

Final Brief Of Appellant

The State Of South Carolina
In The Court Of Appeals

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

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

Case No. 2021-000696

S.C. Department Of Mental Health,
Employer And State Accident Fund
Carrier

Respondent

v.

Dana L. Dixon,
Employee

Appellant

Final Brief Of Appellant

Dana L. Dixon

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SC Court of Appeals

October, 2021

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Table of Authorities And CASES

67-411: Employers 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 filed 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 the employer, or the employers representative.

B. Employers 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 5 hundred dollars in medical treatment and does not cause more than one lost workday or permanency, the employer may pay for medical treatment. The employer is not required to make a written report to the representative or 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

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. 67-411 C(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
(R. p. 87-93)

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.

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 and 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.

(R.P. 102) (R.P. 133, 167, R.P. 185)

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 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.

(R.P. 101, Line 2)(R.P. 102)

Table Of Authorities And Cases

Section 42-19-10: Employer's Record and report of injuries

B. The employer's representative shall submit to the Commission a report indicating the claimant's final rating of permanent impairment. (R.P. 18)

Section 67-14-01: Expenses incurred in receiving medical treatment, reimbursement (R.P. 143-144)

B. The claimant shall receive reimbursement from the employer's representative. (R.P. 143-144)

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

Section 67-412: Employer's Report of injury form 12m.

A. The employer's representative shall report to the Commission injuries reported by the employer. (R.P. 81, R.P. 133, R.P. 167, 185)

B. This report shall be made in accordance with R-67-416. Within 10 days of closing by the employer's representative. (R.P. 99)

67-413: Periodic Report: The employer's representative shall file a form 18, (R.P. 87-93) periodic report or the EDI (R.P. 99) sub annual (sr) as follows. (R.P. -) (R.P. -)

Table of Authorities and Cases

1. Six Months after the alleged date of injury and each 6 months thereafter until Commission file is closed. (R.P. 87-93)
(R.P.)

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/employer 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.

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?

(R.p. 97)

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? (R.p. 97)

In the Order findings of Fact #19. Is incorrect. Respondents stated "based on greater weight of the evidence." The evidence that Respondents has submitted (3-07-17) are 3 (R.p. 85) pages from Providence hospital (Apr 65-67) 1 page from Palmetto Richland (12-23-2016) pages 34-53 which includes pages of the medical records that was requested, and then combined together. (R.p. 102) Why haven't the Respondents provided any documents from 2014 or an authorization number or the name of the person who gave consent of authorization to treat with date and time? (R.p. 297 Line 14)

The Order under Statement of the Case states the following the hearing on October 28, 2019 the parties entered into a consent (R.p. 12)

R.p. 4 of Order. Order due to no form 20 was filed. So why did the Respondents (R.p. 24, L. 6-25) give Commissioner James the wrong document form 2017 and the paperwork that was filed in March, 2020? R.p. 12, R.p. 24, L. 6-25, R.p. 25, L. 1-15)

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? R.p. 104 - 110

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 Respondent have listed, in their
Statements, brief or Order instructions, 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?

(R.p. 79) (R.p. 37, Lines 21-25, R.p. 38, Lines 1-3)

In the Order under findings of fact # 16, is incorrect. The
Respondents continues to reference the 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 Respondent
wanting it to appear as if Dr. Saunders was the doctor of record
for my December 2016 workplace injury? Dr. Saunders, worked at
C.W. Williams Community HealthCare in N.C. (R.p. 97) And I
stated that on record (R.p. 101, Line 3) on 02/22/2019.
But Respondent ^{never} requested those Medical Records.

Statement of Issues On Appeal

The form titled First Report that Respondents wrote that has the file date of September 25, 2017 (a form that I never (67-211c) saw until my then attorney mailed it to me) and on the form it states "I W 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. 98-99)

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. (R.p. 20-61), (R.p. 79)

So why have the Respondents given inaccurate Transcript references in their briefs 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. 47. lines 1-5) "It basically don't say." (R.p. 47. Line 5) states "muscle spasm".

Can the Respondents show or state why on their First Report of injury they indicated Contusion that they filed on September 25, 2017? (R.p. 99), (R.p. 185-186) are from 12/23/2016 E.R. Visit, (R.p. 47. L. 5)

Statement of Issues on Appeal

The Respondents APA p.36 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 1 page (R.p. 187) as their APA?

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 (R.p. 248-281) Medical Records?

* (R.p. 254-279) (p. 150-160, p. 284-283) is the Completed Records? *

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. Trip. 5. Lines 9-19. 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 hearing that has "Received" by the Commission for 2016. The Respondents filed their Report of Injury (R.p. 99) on 9/25/2017 for my work injury of 12/22/2016. 9 Months after my work injury, and gave their authorization on the 23 of Dec 2016. Not the day of

Statement Of Issues On Appeal

Others I stated. So if I pointed out the errors as they were in Respondents brief cross checked Respondents transcript references how is that Narrating a version of facts if its 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 ^(Full Commission order) (R.p. 218.L. 7-8) 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 Hand Delivered 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.37 Lines 21-25, Tr.p.30 Lines 1-3) states for me to (R.p.38L.1-2) Contact (family or) the above physician (Dr. Soto) immediately.

So where are the allegations Respondents are referring? (R.p. 79)

The Respondents in the same sentence states: the record 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 (R.p.185) Respondents should have first hand knowledge I went to work and my Dr. Appt

bottom of (R.p. 218) (R.p. 184)

Statement of Issues On Appeal

At Carolina Occupational Healthcare on March 06, 2017 (R.P. 187) after work. And the fact that the E.R. notes from Providence Northeast medical page shows Tylenol 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. (R.P. 79, R.P.) R.P. 52. Lines 1-8)

Why wasn't 42-15-60(a) applied for injury of December 23, 2016? (R.P. 104-110)

Why did the Respondents 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. pages 104-110) (R.P. 79)

Why is the Respondent stating that I am asking for additional treatment when Respondent never authorized any or paid for my meds, (R.P. 143-144) (R.P. 99) or filed a first report (R.P. 99) until 9/25/2017, After Commission wrote letter (R.P. 98)

Where are the 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. (R.p. 297, Line 14) Not the next day.

Can the Respondents 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 footboard of his bed) That was not the (R.p. 81) 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. (R.p. 161; R.p. 297, R.p. 79)

If you did the correct thing by waiting for supervisor to come to the unit where you were while in severe pain waiting over an 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

(12/22/2016 til 03/04/2017) I was involved (03/05/2017)

in a MVA, as I stated on record (R.p. 101. Line 3)

Respondents listed their APT (R.p. 185. Line 11) that states I

(R.p. 79)

was able to be discharged home. On the medical record page

2 of 2 (R.p. 133) from Palmetto Richland of 12/23/2016, the same form

that Respondents filed at the lower Court that is stamped RECEIVED (R.p. 133)

FEB 22, 2018, States "Verbally states understanding of discharge

instructions" (R.p. 79) The type of medicine I was given on

12/23/2016 at Palmetto Richland was a narcotic called

Toradol (R.p. 162). (R.p. 159) is a work excuse, doctor did not

have me out of work.

At Providence E.R. of 3/17/2017, I went due to severe

neck pain. I received No medication, I was instructed

to take Tylenol Extra Strength (R.p. 160) list the reason

for my E.R. visit.

The Submitted Exhibits (R.p. 147-149) is of passenger Rear

Side Panel Off due to broken tail light, dent on side of door.

Statement of Issues On Appeal

The Respondents Stated that I failed to point to any evidence in the record to support a casual relationship between December 22, 2014 (R.p. 79) injury and any current back issues that may currently exist.

If the full panel reviewed all of the (2016) Appeals that showed time sheet for January 13, 2017, The S.C. Department of Mental Health Witness Statement of injury or illness dated (R.p. 81) 01/13/2017, for my 2016 work injury the letter from the Respondents dated January 18, 2017 letting me know they (R.p. 83) had received my work injury report for December 22, 2016.

Or the Discharge Summary from the E.R. at Palmetto (R.p. 79) Health Richland that instructed me 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.

On 02/22/2021 Commissioner Taylor (R.p. 71, L. 20-25)

did not make (R.p. 153, L. 1-5)

a statement that she saw a form 51. After I had stated (2021 Tran) (R.p. 109, Lines 22-23) Respondents

stated in their brief that they had filed a form 51 (R.p. 109)

On February 07, 2020 for the claim of 12/22/2016. (R.p. 73, Lines 24-25)

(R.p. 74, Lines 1-2) So why is the above mentioned not deemed as evidence by the Respondents?

Statement Of Issues On Appeal

If Respondents knew of my work injury on 12/22/2016 (R.p. 81) R.p. 83 then why was I questioned about it at R.p. 101 Line 3, for my 01/31/2017 work injury hearing?

Why did Respondents wait until After R.p. 101 Line 3 of 02/22/2019 and hearing of 3/7/2019, to file their first Form 51 on April 02, 2019 for a work injury 2 years prior for W.C.C. 1623303. R.p. 104-105

Why didn't I have R.p. 101 Line 3 for this work injury as I had for 01/31/2017 work injury

For me to have received authorization to go to Palmetto Health Richland the morning of 12/23/2016, the S.C. Department of Mental Health Workers Compensation package R.p. 296-299, would have needed to be completed (296-299 is 1/31/17 nec package) R.p. 297 has Supervisor's Signature.

But for the work injury of 12/22/2016, W.C.C. file No. 1623303, Case No. 2021-000696, Respondents never gave me the package for this claim. (R.p. 296-299)

That is the reason why there are No authorization numbers for this W.C.C. file No. 1623303 and no documents submitted by Respondents that lists any. Respondents say I had authorization on 12/23/2016, why that date. If Respondents were being truthful I would have received authorization on the day of injury R.p. 296-299.

Respondents filed their first report of injury 9 months, 3 days after my work injury. I paid out of pocket for something R.p. 143-144 that 42-15-60(a) was to have done. 16

Statement Of Issues On Appeal

For whatever reasons the Respondents wants it to seem as though I said I never filed a Worker's (2019 hearing) Compensation claim (R.p. 101, Line 3) is how the Respondents know about my MVA in March 2019 were I stated the times that I had filed claims. And on 6/12/2020 (R.p. 53, Lines 14-17)

Statement Of Issues On Appeal

The Respondents received my medical records of 01/31/17 (R.p. 133, 167) 01/31/17, & 12/23/2016, in January 2017 (R.p. 102) Then used (R.p. 101 Line 2) For medical records of my W.C.C. file no. 1712879 → (R.p. 101 E.3) (R.p. L.2) in order to use them for W.C.C. file no. 1623303.

If Respondents was going to use the R.p. 101. Line 2 medical records they would not have asked for the medical 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?

(R.p. 102) Since they were filed at the lower court (R.p. 133, 167) On the Respondents Notice Of Witnesses And Written Reports (R.p. 85) physician or other evidence to be introduced on behalf of the Employer/Carrier form (R.p. 234-247) has listed as their APA Providence Hospital dated: 04/21/2008 - 03/07/2017 page numbers (R.p. 282-293)

Respondents did not follow Regulations 42-15-80 that pertains to (R.p. 101. Line 2) Every Hospital record came from Respondents (R.p. 52. Lines 1-13) and numbered them. (R.p. 138-142)

Statement of Issues on Appeal

— Respondents feel the need to Combine Richland, Providence N.E. and Providence Medical records? (R.P. 3) R.p. 138-142)

(2021) On the 22nd of February the Respondents stated that I was discharged with no further care (R.p. So if that was the case why did the E.R. doctor instruct me to contact my doctor immediately to receive definitive medical care? (R.p. 79)

On February 22, 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 # p.r.) that states Chief Complaint: (R.p. 150-160) Neck pain. page number 57 of Respondents APA states (R.p. 160) "you were seen in the E.R. on 03/07/2017 for neck pain".

Why is the Respondents trying to find every other way to say I injured my back (R.p. 11 #11) on 03/05/2017?

On February 22, 2021 the Respondents stated that my prior attorney filed a form 50 for this case. (When the fact is on 03/15/2017 my prior attorney was relieved as my counsel.) (R.p. 74 Lines 1-2) R.p. 134-137 signed Order to Be Relieved)

Statement of Issues On Appeal

W.C.C. file No. 1623303 (this Case) and one for W.C.C. file No. 1712879 (01/31/2017) (R.p. 134-137) was the last time Respondents received any documents from my previous attorney.

In the month of January 2017, Respondents mailed me a letter informing me that they had received my work (R.p. 81) 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 (R.p. 83) if they knew of my injury before January 2017? letter is dated 01/18/2017. (R.p. 102, 133, 167)

On 01/31/2017, I was out on L.W.O.P (leave without pay) I submitted time card (R.p. 82) 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 told me she would help me. I caught a ride with my daughter. I reported to Supervisor's office, there Mrs. Tracy gave me the form titled: S.C.D.M.H. Witness Statement of Injury Or Illness (R.p. 81.) I was told → that 01/31/2017, was the last day to write my statement or D.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 (R.p 81) And the date was not 12/21/2016. Mrs. Tracy told me the Supervisor's name for the night of 12/22/2016. My assigned shift was 3:00pm til 7:15 Am, at 2:53 Am On 12/23/2016, I arrived (R.p. 79) 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 6:00am? (R.p. 81, 99, R.p. 79) has listed times.

On 12/22/2016, I never received any paperwork from Respondents Not even the 4 pages S.C.D.M.H Workers' Compensation packet. (R.p. 296) So by me never receiving paperwork from Respondents. Who Completed Respondents First Report (R.p 99) 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 Barden, and it was postponed due to Respondents never filed the paperwork for W.C.C. file no. 1623303. (R.p 12) Why didn't the Respondents file the paperwork early like they had for W.C.C. file no. 1712879? This (R.p 101, Lines 1-2).

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 medication. But for the 2016 injury Respondents did not. I had to pay out of pocket and never received reimbursement (R.p. 143-144). On 01/31/2017, I received the S.C.D.M.H. W.C. Packet (R.p. 296-299) that I completed and signed along with my supervisor. And there was an (R.p. 297) authorization number that went with me from day one of my doctor visit, (R.p. 164-166) on 01/31/2017, and a (R.p. 181-184) authorization number for every new visit (physical therapy) (R.p. 181).

But for W.C.C. NO-1623303 (this case) Respondents continue 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 claim.

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.C. Packet (R.p. 297) to show the person (supervisor) who signed acknowledging the injury the same as 2017 packet? Since the Respondents handled the 2017 claim first and the 2016 claim second the paperwork was and is the same. (R.p. 296-299)

Statement Of Issues On Appeal

In full Commission Transcript I stated that Respondents admitted to filing a form 51 on 02/07/20, for work injury of 12/22/2016. (R.p. 69.L.22-25) But the very first form 51 (R.p. 104-105) that 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. 104-110)

At the hearing on June 12, 2020 Respondent stated that I am asking for additional medical treatment (R.p. 53.L.1-4)

and they stated the same at appeal hearing on 02/22/2021 and 6/12/2020, 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. 37.21-25, R.p. 38.L.1-3) of June 12, 20 transcript.

On 12/23/2016 when I took myself to Palmetto Health Richland without authorization, I received a shot called Toradol in my (R.p. 162-163) Gluteus medius, and it helped for several hours. On the 24th, I was medically excused from work and in severe (R.p.) pain. I called my supervisor Lorain Tracy and asked her to call someone at Workers' Comp so I could 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 month 2018. Why is the Respondent being untruthful about me filing a "Subsequent" form 50, a year later? (R.p 137)

On the letter from Ben Cruise dated March 02, 2018 the first page (R.p 134) it states "CLOSED" 50 with that alone, made me call the Commission to find out my Case Status. I was told my CASES had closed (R.p 94) (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 (R.p 137) the first week of March 2018, if I filed on February 26, 2019? Respondent's form 51 is dated 04-02-2019. Why haven't the Respondent provided DATE document of 12/22-23/2016 to show the AUTHORIZATION or claim number for this claim? (R.p. 104)

If the Respondents knew of my 12/22/2016 (working) why wasn't I given the 4 page Worker's Compensation packet like I received the morning of January 2017 (R.p. 296-299)

Statement of Issues On Appeal

31, 2017 (work injury) (R.p. 296) instead of Respondents fabricated First Report (R.p. 99) they filed on 09/25/2017?

Why did the Commission NEED to Contact the Respondents (R.p. 98) by letter dated 09/14/2017, to say they (Commission) had not RECEIVED a First Report of injury for this claim? (1423303)

Why haven't the Respondent stated that they had closed both claims several times? (R.p. 94)

Why did the Respondent handle the 2017 claim first? (R.p. 181-184) (R.p. 104)

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 had 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.

(R. pages 104-110, Lines 6-11)

Statement of Issues On Appeal

Even after the E.R. doctor instructed me to contact (R.p. 79) my own doctor IMMEDIATELY, I still could not receive medical treatment for my 12/22/2016 work injury why not? And I personally do not feel this case is past statutory period, since I was never sent for any treatment. (R.p. 10.#10 of Decision and Order of November 03, 2020*)

When the Respondents filed their form 51 on April 02, 2019 (R.p. Why wasn't the form filed with it instead of 4 yrs later (R.p. 12, 13) of Consent Order, (R.p. 103-104)

Why haven't the Respondent listed or mentioned the dates of the hearings I had with Commissioner Campbell or Commissioner Barden? (R. pages 106, 102 at bottom of page)

Why have Respondent listed a weekly compensation rate, when the Order Instructions Does Not? (R.p. 11)

Why did the Respondent give Commissioner James the wrong form on June 12, 2020 that is for my 01/31/2017 work injury? — Knowing that Commissioner Barden had asked that Respondent file the needed document (R.p. 12) R.p. 103)

Statement of Issues On Appeal

Did the Respondents "forget" that they Certified Mailed me copies of my medical records (R.p. 112) Along With the Notice of Witness and Written Physician Report And Of Other Evidence To Be Introduced On Behalf of Defendants With Certificate of Service With Same date as (R.p. 112)

Since Respondents never used the "Requested Medical Records" (R.p. 102) At the hearing on 3/7/2019, (R.p. 101. Lines 1-2) how was Respondents able to Obtain my Medical Records? R.p. 101. Line 2. Since R.p. 102, does NOT state workers comp. It states "This request is for billing purposes"

The Respondents have Submitted the Notice of Witness and Written Physician Medical Reports in their Pre-hearing Briefs that is addressed to each Commissioner that presided at the hearing (R.p. 234-247) and the Respondents mails me the same pre-hearing brief with a list of their APA Submissions they intend to use as their evidence.

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 (R.p. 11) will reflect that she was discharged with no further care. (R.p. 74, L. 24) we believe the evidence is in the record to support that she did not have lower back or neck pain" (R.p. 74, L. 2-8)

How was the Commission going to review the medical record when Respondents medical record (APA) for palmetto Health Richland contained 2 pages of the 45 page medical record from date of (R.p. 3) service 12/23/2016 (R.p. 4, Line 5 of Signed Order of 11/03/2020 for my hearing for W.C.C. 1628303 the Respondent were able to produce a report titled ISO report (R.p. 19) that is listed as their APA that went back as far as 1990 when I was with child and was involved in a car accident. But Respondent stated the report was dated 01/12/2018-10/24/2019. (R.p. 19, 294, 295)

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 (R.p. 297) on the same night of my injury. The Respondents have not 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. (R.p. 98.) So why is the First Report of Injury showing file date of 09/25/17? (R.p. 99.) (R.p. 81.) (R.p. 98)

According to 67-413 (Periodic Report) states that Respondent were to have filed a form 18 or EIT (R.p. 87-93) show Six months after the alleged date of injury, which would have been June 22, 2017. So why are the forms showing 2018?

Statement Of Issues On Appeal

The Respondent 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 Summary (R.p. 79) instructed me to go to my doctor immediately, why didn't the Respondents feel the need to send me to their doctor for more treatment aside from a shot (R.p. 162-163) with ^{the} x-rays? (R.p. 125-126)

Respondent failed to provide any documents with year 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? (R.p. 297-)

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 ER for jaw, neck, back.

Since the Respondent have mentioned the MVA 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 22, 2016 when a driver dented passenger side panel and broke tail light of my car? (R.p. 147-149.)

Why is the Respondent wanting to change the submitted evidence (R.p. 81) to make it to their liking, Did they NOT see the 11 pages (R.p. 150-160) from their submitted medical record from (R.p. 160) Providence Hospital that Respondents listed as their APT that shows neck pain? 30

Statement of Issues On Appeal

The Respondents were untruthful to the Commissioner by stating they had not received the (R.p. 101. Line 2) medical records. Knowing they had (R.p. 102) in 01/2017. And filed Medical records at the lower Court on 02/22/2018 (R.p. 167, 133) from 2016 and 2017 claims, Before the hearing of 3/7/2019.

Respondents Sends the pre Hearing brief to the Commissioner who will be presiding over the hearing along with their APA Submissions (evidence) and discovery.

(R.p. 234-247) I receive a copy as well as with Certificate of Service. Every pre-hearing brief comes/come from Respondents at the lower court. I only submitted what was used by Respondents at the lower court.

Statement Of The Case

" This hearing Comes before the Full Commission Appellate panel via appeal by the appellant from the hearings Commissioners 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. (R.p. 4. Lines 1-3 Lines 18-20) (R.p. 65. L. 25) (R.p. 66. L. 1-4) She received medical treatment for that injury (R.p. 269-270) (R.p. 303) from Palmetto Health Richland emergency room on December 23, 2016 (Respondents APA 65-67) She was released from care the same day and Appellant received no additional authorized medical care for this accident (R.p. 79) (Respondent APA 67) During march of 2017 Appellant was involved in a motor vehicle accident (R.p. 147-149) (Respondent APA p. 34-53) (R.p. 212-224) on September 07, 2017 Appellants then attorney Benjamin Cruse filed a claim on Appellants behalf (R.p. 4. L. 8) via a form not requesting a hearing in which Appellant alleged an injury (R.p. 4. L. 9) to the Jaw, Neck, back. In February 2018 Appellant requested to terminate the attorney client relationship (R.p. 134-137) 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 26, 2019 (R.p. 213) Seeking treatment for her Jaw, Neck, Back. This was past the statutory period for treatment and lapse for an injury (R.p. 104-110) and Appellant has provided no evidence (R.p. 1-296) which would allow any of the exceptions to the rule S.C. Code § 42-15-60. (2012)

Standard of Review

I have provided sufficient evidence (R.p. 1-296) for this claim, and from the very start of this claim even while I worked in severe pain for the Respondent as a Certified Nursing Assistant (C.N.A.) I repeatedly asked for medical treatment, even after I put my medical (R.p. 79-80) 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. 80) The Supervisor signed and dated the excuse "Received 01/13/2017" of. When she received it, My Supervisor CALLED me at home to come write my witness statement (R.p. 82) on January 13, 2017, the same day she received it (R.p. 80) I never received a phone call, email or a letter before January 13, 2017. But 5 days after I wrote my statement, (R.p. 142) I received a letter dated January 18, 2017 (R.p. 83) 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 (R.p. 104-110.) (R.p. 141) 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's NOT true at all. The fact is I took myself to the emergency room without consent for 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 paperwork was given to me to complete (R.p. 296-298) 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 Respondent has stated that I have been "repetitive" maybe I have been, and each time I've submitted my evidence at the lower court, and any evidence Respondent submitted was for 2017. MVA (R.p. 11.1-15-16) Accident and X-Rays WAS Taken. But Respondents NEVER mentioned 2 important things from E.R. visit of December 23, 2016, THE X-RAYS, (There weren't any taken) (R.p. 185) Physician's Discharge Summary, (R.p. 79) but always March 7, 2017. I stated on February 22, 2019 at my R.p. 101. Line 3 When asked workers Compensation claims (R.p. 62, L. 15-25) but Respondent (R.p. 133, L. 1-25; (R.p. 139, L. 1-25) want the court to think I am a liar, and I was even asked how did I get injured

∴ On December 22, 2016, 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. 129) 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. 81) I believe then as I do now, to treat every person even the patient the way I 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, 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 2017, this claim was handled last because Respondents did not file the first report of injury (R.p. 99) or the S.C. Dept of Mental Health W.C. package (R.p. 296-299) and they did not have the required information, S.C. Dept of mental health Witness Statement (R.p. 34

STANDARD OF REVIEW

have a First Report or a Witness Statement (R.p. 81, 99) (R.p. 296-298) explaining how injury occurred. That is why I did not have a (R.p. 101, Line 3) deposition for this claim because Respondents asked their questions on February 22, 2019, at the deposition for my 2017 (R.p. 101 L. 3) work injury, then after March 07, 2019 Respondents filed their first form 51 for this claim (R.p. 65, Lines 14-25, R.p. 66 L. 1-15) (R.p. 104-105) 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. (R.p. 79, R.p. 81) But if (R.p. 297, L. 6) Respondent had done their homework or even called H.R. they would have realized my assigned shift that I worked was third 11pm-7:54am. I was working 3pm-7am by Respondents having requested my medical records (R.p. 102) from Richland Memorial Hospital on January 18, 2017 for payment purposes.

The arrival time was at 2:53 AM. Which indicates that on December 22, 2016 Respondent did NOT KNOW about my work injury, and on December 22, 2014 Respondent did NOT give authorization for medical treatment at Richland Memorial Hospital. 42-15-20 (R.p. 99)

The Respondent has mentioned a few pages from Providence (R.p. 3, R.p. 4) of my March 09, 2017 E.R. visit, and used medical pages as their APAs from Providence in referencing 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 (R.p. 150-160) from Respondents APA show I was seen for Neck pain. (R.p. 160)

The fact is from December 22, 2016 til March 04, 2017 Respondents NEVER contacted me, aside from the letter (R.p. 83) dated January 18, 2017 (R.p. 189) 5 days after I wrote my statement. (R.p. 81) Respondents NEVER sent me for medical treatment. 10 weeks 3 days (R.p. 104-109) later is when I had the MVA. But 10 weeks 2 days No authorized medical care from -

Standard Of Review

Respondents because I was RELEASED from Richland Memorial ER. on December 23, 2016 (R.p. 185, 184-110) and then stated in the signed order that I subsequently filed a form 50 February, Respondents (R.p. 137) did not submit that as their evidence. I moved to N.C. on February 4, 2018.

On September 05, 2017 my then attorney filed a form (R.p. 4.L.9) for file numbers 1623303 and 1712979, (R.p. 213) and if you were to review R.p. 134-137, 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. 137) on the last page that states Certificate Of Service my address is for N.C. DATED March 02, 2018. And on the first page is written CLOSED. So by me not knowing what to do I called S.C. W.C.C. and was told that both cases (R.p. 18) were closed (R.p. 94) 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 closings and re-opening of the claims (R.p. 94). So for the Respondents to make the statement that my brief was "wholly untrue and riddled with accusations", and even in the signed order,

The Respondents lied about me making ALLEGATIONS (R.p. 218) that the record from 12/23/2016 provided that she needed additional medical treatment. Respondent speaks of the March 05, 2017 MVA, Respondent does NOT mention the December 22, 2016 work injury or December 23, 2016 medical record, and they NEVER even spoken to me ever about my work injury of 12/22/2016, with the exception of R.p. 101.L.3

STANDARD OF REVIEW

Respondents Form 18^(s) States at the bottom of the pages (R.p. 87-93) file this Form 6 months after alleged injury date and each 6 months until the Commissions file is closed. Form 18 MUST be filed whether or not compensation is on going.

Respondent 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. (R.p. 18)

* Do not include as 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. 18) It was filed on 02/22/2018, for my 2016 work injury. But the hearing for this claim was 6/12/2020.

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. 81.)

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 (R.p. 126, Lines 18-20) say. And for transcript of February 22, 2021 hearing it has only 16 pages (R.p. 62-78)

3. Appellant filed a form 50 February 26, 2019. for starters when my then attorney filed the 2nd form 50(s) in September 2017, he listed my address in South Carolina. (R.p. 231-233). On February 04, 2018, I moved to Weyland Ave in Charlotte, N.C. When I called S.C. W.C.C. to get status report I was informed that BOTH cases had been closed. (R.p. 134-137) I was asked did I want to reopen 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 (R.p. 237) by Mr. Cruse in the packet that is dated March 02, 2018. 39

ARGUMENT

4. Respondent states that I filed a form 50 July 08, 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 16, 2019 @ 12:00 pm Commissioner Campbell (R.p. 106)
5. Respondent is an attorney and he have dealt with Workers Compensation Claims, So therefore Respondent should know this: On October 18, 2019 when Commissioner Barden realized (R.p. 108) there was no Form 20 the Consent Order (R.p. 12) was written (instructions of Commissioner Barden) that meant the case goes back on the docket to be re-schedule d. And on Respondent Form 58, dated March 23, 2020 (R.p. 236) at bottom of form it states date of hearing: April 1, 2020 (R.p. 85) Commissioner James, that was postponed due to Covid. And On June 12, 2020 I had hearing. (Respondents filed their first Form 51 for S.C.W.C.C. 1623303 On April 02, 2019) (R.p. 104-106) - for my 2014 work injury.

ARGUMENT

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 (R.p. 66; L. 9-19) under the title: Authorization To Treat.

On 12/23/2016, I received a Discharge Summary (R.p. 79) that instructed me to contact my doctor immediately, I was told that Worker's Compensation would not pay for that doctor (Solo) visit. I also received a medical excuse that excused me from work on 12/23-24/2016 only. When I returned back to work I put medical excuse in Lorraine Tracy Locked box on her door. On 01/13/2017, Lorraine Tracy my supervisor write "Received" (R.p. 80) on the same day she called me at home to tell me (R.p. 82) to report to her office to write my statement (R.p. 81). On that date I was out on L.W.O.P., I also received a prescription that I had filled on 12/23/2016 (R.p. 143-144) Respondents have not reimbursed me for something that 42-15-60(A) should have covered, but didn't. (R.p. 5; L. 7-8) 42-19-10

And in the month of January the Respondent filed a Form 20 in 2020 for my work injury of 12/22/2016. (R.p. 12, R.p. 103.)

ARGUMENT

That shows a different amount \$ 490.⁸⁸ Weekly (R.p 103) (R.p 252-253) Compensation rate. At the hearing I was asked by Commissioner James, if I was okay with what the Respondents Submitted (R.p 24. Lines 13-24 R.p. 25. L. 1-22) or did I want her to review the form 20. I stated I wanted her to review (R.p 25. L. 14-15) In the proposed Order the rate is \$ 299.57. In the Signed Order it's \$ 299.57. The same rate as (R.p. 24. Lines 13-19)

WCC# 1712279 (R.p. 24) Looking over any and all documents that Respondents have submitted that pertains to ^{this} file No. of Workers Compensation Commission every form is dated 2-3 years after my work injury or 12/22/2016. Commissioner James Order Instructions does NOT list Compensation (R.p. 11)

The witness statement that I wrote is dated 01/13/2017, 22 days after my injury (R.p. 81) Then the Respondents writes a letter to me dated 01/18/2017 (R.p. 83) 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 (R.p. 296-299)

ARGUMENT

My 2017 Work Injury (designation of matter No's
Rp. 164-166) (Rp. 181-184)

(Rp. 181-184) Showing Authorization and Claim numbers:

Number 17 is the form showing date of injury and the date of my
doctor visit (Rp. 183) 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 01/31/2017, I had to
wait for my Supervisor (Rp. 296-298) to call Comperchum (now) State Accident Fund
to get authorization to send me to their doctor of choice, Injury happened
at 6:00 AM, I reported it at 6:05 AM, 10:00 AM went to Dr.

On 12/22/2016, the Supervisor never came to the unit or called. The work injury
happened after 12 AM not 6:00 AM (Rp. 160) AS Respondents have on their
First Report of Injury (Rp. 99, Rp. 185) The medical pages I've
listed for (Rp. 79) of designation of matter shows the time of
my arrival at Palmetto Health Richland, so to me that 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 (Rp. 81) I wrote on 01/31/2017. Since I've
never written that time any where else. So it would seem that
Respondents would know the time, since they state I had authorization.

I can say I was medicated and at home (Rp. 82) and
was told to come in to write my statement 22 days AFTER

Rp. 81

The Shift I worked was (3rd) 11pm - 7:15 AM, Rp. 299 shows
the time my (3:00 PM) shift started. I worked a double (Rp. 297.1.6) 43

ARGUMENT

But for some reason or another the Respondent feels the need to ad lib, make up, or state untruths. For example:

o Respondent states that I had authorization for medical treatment (R.p. 6) on 12/23/2016, but has not been able to provide one shred of proof; but for the Commission to write the Respondents a letter (R.p. 98) dated 09/14/2017 to let Respondents 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. 99)

o Respondent stated on March 07, 2019 on record that they had not received subpoenaed medical records, when in fact Respondents requested medical records (R.p. 102) from Palmetto Health Richland on 01/18/2017, and received them. They stated for billing purpose,

↳ Not for Workers Compensation. (R.p. 133; 167)

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 (R.p. 101)

lines 1-3, medical records if the Respondents had received them in 2017 and filed paperwork for my 2017 work injury claim (R.p. 133)

(R.p. 167) and then used them for this claim. After all medical record was filed by Respondents at S.C. W.C.C. on 02/25/2018

for BOTH injuries. (R.p. 133, R.p. 167) (R.p. 101, Line 2)

ARGUMENT

- Respondent listed the wrong date of 07/17/2017 in Eivery brief intentionally knowing that the same letter from Dr. Saunders, that I submitted as my A.P.A., has the date of 07/19/2019. (R.p. 97) (Number 19 in Full Panel Order) (R.p. 212-224)
- Respondent gave Commissioner James the Form 20 for work injury (R.p. 24, L. 13-24) of 01/31/2017. (R.p.) to be used for this claim. After a Form 20 was (R.p. 12-13) filed by Respondents in 2020 (R.p. 103) Tr.p. 104, L. 13-25, R.p. 105, L. 1-22) And even though at the hearing I stated that I wanted Commissioner James to decide (R.p. 25, Lines 12-22) Tr.p. 38, 24-25 (R.p. 118, L. 23-25) she did not mention the weekly (Tr.p. 5 lines 13-15) (R.p. 104, L. 13-14) compensation rate in the Order Instructions (R.p. 11) but Respondent did.
- Respondent provided medical record of my E.R. visit of 12/07/2017 as their A.P.A., and went on to mention 2-3 sheets from said medical record of X-Ray of my Thoracic, Cervical (upper, lower) back, but chose (R.p. 187) to submit form that shows evaluation of 12/23/2016 that showed reason (R.p. 185) why the doctors where Respondent alleges I had authorization for. medical treatment, I instructed me to contact my doctor IMMEDIATELY. (R.p. 79) 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 (R.p. 150-160) Car accident is the cause, 10 weeks and 2 days after my work (R.p. 104-110) injury, and if you were to review every document that Respondent has submitted you will not find ONCE where they mentions the Physician Discharge Summary. Even though it was my A.P.A. (R.p. 37, L. 21-25) 1/5

ARGUMENT

- R.P. 37. Lines 1-8.

And I read it at the hearing on June 12, 2020. (R.p. 38 L. 1-3)

Respondent stated that S.C. Code Ann 42-15-60(A) was applied which is untrue. If 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, (R.p. 79, R.p. 143) since the prescription was filled on 12/23/2016. If 42-15-60(A) had been applied and still have not been reimbursed) 42-19-10 (R.p. 5)

Respondent feels the need to put whatever they like in their brief 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" (R.p. 81) 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 (R.p. 82) medicated on Leave without pay due to back pain to write my statement. After all the form is given by supervisor) is not listed in my Statement.

Respondent states I have provided NO EVIDENCE which would allow for any of the exceptions to rule, S.C. Code 42-15-60(2012) (R.p. 79) 46

ARGUMENT

- R.P. 97, R.P. 99, R.P. 161)

• Respondent number 13, States I filed a form 50 on 09/07/2017, and on that form 50 my then attorney (R.P. 213, L. 10-11) (R.P. 137) stated my home address on BOTH of the form 50(s) that he filed.

• Respondent number 14 in the Order States I filed a form 50 in 02/26/2019. R.P. 213, L. 15)

But what I do know is that on 02/22/2019, I had a R.P. 101. Lines 1-3) and on 03/07/2019, I had a hearing for my work injury of 01/31/2017.

And after both, Respondents filed a form 51 (R.P. 104) dated 04/02/2019, their first 51 for this (start of 1623305) claim. I filed my 2 Form 50 in 02/2018. (R.P. 134-137)

• Respondents yet again added their opinion "I would find that Claimants request for treatment of (R.P. 11) back is denied" The Respondent have continued to (R.P. 104-110) state they provided medical treatment, but due to there (R.P. 104-110) being no authorization numbers listed on one document or a claim number or the words Workers Compensation is the reason why Respondents asked Palmetto Health Richland for my medical records (R.P. 102) for billing purpose in 2017. If it was a Workers Compensation claim they pay for copies and they receive records. But instead (R.P. 101, Lines 1-3)

• Respondents filed a form 19 (Status Report and Compensation Receipt) (R.P. 18) on February 22, 2018 for this claim

and I know I NEVER received any compensation. (R.P. 87-93) - 47

- 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, and (R.P. 18,) the actual hearing was on 06/12/2020 for W.C.C. 1623303.

ARGUMENT

Should NOT be a Form 19 filed with S.C.W.C.C. in 2018? Or should it? (R.p. 18)

- Respondent number 3 in the Order states a lot of nothing that pertains to me. Due to Respondents NEVER sent me to Palmetto Richland on 12/23/2016.

And they NEVER gave AUTHORIZATION before or after my ER visit on 12/23/2016 even though it was (R.p. 79) recommended and I requested medical treatment.

And the Respondents themselves has stated this FACT in their Forms 51, 586 (R.p. 104-110 Lines 6, 11)

- Respondent makes mention of the Form 30. And have (R.p. 228) stated that I filed a document that was construed (R.p. 225-227) as a motion for additional evidence, regarding a (R.p. 16)

In the R.p. 355th
Order of
2-22-21, 11-3-20.

document titled "Employee/Supervisor Notification" (R.p. 65, L. 1-25) dated 02/03/2017. Which was granted by the Full (panel) Commission. But what Respondents forgot to mention was I had filed a motion 2-3 times to have said form (R.p. 65, L. 7-11) 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. 65, L. 1-25)

- Respondents 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-

ARGUMENT

Standard of medical evidence by statute" Since the Respondents never authorized medical treatment as (R.p. 79) recommended by the ER doctors on 12/28/2014 (R.p. 104-110 Lines 6,10) there was no way for me to have been able to get expert medical evidence. And no way receive medical treatment for a period not to exceed 10 weeks. pursuant to S.C. Code § 42-15-60(A) (R.p. 9. Line 10)

ARGUMENT

- For the record Again I have never received Compensation.
- In the Order Under Summary of the Evidence, the Respondent ~~untruthfulness~~ stating "Claimant also produced an unnumbered stack of documents which had not been presented prior to the hearing." (R.p. 181-204) For the Record my APAs are stamped March 13, 2020. Hearing was for 04/01/2020. (R.p. 85, R.p. 38. Lines 16-25, R.p. 39. Lines 1-25, R.p. 40. Lines 1-23, R.p. 41. Lines 1-25)
 - Respondent continues to reference the letter provided by Dr. Saunders in regard to my 2016 and 2017 work injury. When the letter is dated 07/17/2019. (Number 4 in the Order) (R.p. 97)
 - 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." (R.p. 79) - When I was released from Palmetto Health Richland on 12/23/2016, I was in no pain after receiving a shot of (R.p. 162-163) Torodal (Narcotic) but the following day I was in great pain. I called my Supervisor for that reason, and the fact that the physician (R.p. 79) Discharge Summary stated for me to Contact My doctor Immediately, for more Medical Treatment. (R.p. 79) Respondents would not

- Give authorization for Recommended treatments. (R.p. 104-110)
- 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 (R.p 129) by the Respondents, starting in October 1988. And I have never filed a Claim (R.p. 53. lines 11-23) while employed with Respondents. If I had Respondents would have submitted those documents as their APA's Exhibits. (R.p. 85, R.p. 3)

Conclusion

On 12/23/2016, I went to E.R. at Palmetto Health Richland. I arrived at 2:53 AM. (R.p. 79) I did not have an Authorization Code to give, I gave answers to the nurse to fill-out the (R.p. 161) Workers Compensation Information Sheet. I was taken to the exam room. The attending physician (and Resident) was Dr. Hardy. Who asked me questions only. I never received any X-Rays of my back, neck or jaw. I received a shot of Toradol. Given a Discharge Summary and was sent home with 2 prescriptions (Cyclobenzaprine 5mg, and Naproxen 375 mg) R.p. 143-144) And a medical excuse as well, (R.p. 80) I was out of work from 12/23/2016 thru 12/24/2016. I return to work on 12/25/2016 in pain. I could not afford to be out of work due to I had not accrued any time. My employment date began (R.p. 128-129) 12/02/2016.

On 12/25/2016, I returned to work at C.M. Tucker Center, located at 2200 Harden St. I put medical excuse and discharge Summary in Mrs. Lorraine Tracy locked box on her office door. Every chance I had I begged her to contact someone so I could go to the doctor for my back. She never did. On 01/13/2017, I had to report to her office while I am home medicated and on Leave without pay (R.p. 82) to write my statement. (R.p. 81)

Five days after I wrote my statement I received a letter from the Respondents (R.p. 83) telling me I am eligible to receive Workers Compensation benefits for that injury as provided by the S.C. W.C. Law. Respondents never contacted me the night (12/22/16) of my injury or after being discharged from E.R. on 12/23/2016.

I requested medical treatment, I showed discharge Summary to Mrs. Tracy again and Respondents did not contact me. I NEVER received the recommended medical treatment (R.p. 79)

Conclusion

- Medical treatment on 12/23/2016.

How is it possible that I received medical treatment for my injuries if I never received and X-Ray on 12/23/2016. (R.p. 185) states evaluated

(R.p. 162) Shows the type of medicine I had received, (Toradol)

(R.p. 185) list 2 different views of what my injury from 12/22/2016 could have been

"Consider differential diagnosis including Muscle strain Versus Contusion Versus Fracture"

Given a Physician Discharge Summary that instructed me to contact my doctor immediately, which was recommendation for further medical treatment

dated 12/23/2016. (R.p. 79)

Went to CVS pharmacy to have prescriptions filled on 12/23/2016, and I had to pay out of pocket (R.p. 143-144)

Respondents claim I had authorization for medical treatment on 12/23/2016, but did not file a First Report of injury until 9 months

AFTER my work related injury (R.p. 99) and

AFTER the fact that the Commission sent

respondents a letter telling them they had

not filed the First Report of injury (R.p. 98)

If respondents had known about my work

related injury the authorization from

respondents would have been given on the

22 of December 2016 along with the First

Report of injury (R.p. 296-299) like I had

received the SAME morning of injury as 2017. 54

Conclusion

Not the form (R.p. 99) that does not give any indication to how injury occurred like on the Forms for 01/31/2017 Work Injury. (R.p. 296-299)

I have been requesting medical treatment since I was injured. 42-15-60(A) has not been given to me since I got injured, on December 22, 2016. Respondents states that pursuant to S.C. Code Ann § 42-15-60(A): The employer shall provide medical, surgical, hospital and other treatment, including medical supplies as reasonably may be required for a period not exceeding ten weeks from date of an injury (R.p. 9)

But on Respondents form(s) R.p. 104-110, R.p. 234-247 states: "Claimant was released from care on 12/23/2016. Claimant has not received authorized medical treatment since that date"

So IF the Respondents had sent me to Palmetto Health Richland, and the physicians recommended further medical treatment on 12/23/2016 (R.p. 79) by Respondent own words (R.p. 104-110, R.p. 234-247) 12/23/16 is the only time they allegedly authorized treatment. And on 12/23/2016 was REVOKED after my discharge.

Respondents states that I have allowed my treatment to lapse beyond the statutory period without providing sufficient medical evidence (R.p. 10. Lines 7-10) So on 12/23/2016 when the doctor verbally stated the same words as the Discharge Summary (R.p. 79 55

Conclusion

Of Recommendation of further Medical treatment should
have been followed to the letter of the law, 42-15-60(A)