
19 able to come back to work.

20 And at that time he was contacted, and
21 he stated that he hadn't released me back to work.
22 And at that time I was allowed to go back home and
23 continued to go through the physical therapy and
24 the epidural injections.

25 COMMISSIONER BASS: Excuse me just a

1 second. Sir, when you're answering her questions
2 I need you to do two things. One, listen to her
3 question carefully so that you answer what she
4 asks and not go off on tangents.

5 THE WITNESS: Yes, sir.

6 COMMISSIONER BASS: Two, try and avoid
7 telling us what doctors told you unless she asks
8 you or unless you can fairly glean from her
9 question that she wants you to tell us what the
10 doctor said.

11 THE WITNESS: Yes, sir.

12 COMMISSIONER BASS: Go ahead, ma'am.

13 BY MS. MORGAN:

14 Q But, Mr. Wilson, there was a time that
15 you returned and the people at American LaFrance
16 turned you away, saying they needed that note from
17 the doctor, correct?

18 A Yes, ma'am.

19 Q Okay. And when you first went to
20 Dr. Stovall, didn't you fill out a new patient
21 form?

22 A Yes.

23 Q And on that form, do you recall saying
24 you had complaints to your left hand, lower back,
25 mid to upper back?

1 A Can you repeat that for me?

2 Q And I can show you the form.

3 COMMISSIONER BASS: Is that in the
4 records?

5 MS. MORGAN: Yes. It's Defendant's
6 APA 4, page 15.

7 COMMISSIONER BASS: Okay. Thank you.

8 BY MS. MORGAN:

9 Q Is this your handwriting?

10 A Yes, ma'am.

11 Q Okay. And do you recall writing that
12 you had complaints to your left hand, lower back,
13 mid to upper back?

14 A That's probably -- what I meant was
15 left-hand side of my lower back.

16 Q Okay.

17 A Not the left hand. Left-hand side. I
18 apologize for that.

19 Q Okay. So this right here is -- just
20 to make sure we know what you're talking
21 about -- left-hand side to the lower back?

22 A Yes.

23 Q Mid to upper back pain, correct?

24 A Yes, ma'am.

25 Q But on --

1 COMMISSIONER BASS: Excuse me a
2 second. What does this "etc." mean? Show him, if
3 you would, please. What does "etc." mean?

4 THE WITNESS: Right shoulder. I
5 didn't have enough room to fit everything in.

6 COMMISSIONER BASS: All right. Go
7 ahead.

8 BY MS. MORGAN:

9 Q And right after you filled out this,
10 you in fact then told Dr. Stovall you were having
11 right shoulder pain. So he did treat you for the
12 right shoulder?

13 A Yes, ma'am.

14 Q Okay. But at that initial visit, did
15 you complain of anything about your left shoulder?

16 A No, ma'am.

17 Q Okay. Did you tell him in this
18 initial visit or in that initial form that you
19 were having pain in your chest or in your ribs or
20 even breathing?

21 A Not at the initial visit. But
22 throughout the visits I mentioned it several
23 times. And that's when he recommended that I see
24 my family physician, or he recommended it could be
25 gas.

1 Q Isn't it true that you at one point
2 requested to be seen by another doctor?

3 A As far as a second opinion?

4 Q Yes.

5 A Yes, ma'am.

6 Q And we went and sent you to
7 Dr. Stovall, correct?

8 A Dr. Tountas.

9 Q Excuse me. Dr. Tountas?

10 A Yes, ma'am.

11 Q And did Dr. Tountas review all the
12 treatment that you've had with Dr. Stovall?

13 A According to his response, he said he
14 reviewed all the records.

15 Q And he --

16 COMMISSIONER BASS: Are you asking him
17 whether he knows firsthand what the guy read?

18 MS. MORGAN: What they really
19 discussed in the appointment, if it was firsthand.

20 BY MS. MORGAN:

21 Q Did you tell Dr. Tountas about what
22 you've had done at Stovall's office?

23 A No. I just relied on his words as far
24 as reviewing all my medical records.

25 Q But you didn't mention that you were

1 having any breathing problems to Dr. Tountas, did
2 you?

3 A No, I didn't mention that to him.

4 Q And you didn't mention the left
5 shoulder, did you?

6 A No.

7 Q Okay. Mr. Wilson, you feel that
8 you're able to work at this time, don't you?

9 A I would feel more comfortable getting
10 the remaining issues reviewed, in fear of the
11 injury.

12 COMMISSIONER BASS: Sir, it was a
13 simple question. Give us a simple answer. Can
14 you work or not?

15 THE WITNESS: No, not at this time.

16 COMMISSIONER BASS: Now tell us why.

17 A At this time I still have open issues.
18 One is with my left shoulder, and I still have
19 problems as far as chest pain and breathing
20 problems.

21 BY MS. MORGAN:

22 Q Do you recall testifying to me that if
23 your same job was available at American LaFrance,
24 you would reapply?

25 A Yes.

1 Q Do you feel you would be able to do
2 the duties required in the Quality Assurance
3 Department?

4 A No, ma'am.

5 Q Okay. What about making sure
6 everything is checked out with the trucks are you
7 unable to do?

8 A The job I had, it required me to do a
9 lot of bending, which puts a lot of strain on my
10 back. A lot of climbing, a lot of crawling, and
11 that puts a lot of strain on my back and it causes
12 great pain in my lower back.

13 And as far as the lifting, the right
14 shoulder and the left shoulder have lifting
15 restrictions. And time after time, I'm required
16 to lift. And that's basically why I feel I need
17 more treatment.

18 Q But do you remember telling me in your
19 deposition that, yes, you would look into getting
20 back into American LaFrance if there was a
21 position available?

22 A Yes, if there's one available that
23 meets the restrictions that I have.

24 Q Do you recall seeing an expert that
25 went over all your job qualities and all your

1 history and they told you what jobs are available?

2 A I met with someone. It was a brief
3 meeting. As far as going over everything that was
4 available, that didn't take place.

5 MS. MORGAN: Commissioner, I'm just
6 referring to our report.

7 COMMISSIONER BASS: The Korvel (ph)
8 report?

9 MS. MORGAN: Yes, which is -- actually
10 she did meet with Mr. Wilson. It was not just a
11 labor and assessment skills.

12 COMMISSIONER BASS: All righty.

13 BY MS. MORGAN:

14 Q Did she go over the jobs that are
15 available in the area in the quality assurance
16 departments?

17 A No. No, ma'am.

18 Q You understand that you have lifting
19 restrictions of 25 pounds, correct?

20 A Yes, ma'am.

21 Q And you feel that you would be able to
22 do a job within those restrictions?

23 A I don't feel comfortable right now
24 because I have an issue with my left shoulder.
25 And in fear of reinjuring it, not knowing the

1 extent of the damage done --

2 COMMISSIONER BASS: Is that a no?

3 THE WITNESS: Say again, sir?

4 COMMISSIONER BASS: If you'd just
5 repeat the question again, please.

6 BY MS. MORGAN:

7 Q Would you feel comfortable returning
8 to a job within the 25-pound lifting restrictions,
9 yes or no?

10 A No.

11 COMMISSIONER BASS: All right. Now
12 you can tell us why, again.

13 MS. MORGAN: Go ahead.

14 COMMISSIONER BASS: Is this the same
15 answer you gave before, left shoulder and worried
16 about hurting your back again?

17 THE WITNESS: Yes, sir.

18 COMMISSIONER BASS: All right. Next
19 question.

20 BY MS. MORGAN:

21 Q However, sir, you did not complain
22 about your left shoulder until your deposition in
23 February of 2007; isn't that correct?

24 A Yes.

25 Q Okay.

1 MS. MORGAN: I have no further
2 questions.

3 COMMISSIONER BASS: All right.
4 Mr. Goldberg?

5 DIRECT EXAMINATION

6 BY MR. GOLDBERG:

7 Q Just on the background. What branch
8 of the military did you serve in?

9 A United States Navy.

10 Q And how long were you in the Navy for?

11 A Eight years.

12 Q All right. And other than that your
13 education is high school?

14 A Yes.

15 Q And she went over all of your job
16 responsibilities. Any other jobs that you've had
17 that she did not mention?

18 A We covered everything.

19 Q Let's talk about your treatment from
20 Dr. Stovall. When's the last time you had an
21 injection into your back?

22 A I want to say late summer of -- early
23 to mid summer of 2006.

24 Q Did you ever try to go back and get
25 another injection?

1 A Yes, I made several attempts.

2 Q And when was the last time you made
3 that attempt?

4 A The end of January 2007.

5 Q And were you allowed to come back in
6 and see him?

7 A I've left several messages, never got
8 a return phone call. And I've called several
9 times.

10 Q Have you had an opportunity to tell
11 Dr. Stovall about your ongoing left shoulder
12 problems?

13 A No.

14 Q Would you have told him about those
15 problems had you gone to those appointments?

16 A Certainly.

17 Q All right. Let's talk about the body
18 parts that were injured, and let's start with the
19 right shoulder and the neck. When you first got
20 injured, what was giving you the most problems?

21 A Basically my back, right side of my
22 neck going into my shoulder, and the chest pains
23 and the breathing problems.

24 Q When did your left shoulder problems
25 begin?

1 A This is something that basically got
2 aggravated through a work conditioning/FCE. And
3 they --

4 Q Explain what you were doing then.

5 COMMISSIONER BASS: Well, let's get an
6 answer to your original question, which is when.
7 When did your left shoulder first start giving you
8 problems?

9 A Okay. I want to say from the time
10 frame of July to August of 2006. This is when I
11 noticed that it got aggravated.

12 I've always had pain in the left side
13 of my neck, and it would go into my left shoulder.
14 But when it got aggravated, that's when the pain
15 just began to elevate.

16 And this time frame was during the
17 time frame of going through the work conditioning
18 program/FCE and basically with a whole lot of
19 lifting, going up and down, going forth.

20 And by me having the injury to my
21 right shoulder, just compensating the weight with
22 the left shoulder, trying to compensate for my
23 right shoulder. And I believe at that time it got
24 aggravated.

25

1 BY MR. GOLDBERG:

2 Q Do you want to follow up with any
3 doctor regarding your left side neck and shoulder?

4 A Yes.

5 Q And you went to see Dr. Falberg (ph)
6 on our recommendation, correct?

7 A Yes.

8 Q And would you like to follow up with
9 his recommendations?

10 A Yes.

11 Q Let's talk a little bit about your
12 chest. When does your chest aggravate you
13 currently? How does that affect you and your
14 lung?

15 A Basically just any time I drink
16 anything with caffeine in it, it elevates the pain
17 in my chest. Just going up and down the stairs in
18 my place of residence, it affects my breathing and
19 elevates the pain in my chest.

20 Q The heavier breathing is the more pain
21 as the cause?

22 A Yes.

23 Q Your restrictions are lifting 25
24 pounds. Tell me what activities you are or aren't
25 able to do at the current time that you were able

1 to do beforehand.

2 A Basically playing sports. I stay by
3 myself, so I have to do a lot of my housekeeping
4 and just basic stuff around on the house. It
5 limits me from doing that. And basically I have
6 very, very -- I guess the lifting restriction just
7 limits me to do a whole lot of stuff I was able to
8 do before.

9 Q Let's talk about your right shoulder
10 first. What can and can't you do with your right
11 arm that you could have done beforehand?

12 A Just lifting.

13 Q Now what about your left shoulder?

14 A Same thing, lifting.

15 Q At this point did you want to get
16 surgery for your left shoulder, as recommended by
17 Stovall? And he said you could hold off on it,
18 but is that something you would consider in the
19 future?

20 A Yes. I would definitely leave that
21 option open.

22 COMMISSIONER BASS: Is this the left
23 shoulder you're talking about?

24 MR. GOLDBERG: Right shoulder.

25 COMMISSIONER BASS: Right shoulder?

1 Okay.

2 BY MR. GOLDBERG:

3 Q Dr. Stovall agreed that y'all could
4 wait on it; is that correct?

5 A Yes.

6 Q Okay. You want to return to work in
7 some capacity, don't you?

8 A Yes. Yes, certainly.

9 Q And do you feel with proper treatment
10 you'll be able to return to work?

11 A Yes.

12 Q And you're not asking anyone to find
13 you totally and permanently disabled at your age?

14 A No, no.

15 Q All right. And do you think that once
16 you have the MRI to your neck again and they look
17 into your shoulder that you'll be able to make an
18 informed decision on returning to work?

19 A Sure. Yes.

20 Q All right. Okay. Dr. Fechter has
21 also recommended you some treatment. Would you
22 also want to continue with the treatment that he's
23 recommended, as far as medications?

24 A Yes, yes.

25 MR. GOLDBERG: One second, Your Honor.

1 BY MR. GOLDBERG:

2 Q What happened with your job at
3 American LaFrance? You were on restricted duty,
4 then what happened?

5 A I was on restricted duty, and ended up
6 getting terminated. And this was due to the sale
7 of the company. They exchanged owners. And I
8 received a letter in the mail stating that at the
9 time of the sale I was unable to work, and due to
10 that process they had no choice but to terminate
11 me. And this took place December 14, 2005.

12 Q Okay. All right. Was everybody
13 terminated? Well, I know one was technically
14 terminated. Was there anyone who switched over to
15 the new company?

16 A I'm not sure. I just took the
17 interpretation of the letter that they sent me.
18 And they stated that you've been on workmans'
19 comp. and you're not able to work during the time
20 of the sale, we have no choice but to terminate
21 you.

22 Q Has anyone ever written you a letter
23 or told you in person from the company that you
24 could reapply to the new company?

25 A I did get a letter during the time I

1 was out, going through my physical therapy. But
2 at that time I still had restrictions as far as my
3 back, my right shoulder, and my neck. And I
4 hadn't gotten my limitations on what I could do
5 and what I couldn't do.

6 MR. GOLDBERG: I have no further
7 questions.

8 COMMISSIONER BASS: All right.

9 MS. MORGAN: I just have about two
10 follow-up.

11 RE-CROSS EXAMINATION

12 BY MS. MORGAN:

13 Q Mr. Wilson, you stated that you
14 started having this left side of the neck shoulder
15 pain after your FCE, correct?

16 A Well ...

17 COMMISSIONER BASS: Go ahead. Tell
18 her what you said.

19 A It was more aggravated. I mean, the
20 pain was always in my neck, period, rotating from
21 the right side to the left side.

22 COMMISSIONER BASS: He said work
23 hardening/FCE. Sir, you need to listen to her
24 questions and answer what she asks. Okay?

25 THE WITNESS: Yes, sir.

1 COMMISSIONER BASS: That's what he
2 said twice.

3 MS. MORGAN: Okay.

4 BY MS. MORGAN:

5 Q I just want to make sure, you said
6 it's around July or August 2006, correct.

7 A Yes.

8 Q And then you returned to Dr. Stovall
9 after that point, correct?

10 A To get released.

11 Q Okay. But he did talk to you and
12 listen to your complaints, correct?

13 A At that time he just gave me the FCE
14 and said that you're released. I've got you at
15 MMI and if you have any further questions, you're
16 reading for an injection, give us a call and we'll
17 do that.

18 Q Okay. But you did not tell him about
19 this left shoulder pain, did you?

20 A No.

21 Q Okay. And you don't recall at any
22 time there being an offer for you to reapply to
23 the new company?

24 A No.

25 Q Okay.

1 MS. MORGAN: I have no further
2 questions.

3 COMMISSIONER BASS: Okay. Anything
4 else from you?

5 MR. GOLDBERG: No, not at this point,
6 Your Honor.

7 COMMISSIONER BASS: All right. Sir,
8 you mentioned that the problem started, did you
9 say -- I thought you said June or July of 2006.
10 Is that what you said?

11 THE WITNESS: July to August, in that
12 time frame.

13 COMMISSIONER BASS: Okay. Fair
14 enough. When you saw Dr. Tountas, on page 49 of
15 the APA's, his report says, "His chief complaint
16 is intermittent pain in the neck from the right to
17 the left side." So when you saw him, were you
18 having left-sided neck pain?

19 THE WITNESS: The day of, no.

20 COMMISSIONER BASS: Well, it says
21 right here, from the right to the left side.

22 THE WITNESS: That was rotating. I
23 mean, the day of, I didn't have it. I mean, it
24 was more on the right side.

25 COMMISSIONER BASS: That's what he

1 says, primarily right.

2 THE WITNESS: Yes.

3 COMMISSIONER BASS: "His chief
4 complaint is intermittent pain in the neck from
5 the right to the left side, primarily right."

6 THE WITNESS: Yes.

7 COMMISSIONER BASS: Is that accurate?

8 THE WITNESS: Yes, sir.

9 COMMISSIONER BASS: And you're saying
10 that the pain going down into the left shoulder
11 appeared between a month or two months later?

12 THE WITNESS: Yes, sir.

13 COMMISSIONER BASS: In July or August.
14 Now, the -- let me see if I get this time sequence
15 right. In the August notes -- well, July 31st,
16 2006, Dr. Stovall recommends a work hardening,
17 work conditioning program for the next four to six
18 weeks. Did you in fact go through that work
19 hardening program?

20 THE WITNESS: Yes, sir.

21 COMMISSIONER BASS: Okay. And August
22 24th, 2006, his note says, "He is completing a
23 work conditioning program and getting ready to
24 undergo an FCE." Did you in fact do an FCE in
25 either late August or early September of '06?

1 THE WITNESS: Yes, sir.

2 COMMISSIONER BASS: Okay. And what
3 type of things did they do for you or to you at
4 work hardening, or during the FCE that aggravated
5 your neck to the point where the left neck pain
6 started radiating into the left shoulder? What
7 were they doing?

8 THE WITNESS: Basically just had me
9 doing a lot of lifting. And just like I said,
10 extended amount of lifting, and doing an extended
11 amount of lifting.

12 COMMISSIONER BASS: Okay. Did they do
13 anything as far as neck exercises or anything of
14 that nature?

15 THE WITNESS: No.

16 COMMISSIONER BASS: Nothing at all to
17 the neck?

18 THE WITNESS: No. Just basically
19 lifting, riding on a bike, stretching. That's
20 basically it.

21 COMMISSIONER BASS: Okay. Did they
22 make you do range-of-motion exercises as far as
23 your neck is concerned?

24 THE WITNESS: No.

25 COMMISSIONER BASS: They didn't make

1 you do this (indicating)?

2 THE WITNESS: Wasn't included.

3 COMMISSIONER BASS: Wasn't included?

4 You were complaining of neck pain and they didn't
5 treat it?

6 THE WITNESS: No, sir.

7 COMMISSIONER BASS: All right. Fair
8 enough. Have you done anything to have -- is
9 there anything that you've done since you were
10 injured on May 16th, 2005 that could have possibly
11 reinjured your neck or your left shoulder?

12 THE WITNESS: No, sir, outside -- no,
13 sir.

14 COMMISSIONER BASS: As far as the
15 problems in your left shoulder, does your neck
16 always hurt first before the shoulder hurts, or
17 does the left shoulder sometimes hurt independent
18 of neck pain?

19 THE WITNESS: Sometimes it's both.
20 And one given time it's just the neck, then it
21 will rotate into the shoulder. Other times, it's
22 just the shoulder.

23 COMMISSIONER BASS: Now when you say
24 the shoulder hurts, is it into the shoulder joint
25 or is it more in the muscles behind the shoulder?

1 THE WITNESS: It's more the shoulder
2 blade itself.

3 COMMISSIONER BASS: The blade? Not
4 the actual point, the shoulder joint? You're
5 talking about behind it?

6 THE WITNESS: No. It's just basically
7 in the blade itself.

8 COMMISSIONER BASS: Is that behind the
9 shoulder? Are you talking about the shoulder
10 blade behind the shoulder or the actual shoulder
11 joint, right at the top?

12 THE WITNESS: The shoulder joint.

13 COMMISSIONER BASS: Okay. I don't
14 have anything else from this fellow. Do we have
15 anything else from you?

16 MR. GOLDBERG: Not at this point.

17 COMMISSIONER BASS: Ms. Morgan?

18 MS. MORGAN: Nothing further.

19 COMMISSIONER BASS: All right. Do you
20 have any witnesses?

21 MS. MORGAN: I don't believe we need
22 to call Dave. I mean, he testified that he did
23 return to work. That was the only -- at certain
24 points.

25 COMMISSIONER BASS: Okay. Okay.

1 MR. GOLDBERG: I'd like to call David
2 as a witness, very briefly.

3 COMMISSIONER BASS: Very good. Can
4 you get him from up there?

5 (At this time there is an off-the-record
6 conversation.)

7 COMMISSIONER BASS: What's your name,
8 sir?

9 THE WITNESS: David Jackson.

10 COMMISSIONER BASS: Raise your right
11 hand.

12 (DAVID JACKSON, having been first duly
13 sworn, testifies as follows:)

14 COMMISSIONER BASS: Okay.

15 DIRECT EXAMINATION

16 BY MR. GOLDBERG:

17 Q And you know Mr. Wilson from work?

18 A Yes, sir.

19 Q All right. So you worked at the old
20 American LaFrance. And what is it called now?

21 A It's called American LaFrance, LLC
22 now.

23 Q Okay. So it's just a change. And you
24 actually went as part of the switch then,
25 obviously?

1 A I was released by Freightliner and
2 taken up by American LaFrance, LLC.

3 Q And what was your relationship with
4 Frank as a boss and employee? How much did
5 witness him and see him work?

6 A Not as a boss, as the Occupational
7 Nurse of American LaFrance. So I had a lot of
8 dealings with Frank, mostly after his accident.

9 Q Do you consider him an honest,
10 hard-working employee?

11 A I do. I think Frank was a very good
12 worker for us.

13 Q Honest?

14 A Yes, sir.

15 Q All right. And truthful with you at
16 all times?

17 A I believe so, yeah.

18 Q All right.

19 MR. GOLDBERG: I have no further
20 questions.

21 COMMISSIONER BASS: Ms. Morgan,
22 anything from you?

23 MS. MORGAN: I have nothing further.

24 COMMISSIONER BASS: Okay.

25 MR. GOLDBERG: That's all, Your Honor.

1 COMMISSIONER BASS: All right.

2 Anything in reply?

3 MS. MORGAN: Nothing in reply.

4 COMMISSIONER BASS: All right. Let me
5 speak to the lawyers, please.

6

7 (The hearing concluded at 12:52 p.m.)

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1 CERTIFICATE OF REPORTER

2 I, Beth W. Kornuta, Court Reporter and
3 Notary Public in and for the State of South
4 Carolina do hereby certify that the aforementioned
5 hearing held before Commissioner J. Alan Bass was
6 recorded by me and transcribed through
7 computer-aided transcription by me to the best of
8 my ability.

9 I FURTHER CERTIFY that the foregoing
10 transcript is a true and correct transcript of the
11 testimony given by the said witnesses at the time
12 and place specified.

13 I FURTHER CERTIFY that I am neither attorney
14 nor counsel for, nor related to nor employed by
15 any of the parties to the action in which this
16 hearing is taken, neither am I financially
17 interested in this action.

18 IN WITNESS WHEREOF, I have set my hand and
19 seal this 9th day of JANUARY, 2008.

20

21

22

23 Beth W. Kornuta, CR
24 Notary Public for South Carolina
My Commission Expires: 6/18/2013

25

SOUTHEASTERN SPINE INSTITUTE

WILSON, FRANK

Patient #133723

October 12, 2009

This patient is a patient of Dr. Tom Roush's. I have reviewed his MRI, his imaging studies. He has a severely collapsed L5-S1 disc but has progression of the level above on the 7/11/09 scan. In fact the radiologist compared this to a 7/26/06 scan and states there is progression. Additionally the patient has complaints of severe neck pain which he feels is worsening. He last had a scan of his 1/08.

The patient has seen Dr. Billy Estes. Dr. Estes has advised that he will need arthroscopic shoulder surgery bilaterally.

At this point in regards to the patient's low back I would delay having an L5-S1 fusion done. I think it would be important for him firstly to have a diagnostic discogram to make sure as much as possible that the L4-L5 disc is not additionally involved in this situation. If it is then the patient may be looking at a two level fusion.

I would suggest firstly a diagnostic discogram. Additionally I think an updated cervical MRI needs to be obtained.

DRJ/dm
T- 10/16/09

Donald R. Johnson, MD

SOUTHEASTERN SPINE INSTITUTE

WILSON, FRANK

Patient #133723

January 25, 2010

Mr. Wilson returns today, he has not had the discogram that I previously recommended per my October note. Mr. Wilson relates that his insurance company did send him for an updated MRI scan, which in my opinion probably was unnecessary. He had a scan that I previously have reviewed which was just a few months old. He has severe changes at the 5-1 level with severe disc space collapse and almost bone on bone. He may be a candidate for surgical intervention, but I am concerned about the level above, which on the MRIs is not normal. This is the reason that I have recommended a discogram be done. This would be short, an outpatient procedure, take no more than 15 minutes and would help us with planning. The patient after discography may not be a candidate for any surgery, but certainly I don't think I can make a reasonable recommendation in regards to whether he needs surgery or not and which surgery he might need without a discogram. I think it is paramount at this point that the patient have a discogram previously recommended and unfortunately updating MRIs will not help us with this issue.

Donald R. Johnson, M.D.

DRJ/dam

T- 1/28/10

Cc: Dusty Rhoades, Esquire
Patient



Claimant's Name: Frank E. Wilson
Physician's Name: Donald R. Johnson, II, MD
Practice/Clinic: Southeastern Spine Institute
Preparer's Name: Donald R. Johnson, II, MD
Phone: (843) 849-1551

Employer's Name: American LaFrance
Insurance Carrier: AIG: C/O Gallagher Bassett Services, Inc.
SCWCC File No: 0506037

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

Date of Injury or Illness: 5/16/08

Date of first office visit: 6/18/08 Date of last visit: 10/12/10

Diagnosis or nature of injury or illness: low back injury, L5-S1, neck

Body part(s) injured: spine Body part(s) affected: back + legs, arm

Date of Maximum Medical Improvement: 10/12/10 from surgical standpoint

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

_____ The claimant is **able to return to work** without restriction. 21% whole person
_____ The claimant is **able to return to work with the following restrictions:** 20% low back
(Not disability but impairment) 5% whole person
2% neck

The claimant is **unable to return to work** at his or her current employment.

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

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

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

with Dr. B. Richardson in pain management
Ongoing 2-3% work + neck + Rxmt

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

6/18/11
Date

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

WILSON, FRANK
Patient #133723
DOB: 02/07/1969
November 22, 2011

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

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

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

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

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

Allergies: No known drug allergies.

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

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

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

WILSON, FRANK

Patient #133723

DOB: 02/07/1969

November 22, 2011

Page 2

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

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

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

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

Virginia G. Blease, PA-C

VGB/jls
T- 12/06/2011

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WILSON, FRANK

Patient #133723

DOB: 02/07/1969

December 29, 2011

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

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

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

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

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

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

Allergies: No known drug allergies.

WILSON, FRANK

Patient #133723

DOB: 02/07/1969

December 29, 2011

Page 2

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

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

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

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

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

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

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

Virginia G. Blease, PA-C

VGB/jls

T- 01/09/2012

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WILSON, FRANK

Patient #133723

DOB: 02/07/1969

February 24, 2012

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

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

ALLERGIES: NKDA.

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

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

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

(continued)

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

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

Suzanne E. Livengood, PA-C

SEL/dam

T- 03/06/12

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

February 24, 2012

VIA HAND DELIVERY

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

Dear Dr. Richardson:

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

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

Frank E. Wilson

Date: February 24, 2012

Frank E. Wilson

[Handwritten signature]

W. Blane Richardson

Date: _____

2/24/12

W. Blane Richardson, MD

Comprehensive Center For Pain Of Southeastern Spine Institute

913 Bowman Road Suite B

Mount Pleasant, SC 29464

(843) 388-6552