

Brief of Appellant **RECEIVED**

JUL 28 2021

The State of South Carolina
In the Court of Appeals

Appeal From Richland County
S.C. Workers' Compensation Commission

Commissioner(s) A. Taylor, T. Scott Beck, Avery B. Wilkerson

Case No. 2021-000696

S.C. Department of Mental Health,
Employer, and State Accident Fund
Carrier v. Respondent

Dana L. Dixon
Employee Appellant

Initial Brief of Appellant

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67-411. Employer's Report Of Injury 12A

A. Each Employer Shall Keep a record of all injuries, fatal or otherwise, received by its employee in the course of their employment.

1. The record must be made on the Form 12A and retained or file according to Section B below.

2. The Commission shall not construe the filing of a form 12A as an admission of liability on the part of employer or the employer's representative.

B. Employer's Responsibilities

1. The employer shall make a record of all work related injuries reported by its employees on form 12A and retain the record for a period of two years.

2. When an injury requires less than five hundred dollars in medical treatment and does not cause more than one lost workday or permanency, the employer may pay for the medical treatment. The employer is not required to make a written report to the representative or to the commission. History: Amended by State

Register Volume 21, Issues No. 4, eff April 25, 1997.

State Register Volume 34, Issue No. 2, eff February 26, 2010. 1

Table of Authorities And Cases

67-412, Employer's Report of Injury, Form 12 m

A. The employer's representative shall report to the Commission injuries reported by the employer pursuant to R. 67-411C(1).

B. This report shall be made in accordance with R. 67-416 within ten days of closing by the employer's representative.

C. Late reports shall be subject to a fine for late reporting plus an additional penalty of five dollars for each day late.

History: Amended by State Register Volume 21, Issue No. 4, eff. April 25, 1997; State Register Volume 34, Issue No. 2 eff. February 26, 2010.

Table Of Authorities And Cases

67-413. Periodic Report

A. The employer's representative shall file a Form 18, periodic Report, or the EDI equivalent Sub Annual (SA), as follows:

1. Six months after the alleged date of injury and each 6 months thereafter until the Commission's file is closed; and

2. At the request of the Commission

History: Amended by State Register Volume 20, Issue No. 5, eff. May 24, 1996; State Register Volume 21, Issue No. 4, eff. April 25, 1997; SCSR 42-2 Doc. No. 4735, eff. February 23, 2018.

R.P

Table Of Authorities And Cases

Article 13

Medical Reports, physician's fee And Hospital Charges

67-1301. Medical Reports.

A. A medical practitioner or treatment facility shall furnish upon request all medical information relevant to the employer's complaint of injury to the claimant, the employer, the employer representative, or the commission.

Payment for services rendered may be withheld from any medical practitioner or treatment facility who fails to comply with a request for this information.

B. The employer's representative shall submit to the commission a report indicating the claimant's final rating of permanent impairment.

C. A health care facility and a health care provider may charge a fee for the search and duplication of a medical record not to exceed the fee published in the medical service provider manual. History: Added by State Register

Volume 14, Issue No. 9, eff September 02, 1990.

Amended by State Register Volume 17, Issue No. 4, eff

April 23, 1993; State Register Volume 21, Issue No. 6

Section 42-19-10: Employers Records and report of injuries

B. The employers representative shall submit to the Commission a report indicating the claimant's final rating of permanent impairment.

Section 67-1601: Expenses incurred in receiving medical treatment, reimbursement.

B. The claimant shall receive reimbursement from the employers representative. (R.P)

Section 42-17-30: Commission may appoint doctor to examine injured employee.

67-412: Employers Report of injury form 12m

A. The employers representative shall report to the Commission injuries reported by the employer.

B. This report shall be made in accordance with R-67-416 within 10 days of closing by the employers representative.

67-413: Periodic Report. The employers representative shall file a Form 18, periodic report, or the EDI sub annual (SA) as follows. (R.P)

Review

1. Six months after the alleged date of injury and each 6 months thereafter until Commission's file is closed.

2. At the request of the Commission

Section 7. Physical Medicine: Authorization To Treat:

Medical providers must receive authorization from the insurance carrier or if the employer is self-insured from the employer prior to providing treatment, all treatments must be medically necessary.

If an insurance carrier/employers has reason to believe that the proposed treatment is not medically necessary to the employees work related injury the insurance carrier/employer is not obligated to approve the treatment

(R.P)

Statement of Issues on Appeal

In the Order findings of fact # 17 is incorrect. The date on the letter is July 17, 2019. So why would Dr. Saunders mention reviewing my records?

In the order findings of fact # 18. Does not pertain to this case. Why can't Respondents realize that they are putting the wrong year?

In the order findings of fact # 19. Is incorrect Respondents stated "based on greater weight of the evidence". The evidence that Respondents had submitted (3-7-17) are 3 pages from Providence hospital (APA 65-67) 1 page from Palmetto Richland (12/23/2016) pages 34-53 which includes pages of the medical records that was subpoenaed and then combined together. Why haven't the Respondents provided any documents from 2016 or an authorization number or the name of the person who gave consent of authorization to treat with the date and time?

The Order Under Statement of The Case states^{the} following the hearing on October 28, 2019 the parties entered into a consent order due to no Form 20 being filed. So why did Respondent give Commissioner James the form 20 DP 2017 and not the form that was filed in March 2020?

Statement of Issues on Appeal

Respondents has alleged they sent me to. So why would authorization have ended on 12/23/2016 after I was discharged with (42-15-60(a)) recommendation for further medical treatment?

In the order under findings of fact #15 is inaccurate I have since 2016 requested medical treatment for my back. And due to the emergency room discharging me with instructions to contact my family doctor that does not matter. In every document that the Respondents have listed, in their statements, brief or order instruction even after I submitted the Discharge Summary as my APA, Respondents will not admit that on 12/23/2016, I received the dated Summary that instructs me to contact my doctor immediately. Why not?

In the Order under findings of facts #14. is incorrect the Respondents continues to reference letter from Dr. Jerry Saunders, that I submitted as my APA that has the date of July 17, 2019. Not July 17, 2017.

Why is the Respondents wanting it to appear as if Dr. Saunders was the doctor of record for my December 2016 work place injury? Dr. Saunders worked

at C. W. Williams Community Healthcare in A.C. Tr. p. 34 lines 22-25, Tr. p. 35 lines 1-12 (February 22, 2019 transcript)

Statement of Issues on Appeal

The form titled First Report that Respondents wrote and has the file date of September 25, 2017 (a form that I never saw until my then attorney mailed to me) and on the form it states "I says first time working on this unit." So since that was my first time working on that unit wouldn't it be fair to say I never worked with the male resident who attacked me? R.P.

In Respondents Standard of Review they have stated yet again that I "received no forms while at Richland Memorial Hospital on December 23, 2016. Save for a medical excuse and the transcript reference of Tr. p. 2 lines 5-11 is not accurate due to there is no page 2.

So why have the Respondents given inaccurate transcript references in their brief and in the order? Single Comm. TR.p. 18. Lines 21-25. TR.p. 19. Lines 1-3. Respondents have stated that I testified that I was diagnosed with a muscle spasm. (TR.p. 27. Lines 18-19) (18) "It basically don't say. It (19) stated muscle spasm"

Can the Respondents show a Dr. State why on their first Report of injury they indicated contusion that they filed on September 25, 2017?

Statement of Issues on Appeal

The Respondents APA p.34 Statement of X-ray of the back showed mild endplate degenerative changes. What did the E.R. doctors at Providence compare my X-ray to, to know there were changes?

And why didn't the Respondents include the entire medical record from Providence for date of March 07, 2017 and not just one page?

Was it due to the fact that in the 11 pages that I had submitted states "Chief Complaint Neck Pain"?

Why have the Respondents combined all the Duces Tecum Subpoenas (which means unaltered, unbridged etc) Medical records together to create their APA(s)?

Respondents have stated in the Order that I spent majority of my time narrating a version of the facts of the claim. On 02/22/2021 I stated facts such as Respondents stated I received authorized treatment on 12/23/2016. Tr. p 5, line 3 & 19. but failed to do what S.C. Workers Compensation website under the title of: Authorization to treat. 2. Respondents never submitted any documents to the Commission or the hearings that has "Received by the Commission for 2016. 3. Respondents weekly compensation rate is from 2017 Form 20. And the fact that the transcript references are incorrect and

Statement of Issues On Appeal

Others I stated. So if I pointed out the errors as they they were in Respondents brief and cross checked Respondents transcript references how is that narrating a version of facts if it's in Black and white and the Respondents wrote it?

The Respondents have been repeatedly stating that on 12/23/2016, I only received from Richland Memorial E.R. was a medical excuse. And by me submitting the Discharge Summary that has the date of 12/23/2016 to the Workers Compensation Commission on March 13, 2020 and certified mailed Respondents copies of my APA(s). Why is the Respondents stating I made several allegations. When on June 12, 2020 I read the Discharge Summary that (Tr. p. 18. Lines 22-25), Tr. p. 19. Lines 1-4.) states for me to contact (family Dr.) the above physician (Dr. Soto) immediately. So where is the allegations Respondents is referring? TR. p. 11. Lines. 9-16.

Then Respondents in the same statement states: the records from Providence Hospital related to her March 2017 MVA, more than 3 months after her work injury note that Appellant will be discharged home to follow up with PCP. Defendants APA p. 55" Respondent should have first hand knowledge I went to work and my Dr. Appt.

Statement of Issues on Appeal

at Carolina Occupational Healthcare on March 06,
2017 after work. And the fact that the E.R. notes
from Providence North east medical page shows Tylonal extra
Strength. IF I WAS NOT ADMITTED in the hospital
Where Else Aside From Home Would I go? After all
the fact is on December 23, 2016 the E.R
Doctors instructed me to contact my family doctor
IMMEDIATELY for more medical care and I
was sent home that morning as well.

() Why Wasn't 42-15.60(a) applied for injury of
December 22-2016?

Why did the Respondent assume that my visit
to the Emergency Room was all that was required
to not give authorization for Recommendation of
further medical treatment after December 23, 2016?

- R.P.

Why is the Respondent stating that I am asking
for additional treatment, when Respondents never
authorized any or paid for my meds, completed a Form 20, or filed a First Report?

Where are Respondents Forms giving authorization
on December 22, 2016? That would have been the date

Statement of Issues on Appeal

Authorization would have been given, the date of actual injury.

Can the Respondent fathom the excruciating pain that I felt after being assaulted by a male resident who sucker punched me between the neck and jaw which caused me to fall and hit my back on the metal heater? (Due to me keeping the resident from falling over the foot board of his bed) That was not the floor (unit) I was assigned, I came in for overtime, I was not told anything about the resident. I had to do a one on one. After the fact I was told that the resident is there because he killed his father. The (same resident caused my co-worker to receive staples in her head after my injury) So after the floor nurse told me that (after the fact) and the supervisor never coming to the unit I left C.M. Tucker Center and went to Palmetto Health Richland E.R. If you did the correct thing by waiting for supervisor to come to the unit where you were, while in severe pain and waiting over and hour would you have left and went to the emergency room?

Statement of Issues On Appeal

73 days after my work injury as I've stated (December 22, 2014 til March 05, 2017) I was in a MVA, as I stated on record on 02/22/2019, at my subpoenaed deposition in Charlotte, N.C. Tr. p. 62 Lines 16-24. (Transcript reference is from 2019). Respondents listed their APA p. 55 that would indicate I was able to be discharged home why didn't they list the page that showed the type of medication (Tylenol Extra Strength) that I was instructed to take to show how non serious my neck pain was? The Respondents erred by stating more than 3 months. (2021 Transcript p. 6. Line 22)

Statement of Issues on Appeal

The Respondents stated that I failed to point to any evidence in the record to support a causal relationship between December 22, 2016 injury and any current back issues that may currently exist. If the full panel reviewed all of the (81 pgs) APAs that showed time sheet for January 13, 2017, The S.C. Department of Mental Health Witness Statement of injury or illness dated 01/13/2017, for my 2016 work injury, The letter from the Respondents dated January 18, 2017 letting me know they had received my work injury report for December 22, 2016. Or the Discharge Summary from the E.R. at Palmetto Health Richland that instructed me on 12/23/2016, to contact my doctor immediately, just to name a few if the Commissioners had read the documents then they would have seen the supported evidence. Would you agree? On 02/22/2021 Commissioner Taylor (Tr. p. 10. Lines 20-25) (Tr. p. 11. Lines) did not make a statement that she saw a form 51. After I had stated (2021 Tran.) (Tr. p. 8 Lines 22-29) Respondents stated in their brief that they had filed a form 51 on February 07, 2020 for the claim of 12/22/2016. (Tr. p. 15 Lines 6-9.) So why is the above mentioned not deemed as evidence by the Respondents?

Statement of Issues on Appeal

If Respondent knew of my work injury of 12/22/2016, then why was I questioned about it in detail on 02/22/2019 at my subpoenaed deposition for my 01/31/2017 work injury claim?

Tr. p. 45. Lines. 14-25, Tr. p. 46. Lines: 1-21

Why did the Respondent wait until AFTER my deposition (02/22/2019) and the hearing of 03/07/2019 to file their Form 51 on April 02, 2019 for this claim?

Why didn't I have a deposition for this work injury as I had for my 01/31/2017 work injury?

For me to receive authorization for me to leave my job site to go to Palmetto Health Richland E.R. would have meant acknowledgement of my work injury and my supervisor would have needed to have signed the S.C. Department of Mental Health W.C. packet. Correct? Well that was done on 01/31/2017. (R.P)

Statement of Issues on Appeal

For whatever reasons the Respondents wants it to seem as though I said I never filed a workers Compensation Claim. And in the Designation of Matter I have listed the Transcript of February 22, 2019 to show where I listed the times that I had. And on June 12, 2020 (Tr. p. 34. Lines 14-17) I stated I never filed a Workers Compensation Claim with the Defendants.

So why did the Respondents make this accusation knowing it's in the transcript?
2019 TR. p. 38. Lines 8-10 (until 2016)

Statement of Issues On Appeal

The Respondents received my medical records of 12/23/2016, in January 2017. Then used Subpoenas for medical records of my W.C.C. file no. 1712879 in order to use them for W.C.C. file no. 1623303. If Respondents was going to use the subpoenaed medical records they would not have asked for the records to be mailed to them on or before 03/13/2019, when the hearing was on the docket for 03/07/2019. So why didn't Respondents feel the need to use the medical records they had received from Palmetto Health Richland on 01/18/2017?

On the Respondents Notice of Witnesses And Written Reports physician or other evidence to be introduced on behalf of the Employer/Carrier form has listed as their APA Providence Hospital. Dated: 04/21/2008-03/07/2017. Page numbers 1-64. Their Subpoenas reads "Subpoena Duces Tecum" which means All files and documents should be produced in their original condition, with no documents removed or altered. These files and records should be produced whether in the physical possession of the employer, carrier, the attorney of either or any agent or employee of the employer. The term All means full, complete, unaltered, unadulterated, unabridged. So why did the-

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Respondents: Feel the need to combine Richland, Providence N.E and Providence medical records?

(2021) On The 22nd Of February the Respondents Stated that I was discharged with no further care. So if that was the case why did the E.R. doctor instruct me to contact my doctor immediately to receive definitive medical care?

On February 22nd 2021 the Respondents Stated that I had complained of low back pain, neck pain after my vehicle accident of 03/05/2017. (Went to E.R. on 03/07/2017) 73 days after my work injury. I went to Providence North east for neck pain. I submitted 11 pages (Respondents APA) that states Chief Complaint: Neck pain. Page number 57 of Respondents APA states "You were seen in the ER on 03/07/2017 for neck pain". Why is the Respondents trying to find every other way to say I injured my back?

On February 22 2021 the Respondents Stated that my prior attorney filed a form 50 for this case. When the fact is On 03/15/2018 my prior attorney was relieved as my counsel.

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W.C.C. file no. 1623303 (this case) and one for W.C.C. file no. 1712879 (01/31/2017). When was the first and last time Respondents received a form 50 from my previous attorney?

In the month of January 2017, Respondents mailed me a letter informing me that they received my work injury report from my employer for my 12/22/2016 injury. So if the Respondents gave me authorization on 12/23/2016 for medical treatment why send me a letter IF they knew of my injury before January 2017? Letter is dated 01/18/2017.

On 01/13/2017, I was out on L.W.O.P. (leave without pay) I submitted time card to show this fact. On that day my supervisor Lorain Tracy called me at home telling me I had to report to her office to write my witness statement. I informed her that I was medicated and I didn't know if I could write, she said she would help me. I caught a ride with my daughter. I reported to Supervisors' office, there Mrs. Tracy gave me the form titled: 'S.C.D.M.H. Witness Statement of injury or illness. I am told that 01/13/2017, was the last day to write my statement or O.S.H.A. was going to fine C.M. Tucker.

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Center. I wrote to the best of my ability. After reviewing the form I now realize that there are errors. Like for instance the work injury did not happen at 6:00 AM, and the date was not 12/21/2016. And Mrs. Tracy told me the supervisor's name for the night of 12/22/2016. My assigned shift was 11:00 pm til 7:15 AM, at 2:53 AM on 12/23/2016 I arrived at Richland E.R. So the Respondents had to have used the time from the witness statement on their first report and added inaccurate information as well. Where did Respondents get 6:00 AM from?

On 12/22/2016, I never received any paperwork from the Respondents. Not even the 4 page S.C.D.M.H Workers' Compensation packet. So by me never receiving paperwork from Respondents, who completed the Respondents' First Report that they filed on 9/25/2017 for my 12/22/2016 work injury?

As I've stated previously, I had a hearing before Commissioner Susan Bardene. And it was postponed due to Respondents never filing a form 20 for W.C. file No. 1623303. Why didn't the Respondents file the form 20 early like they had for W.C. file No. 1712879? This -

Statement Of Issues On Appeal

Injury happened in 2016.

Everything is different between the 2016 and 2017 Cases for instance for the 2017 injury Respondents paid for my prescribed medicine. But for the 2016 injury Respondents did not. I had to pay out of pocket and never received reimbursement. On 01/31/2017, I received the S.C.D.M.H W.C. packet that I completed and signed along with my supervisor. And there was an authorization number that went with me from day one of my doctor visit on 01/31/2017, and a authorization number for every new visit (physical therapy). But for W.C.C. No. 1623303 (this case) Respondents continues to state that they gave me authorization to receive medical treatment on 12/23/2016, but has never submitted one form showing the authorization number for this case. Any and all documents I have submitted to S.C.W.C.C. and listed in my Designation of matter is dated after the year 2016. From Respondents, why didn't the Respondents use the S.C.D.M.H W.C. packet to show the person (supervisor) had signed acknowledging the injury the same as the 2017 packet? Since Respondents handled the 2017 claim first and the 2016 claim second the paperwork was and is the same.

Statement of Issues On Appeal

In Respondents brief on page it states that the Respondents filed a form 51 on 02/07/20, for work injury of 12/22/2016. But the very first form 51 that the Respondents filed was on 04/02/19 for work injury of 12/22/2016. Why did the Respondents wait so long to file the form 51, if I had received authorization on 12/23/2016? (R.p.

At the hearing, on June 12, 2020 Respondents stated that I am asking for additional medical treatment and they stated the same at Appeal Hearing on 02/22/2021. And also stated at both hearings and in their brief that I was discharged with no recommendation for further medical care. Why is the Respondents so reluctant to mention the Discharge Summary that was then and is now part of my medical record that I read part of at the hearing? (R.p.)
) Tr.p.

On 12/23/2016, when I took myself to Palmetto Richland without authorization, I received a shot called Toradol in my Gluteus medius, and it helped for several hours.

On the 24th I was medically excused from work, and in severe pain I called my supervisor Lorain Tracy and asked her to call someone at Workers' Comp so I can get treatment.

Statement of Issues on Appeal

To be Relieved as my Counsel I had to write a letter stating that, I had moved from Atlanta to Charlotte, N.C. On February 4th 2018. At my new address is where I wrote my request in March 2018. Why is the Respondent being untruthful about me filing a "Subsequent" form 50, a year later? R.P.

On the letter from Ben Cruse, dated March 02, 2018 the first page it states "Closed"

So with that alone, made me call the Commission to find out my case status.

I was told my Cases had closed. (02/2018)

And to reopen BOTH cases I had to file 2 form 50s. How was the ~~Relieved~~ attorney able to list my name and New address in the letter to the

Commission the first week of March 2018, if I filed in February 26, 2019? Respondent Form 51 is dated 04-02-2019

Why haven't the Respondent provided ONE document of 12/22-23/2016 to show the AUTHORIZATION or claim number for this claim? (R.P.)

R.P.

If the Respondent knew of my 12/22/2016, why wasn't I given the 4 page Workers' Compensation packet like I had received the morning of

Statement of Issues on Appeal

31, 2017 (work injury) Instead of Respondents fabricated First Report they filed on 09/25/2017?

Why did the Commission NEED to Contact the Respondents by letter dated 09/14/2017, to say they (Commission) had not RECEIVED a First Report of injury for this claim? (1623303) R.p.

Why haven't the Respondent stated that they had closed both claims several times? R.p.

Why did the Respondent handle the 2017 claim first?

Why are there Authorization numbers from the first day Respondents sent me^{to} their facility of choice to the last day of medical treatment, for my 01/31/2017 injury but NOT Any for my 2016 work injury. Why is that?

Respondent has stated the following: This is past the Statutory period for treatment and lapse for an injury. By Respondent own admission that I received No additional Authorized Medical Care for this accident.

Statement of Issues On Appeal

Even after the E.R. doctor instructed me to contact My Doctor IMMEDIATELY, I still could not receive medical treatment for my 12/22/2016 work injury Why Not? And I personally do not feel that this case is past Statutory period, since I was never sent for any treatment.

When the Respondent filed their Form 51 on April 02, 2019, why wasn't a Form 20 filed with it instead of 4 yrs later? (R.P)

Why haven't the Respondents listed or mentioned the dates of the hearings I had with Commissioner Campbell or Commissioner Barden?

Why have Respondent listed a weekly compensation rate, when the order instruction does not? R.P.

Why did the Respondent give Commissioner James the Wrong Form 20 on June 12, 2020 that is for my 01/31/2017 work injury, knowing that Commissioner Barden had asked that Respondents to file a Form 20? (R.P.)

Statement of Issues On Appeal

Did the Respondents forget that they used Certified Mail and mailed me copies of my medical record along with the Notice of Witnesses and Written Physician or other Evidence To Be Introduced on Behalf of Defendants, with Certificate of Service dated 02/22/19.

Please see submitted copies of envelopes dated 02/22/19 with postage of \$ 8.20. And for the subpoena copies (4) the envelope is dated the same as subpoenas \$ 1.45 Before the hearing of 03/07/2019, So why be untruthful to the Commission? R.P. ---

What good would the medical records be used for (Subpoenas) When the Respondents date given for the "requested information be MAILED on or before 03/13/2019 When the hearing was 03/07/2019?"

Was the Subpoenas a means to cloak and dagger around the fact that my December 23, 2016 was not considered a Workers Comp Case by Respondent, After all they filed a Form 19 prematurely and had closed the cases, But when I had to refile my form so for BOTH claims to be re-opened in March of 2018 the Respondent realized that when they had received my medical records they were to have sent me copies, therefore they subpoenaed

4 medical records. Why wasn't 42-15-95 (Release of medical records) applied?

Statement of Issues on Appeal

On 02/22/2021 the respondents stated to the full Commission "I believe a review of the medical records as outlined in the Order will reflect that she was discharged with no further care. We believe the evidence is in the record to support that she didn't have lower back or neck pain."

How was the Commission going to review the medical record when respondents medical record (APA) for Princeton Health Richland contained 3 pages of the 45 page medical record from date of service 12/23/2016? (R.P.)

For my hearing for W.C.C. 1623303 the respondents were able to produce a report titled ISO report that is listed as their APA that went back as far as 1990 when I was with child and was involved in car accident but the respondents stated the report was dated: 01/12/2018-10/24/2019.

If the respondents were able to go back that far why can't they provide an authorization number or document for 12/22-23/2016?

Statement Of Issues On Appeal

The respondent have stated that on 12/23/2016 I had authorization to receive medical treatment, but the injury happened on the 22nd of December 2016, that is the date I would have received authorization along with paperwork from my supervisor on the same night of injury. Have the respondents submitted any documentation for December 22 or 23 of 2016?

According to 67-412 The respondents were to have reported to the Commission the injuries I had reported (to my supervisor) R. 67-416 States it was to have been within ten days. So why is the First Report of injury showing file date of 09/25/2017? (R.P.)

According to 67-413 (Periodic Report) States that respondents were to have filed a form 18 or EDI six months after the alleged date of injury which would have been June 22, 2017. So why are the forms showing 2018? (R.P.)

Statement of Issues on Appeal

The Respondents have stated that I received treatment for my December 22, 2016 injury from Palmetto Health Richland (Richland Memorial Hospital) Emergency Room on December 23, 2016. But if those doctor's discharge letter instructed me to go to my doctor immediately why didn't Respondents feel the need to send me to their doctor for more treatment aside from a shot and an X-Ray?

Respondents failed to provide any documents with the year of 2016, and I find it hard to fathom that Respondents could not provide an authorization number or a claim number for this work injury especially in today's world of digitalization and technology. So why was it so easy for Respondents to provide authorization, claim numbers and a supervisor's signature for my 2017 work injury?

Why is it that Respondents does not mention the medical record of 2016 as often as they did for 2017? After all I went to E.R. for jaw, neck, back.

Since the Respondents have mentioned the M.V.R. of March 05, 2017 at every hearing, do the Respondents think I wasn't having back pain 73 days after my work injury of December 23, 2016 when a driver dented passenger side panel and brake tail light of my car?

Why is the Respondent wanting to change the submitted evidence to make it to their liking, Did they not see the 11 pages from their submitted medical record from Providence Hospital that Respondents listed as their APA, that shows neck pain?

If Respondents used "Subpoena Duces Tecum" for medical records of 2019, why wasn't a regular subpoena used since Respondents altered the medical records?

Statement of Issues on Appeal.

What was Respondents true intentions for lying to the Commission about not receiving the subpoenaed medical records on March 07, 2019 knowing they had received some medical records in 2017?

Are the Respondents under the impression that everyone who goes to the Emergency room^{ER} admitted?

Statement of The Case

This hearing comes before the Full Commission Appellate Panel via appeal by the Appellant from the hearing Commissioner's Order dated November 03, 2020. This was an admitted claim in which Ms. Dixon suffered admitted injuries to her jaw, neck, back on December 22, 2016, after being struck by a patient while assisting them into bed. (TR-p. 26 lines 18-20) She received medical treatment for that injury from Palmetto Health Richland emergency room on December 23, 2016. (Respondent's App. p. 5-67) She was released from care the same day and Appellant received no additional authorized medical care for this accident. (Respondent App. p. 67) During March of 2017 Appellant was involved in a motor vehicle accident. (Respondent's App. p. 34-53). On September 07, 2017, Appellant's then attorney, Benjamin Cruse, filed a claim on Appellant's behalf via a Form 50, not requesting a hearing in which Appellant alleged an injury to the jaw, neck, back. In February 2018 Appellant requested to terminate the attorney client relationship with Mr. Cruse, and he was relieved as her counsel by order of the Commission on March 15, 2018. Appellant, while advised of her right to counsel, proceeded pro-se. Appellant subsequently filed a Form 50 February 24, 2019 seeking treatment for her jaw, neck, back. This was past the statutory period for treatment and lapse for an injury and Appellant has provided no evidence which would allow any of the exceptions to the rule. SC Code § 42-15-60(2012).

Standard of Review

I have provided sufficient supporting evidence for this claim, and from the very start of this claim, even while I worked in severe pain for the Respondents as a Certified Nursing Assistant (C.N.A.) I repeatedly asked for medical treatment even after I put my medical excuse in Supervisor's locked box on her door on December 23, 2016. I was on medical leave for two days only December 23, 24 of 2016. (R.P.) The Supervisor signed and dated the excuse "Received 01/13/2017" or when she received it. My Supervisor CALLED me at home to come write my witness statement on January 13, 2017 the same day she received it. (R.P.)

I never received a phone call, email or a letter before January 13, 2017 but 5 days after I wrote my statement, I received a letter dated January 18, 2017 from Respondents. (R.P.). And I still received no authorized medical care/treatment. And at each hearing for this claim I have asked that the Respondents provide tangible evidence to support their allegation for authorized medical treatment of December 23, 2016 from Palmetto Health Richland. The Respondents continue to state what I have supposedly have done or did but have not provided the evidence to support their allegations. The Respondents have stated that I am now asking for additional medical treatment for my back, and that is not true at all. The fact is I took myself to the emergency room without consent from anyone, including my supervisor. So for the Respondents to state I had authorized medical treatment on December 23, 2016 is "wholly untrue". My supervisor didn't know and no paper work was given for me to complete, so with there being no evidence of a signature, or a time, or a name mentioned to whom authorization

Standard of Review

Was given. The Respondents have stated that I have been "Repetitive" maybe I have been, and each time I've submitted my evidences at the lower court, and any evidence Respondent submitted was for 2017 MVA accident and X-Rays that was taken. But Respondents NEVER mentioned 2 important things from E.R. visit of December 23, 2016. FILE: X-Rays, Physician Discharge Summaries. But always March 7, 2019

I stated on February 23, 2019 at my Subpoenaed deposition when asked about Workers Compensation Claims (R.p.) but Respondent want the Court to think I am a liar. And I was even asked how did I get injured on December 22, 2016 (R.p. Lines) I have no reason to lie about what I know to be the facts

of how my employer treated me due to me being injured on the job. I began my employment in October of 1988 (R.p.) and I have been injured on the same job (Dept of Mental Health) I never reported it or filed a claim because I always felt that since S.C. is a "AT Will" state I would lose my job. But on December 22, 2016 when a male patient attacked me because I kept him from tripping over the foot board of his bed. (R.p.) I believe then as I do now, treat every person even the patient the way I would want to be treated, it could be me. And I do believe in Karma. But for me to report my injuries and NEVER receive medical treatment or have 42-15-60(A) applied is an

injustice and unfair treatment. Four years 7 months is not me asking for ADDITIONAL treatment it's me wanting treatment for the first time from Respondents. This injury happened in 2016 the second injury happened in 2019, This claim was handled last because Respondents did not

Standard of Review

have a First Report or a Witness Statement explaining how injury occurred. That is why I did not have a Subpoenaed deposition for this claim because Respondents asked their questions on February 22, 2019, at the deposition for my 2017 work injury, then after March 03, 2019 Respondent filed their first Form 51 for this claim (R.p.) dated April 02, 2019.

Standard of Review

The Witness Statement I wrote on January 13, 2017 that was given to me by the Respondents that is how they were able to put the wrong time, because I did. But if Respondents had done their homework or even called H.R. They would have realized my assigned shift that I worked was third 11pm - 7:15am.

And by Respondents having requested my medical records from Richland Memorial Hospital on January 18, 2017 for payment purposes (R.p) the arrival time was at 2:53 AM. Which indicates that on December 22, 2016 Respondent did N.O.T know about my work injury. And on December 22, 2016 Respondent did NOT give authorization for medical treatment at Richland Memorial Hospital.

The Respondent has mentioned a few pages from Providence of my March 03, 2017 E.R. visit, and used medical pages as their APA from Providence in referring of the X-Rays that were taken. But NEVER mentions the X-Rays from Richland Memorial Hospital (I never used those pages at S.C.W.C.C.) that was the reason the doctors recommended me contacting my doctor. But Respondents wants my back injury to be related to my MVA of March 05, 2017 when the 11 medical pages from Respondents APA show I was seen for neck pain.

R.p

The fact is from December 22, 2016 til March 04, 2017 Respondents NEVER contacted me, aside from letter dated January 18, 2017 5 days after (R.p) I wrote my statement. NEVER sent me for medical treatment. 10 weeks and 3 days later is when I had MVA. But 10 weeks 2 days no authorized medical care from

Standard of Review

Respondents because I was RELEASED From Richland Memorial E.R. On December 23, 2016. And then stated in the Signed Order that I Subsequently filed a Form 50 February, Respondents did not submit that as their evidence, I moved to A.C. on February 4, 2018.

On September 05, 2017 my then attorney filed a form 50 for W.C.C. file numbers 1623303 And 1712879 And if you were to review the filed Form 50 you would see my address is listed in Columbia, S.C. for both forms. And on the forms from my then attorney dated March 02, 2018 (R.P. , R.P) on the last page that states Certificate of Service my address is for A.C. DATED March 02, 2018. And on the first page it's written MLDSED. So by me not knowing what to do I called S.C. W.C.C. and was told that both cases were closed by the Respondents and if I wanted to re-open them I had to file a form 50 for both claims and that's what I did, in 2018. The Respondents have closed the claims several times. I called S.C. W.C.C. to ask the dates of closing and re opening of the claims. (R.P) So for the Respondents to make the statement that my brief was "Wholly untrue and riddled with accusations": And even in the signed order on page 7 (at bottom) the Respondent lied about me making ALLEGATIONS that the record from 12/23/2016 provided that she needed additional medical treatment. The Respondent speaks of the March 05, 2017 mva, Respondent does not mention the December 22, 2016 work injury or December 23, 2016 medical records. And they NEVER even spoken to me Ever about my work injury of 12/22/2016.

Standard Of Review

Respondents Form 18 (S) States at the bottom of the page. File this Form 6 months after the alleged injury date and each 6 months until the Commission's file is closed. Form 18 MUST be filed whether or not compensation is on going R.p.

Respondents Form 19, states at the bottom of the page:

File this form with the claims Department according to R. 67-414 and R. 67-1204. A person, other than the claimant receiving benefits should sign on the line provided.

* Do Not include OS medical cost fees paid for expert testimony. fees for determining Carrier's liability, cost of autopsy, birth and death certificates and impartial examination.*
Form 19 must be filed within sixteen days of final payment of compensation. Form 19 MUST be filed when a claim is denied. R.p.

ARGUMENT

Respondent lied in the Statement of The Case by stating:

1. "After being struck by a patient while assisting them into bed, That is NOT written in my witness statement. (R.p.)

2. By listing a transcript reference but didn't say which transcript. Reason being is because I never stated that.

And in transcript from June 12, 2020 hearing that is NOT what Tr. p. 26. Lines 18-20 say. And for transcript of February 22, 2021 hearing it has only 16 pages.

3. Appellant filed a Form 50 February 26, 2019.

For starters when my then attorney filed the 2 Form 50(s) in September of 2017, he listed my address in South Carolina.

On February 04, 2018, I moved to 2002 Weyland Ave in Charlotte, N.C. When I called S.C. W.C.C. to get a status report I was informed that BOTH cases had been closed. I was asked did I want to re-open them. I said yes! Was told I had to file 2 Form 50(s) And I did so in February of 2018, that is how my address is listed on the Certificate of Service by Mr. Cruse in the packet that is dated MARCH 02, 2018.

(R.p.)

ARGUMENT

4. Respondent states that I filed a form 50 July 8, 2019 requesting a hearing, (Still did not submit the form 50)
On Respondent Form 58 dated May 31, 2019 at bottom of page it states date of hearing: June 11, 2019 at 12:00 pm
Commissioner Campbell. R. p

5. Respondent is an attorney and he have dealt with Worker Compensation Claims, So there fore Respondent should know this: On October 28, 2019 when Commissioner Barden realized their was no form 20 the Consent order was written (instructions of Commissioner Barden) that meant the case goes back on the docket to be rescheduled. And on the Respondent Form 58, dated March 23, 2020 (R. pages) at bottom of form it states date of hearing: April 1, 2020 Commissioner James that was postponed due to Covid. And on June 12, 2020 I had hearing. (Respondent filed their first form 51 for S.C.W.C.C. 1623303 On April 02, 2019) R. p.
R. p. 207

A R GUMENT

Since the very start of this case the respondents has stated that I had received authorization for medical treatment on 12/23/2016.

But has not provided any documents showing the authorization number or a document that has the date, time or the name of the person who gave consent. As stated on S.C. W.C.C. Website under the title: Authorization to Treat.

On 12/23/2016, I received a Discharge Summary that instructed me to contact my doctor immediately, I was told that Workers' Compensation would not pay for that Doctor (Soto) visit. I also received a medical excuse that excused me from work on 12/23/2016 only. When I returned back to work I put medical excuse in Lorain Tracy Locked box on her door. On 01/13/2017, Lorain Tracy, my supervisor wrote "Received" on the same day she called me at home to tell me to report to her office to write my statement. On that date I was out on L.W.D.P. (R.P.) I also received a prescription that I had filled on 12/23/2016 (R.P.) Respondents have not reimbursed me for something that 42-15-60(a) should have covered, but didn't.

And in the month of January the respondents filed a form 20 in 2020 for my work injury of 12/23/2016,

ARGUMENT

That shows a different amount \$490.00 Weekly Compensation rate, At the hearing I was asked by Commissioner James IF I was okay with what Respondents Submitted or did I want her to review the form 20. I stated I wanted her to review. In the instructions of proposed order the rate is \$299.57. In the signed order it's \$299.57. The same rate as the form 20 for the 2017. Looking over any and all documents that the respondents have submitted that pertains to file no. of workers' compensation commission every form is dated 2-3 years after my work injury of 12/22/2016. Commissioner James order instruction does not list Compensation.

The Witness Statement that I wrote is dated 01/13/2017, 22 days after my injury. Then the respondents writes a letter to me dated 01/18/2017 informing me they received my work injury report from my employer for my 12/22/2016 injury, to me I feel the letter should have been written days after 12/22/2016 since respondents have stated I had authorization for medical treatment on 12/23/2016, or a letter stating the fact that on 12/22/2016 (Date of injury) they had given authorization for medical treatment.

Five days after I wrote my statement respondents states they had received my work injury report since I never received paperwork like I had for

ARGUMENT

My 2017 work injury (Please designation of matters nos. 15, 16, 17, 18, 19, 21) showing authorization and claim numbers.

Number 17 is the form showing date of injury and the date of my doctor visit with authorization number. But for the 2016 work injury that happened first there is no forms submitted by respondents that has the required authorization number. On 01/13/2017 I had to wait for my supervisor to call Comperdium (New State Accident Fund) to get authorization to send me to their doctor of choice. Injury happened @ 6:00 am, I reported it @ 6:05 am. 10:00 went to Dr.

On 12/22/2016, the supervisor never came to the unit or called. The work injury happened after 12 am not learn as respondents have on their first report of injury. The medical pages I've have listed for R.P. of designation of matter shows the time of my arrival at Palmetto Health Richland, so to me that's indicating two things 1. respondents did not read the medical record they had received in January 2017. And the only way they put 6:00 am is from the witness statement I wrote on 01/13/2017 since I've never written that time any where else. So it would seem that the respondents would know the time since they state I had authorization. I can say I was medicated at home and was told to come in to write my statement 22 days AFTER. The shift I worked was (3rd) 11pm-7¹⁵am

ARGUMENT

But For some reason or another the Respondent feels the need to adlib, make-up, or state untruths. For examples:

- Respondent states that I had authorization for medical treatment on 12/23/2016. But has not been able to provide on Shred of proof. But for the Commission to write the Respondents a letter dated 09/14/2017, to let Respondent know they had not received a First Report of Injury from them, and on 09/25/2017 is when Respondent filed their First Report of Injury for my work injury of 12/22/2016. R.P

- Respondent stated on March 07, 2019 on record that they had not received subpoenaed medical records, when in fact Respondent requested medical records from Palmetto Health Richland on 01/18/2017, and received them. They stated for billing purpose. Respondent was to have sent me a copy of those medical records, they chose not to. I guess by me not being an attorney as the Respondent have stated several times. I will not understand the reasoning as to why Subpoena medical records if The Respondent had received them in 2017, and filed a subpoena for my 2017 work injury claim and then use them for this claim. After all medical record was filed by Respondent at SC W.C.C. on 02/22/2018. R.P., R.P. for BOTH injuries.

ARGUMENT

- Respondent listed the wrong date of 07/17/2017, in every brief intentionally knowing that the same letter from Dr. Saunders that I submitted as my APA has the date of 07/17/2019 (Number 17 in Full panel order) R.p. Dr Saunders

- Respondent gave Commissioner James the Form 20 for work injury of 01/17/2017, to be used for this claim. After a Form 20 was filed by Respondent in 2020. Tr. p. 6. lines 7-15
And even though at the hearing I stated that I wanted Commissioner James to decide. Tr. p. 19. 24-25 She did not mention the weekly (Tr. p. 8, lines 13-15) compensation rate in the order instructions, but Respondent did.
R.p order instructions

- Respondent provided medical record of my E.R. visit of 03/07/2017 as their APA. And went on to mention 2-3 sheets from said medical record of X-Ray of my Thoracic, Cervical (upper, lower) back. But chose not to list the X-Ray finding of 12/23/2016, that showed reason why the doctors where Respondent alleges I had authorization for medical treatment, Instructed me to Contact My Doctor IMMEDIATELY. And wrote it in the physician Discharge Summary. The Respondent has never really mentioned my medical record from 12/22/2016, but is insisting that The Car accident is the Cause 10 Weeks and 2 days after my work injury. And if you were to review every document that Respondent has submitted you will not find NOT ONCE where they Mentions the Physician Discharge Summary. Even though it was my APA

ARGUMENT

And I read it at the hearing on June 12, 2020. Number 8 in Order. Tr. p. 18. Lines 22-25, Tr. p. 19. Lines 1-3.

Respondent Stated that S.C. Code Ann 42-15-60(A) was applied which is a lie. If the Respondent had given me authorization for medical treatment, I feel that the Recommendation from the hospital (Respondent states they sent me to) stating on 12/23/2016, I needed more medical care. And Respondent should have been able to pay for my medicine, since the prescription was filled on 12/23/2016. IF 42-15-60(A) (had been applied. And still have not been reimbursed.) R.P. ex receipt

Respondent Feels the need to put whatever they like in their briefs or the Full panel order. Example: "Ms. Dixon Suffered admitted injuries to her back, neck, jaw on December 22, 2016, after being struck by a patient while assisting them into bed" but on the S.C. Department of mental Health Witness Statement that I had to write on 01/13/2017, 22 days AFTER my work injury (My Supervisor Lorain Tracy called me at home to let me know I HAD to report to HER office while I am home medicated on Leave without pay due to back pain to write my statement, after all the form is given by Supervisor(s) is not listed in my statement. R.P

Respondent States I have provided NO EVIDENCE which would allow for any of the exceptions to rule, S.C. Code 42-15-60 (2012)

ARGUMENT

• Respondent number 13, States I filed a Form 50 on 09/07/2017, And on that Form 50 my then attorney stated my home address on BOTH OF the Form 50(s) that he filed. R.P

• Respondent number 14 in the Order States I filed a Form 50 in 02/26/2019 And that's Not correct R.P. But what I do know is that on 02/12/2019, I had a Subpoenaed deposition, and on 03/07/2019 I had a hearing for my work injury of 01/31/2017. And after both Respondent filed a Form 51 dated 04/02/2019, their First 51 for this claim Apr. 12, 2019. I filed my 2 Form 50 in 02/2018.

• Respondent yet again added their opinion "I would find that Claimants request for treatment for back is denied." The Respondent have continued to state they provided medical treatment. But due to there being no authorization numbers listed on one document or a claim number or the word Workers' Compensation is the reason why Respondent Aska Palmetto Health Richland for my medical records for billing purpose in 2017. If it was a Workers Compensation claim they pay for copies and they receive records.

• Respondents filed a Form 19 (Status Report and Compensation Receipt) on February 22, 2018. For this claim, And I know I NEVER received any compensation. And on the Form 19 it states "Form 19 must be filed when a claim is denied" Again I am not an attorney but if this claim was filed in 2019 for the FIRST Time, there

AR GUMENT

Should NOT be a Form 19 filed with SC. W.C.C. in 2018? Or Should it?

R.P.

- Respondent number 3 in the order states a lot of nothing that pertains to me. Due to Respondent NEVER Sent me to Palmetto Richland on 12/23/2016. And they NEVER gave AUTHORIZATION before or after my E.R. visit on 12/23/2016 even though it was Recommended and I requested medical treatment. And the Respondent themselves has stated this FACT in their Form(s) 51, 52. R.P.

- Respondent makes mention of the Form 30. And have stated that I filed a document that was construed as a motion for additional evidence regarding a document titled "Employee Supervisor Notification" dated 02/03/2017. Which was granted by the Full Commission. But what Respondent forgot to mention was I had filed a motion 2-3 times to have said form added in my 2017 claim and hand delivered it to the Commission to be used as my APA, which was never "Scanned into our system" that was the reason for the motions. And it's allowed for my 2016 case. R.P.

- Respondent number 3 also mentions "which limited the period to 10 weeks and that the Commission's decision to extend compensation must be based upon the heightened standard of medical evidence by statute". Since the Respondents never authorized medical treatment as recommended by the E.R. doctors on 12/23/2016, there was no way for me to have been able to get expert medical evidence. And

ARGUMENT

For the record, Again I have never received Compensation.

- In the order under Summary of The Evidence, the Respondent lied by stating "Claimant also produced an unnumbered stack of documents which had not been presented prior to the hearing.

For the Record my Apes are Stamped March 13, 2020. Hearing was for 04/01/2020

- Respondent continues to reference the letter provided by Dr. Sanders in regard to my 2016 and 2017 work injury, when the letter is dated 07/17/2019. (Number 4 in the Order) R.P

- Respondent number 7 states, "I allowed my treatment to lapse beyond statutory period without providing sufficient medical evidence that any on going back pain is the result of my 12/22/2016 work injury" when I was released from palmetto Health Richland on 12/23/2016 I was in no pain after receiving a shot of Torodal (Narcotic) but the following day I was in great pain, I called my supervisor for that reason, and the fact that the Physician Discharge Summary stated for me to contact my doctor immediately for more medical treatment, and again I spoke to my supervisor about being sent to the doctor due to me not knowing who to contact and she did.

I have been employed several times by the Respondent starting in October 1988. And I had never filed a claim while employed with Respondent.

Conclusion

the form 18 that has been filed by Respondents, For example the documents that I have listed in my Designation of matter is a form titled Itemized Statement of Charges of December 23, 2016. And it shows the Amount of the Actual bill, the Adjustment Respondents received And the Amount that was paid, and the total amount due is \$0.00

the form 18 States the Commission is to receive this form every 6 months. Starting out the amount listed is \$418.90 For several months (FYI: The Form 18's are for Compensation and medical to show monies paid to me, doctors)

And then the amounts listed on the form 18's increased drastically to almost \$7,000.00, Now I know For a Fact that I've NEVER received Compensation, before. And after December 23, 2016 I never had medical authorized treatment, So IF the bill was \$0.00 in 2017 Why has the amount been changing?

So Since the Respondent has stated many times that I am pro-se and don't know the law, still does not or at least should not give the Respondents a pass to lie because they do. I have no reason to lie because GOD is my witness the only thing I had asked for from the Respondents was to send me to a doctor in 2016 and they never did so. And years later Respondents wants to say I had authorized medical treatment on December 23, 2016. The Respondents have treated me the same as the physician's Discharge Summary IF they did not mention it, speak about, follow up, it will simply go away. So Just because the Respondent stated I received authorized medical treatment does not make it true. My mama use to say if a person lies about the small things they will lie about the big things.

I have written all of that to say this: please I beg of THIS Court to please review every document that I will submit to THIS Court and to review the Respondents and EVERY Transcript referenced by BOTH.