

BEFORE THE IOWA WORKERS' COMPENSATION COMMISSIONER

SHAUN BRUNT,

Claimant,

vs.

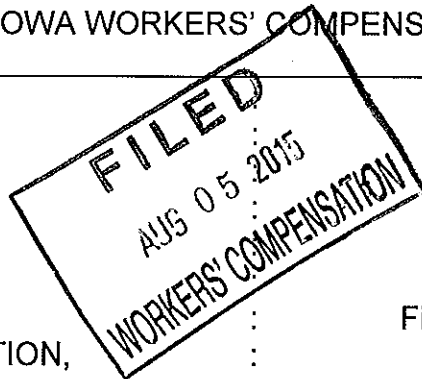
VERMEER CORPORATION,

Employer,

and

EMC RISK SERVICES,

Insurance Carrier,
Defendants.



File Nos. 5047496, 5047497

ARBITRATION

DECISION

: Head Note Nos.: 1106, 1402.30, 1402.40,
: 1802, 1803, 2501, 2502, 2907
:
:

STATEMENT OF THE CASE

Shaun Brunt, claimant, filed two petitions in arbitration seeking workers' compensation benefits from Vermeer Corporation, as his employer, and EMC Risk Services, as the insurance carrier. These cases proceeded to a consolidated arbitration hearing on May 12, 2015. Claimant testified on his own behalf and called his wife, Crystal Brunt, to testify. Defendants did not call any live witnesses to testify.

Claimant offered exhibits 1 through 11. Defendants objected to claimant's exhibit 8. Exhibit 8, pages 1 and 2, is a May 5, 2015 report provided by Brian Wolf, M.D. to claimant's attorney. Defendants' objection was overruled. However, defendants were granted an additional 30 days after the conclusion of the live evidentiary hearing to submit a rebuttal report. All of claimant's offered exhibits were received into the evidentiary record.

Defendants offered exhibits A through F at the time of hearing. All of defendants' exhibits were received into the evidentiary record at the time of hearing. Following the hearing, defense counsel also forwarded correspondence formally offering a rebuttal report signed by Dr. Wolf on May 27, 2015. The rebuttal report was offered as Exhibit A, page 4-A. Defendants' Exhibit A, page 4-A is now formally received into the evidentiary record and the record is closed. This case was considered formally submitted to the undersigned on June 11, 2015, upon the expiration of the 30-day period defendants were allotted to file any rebuttal evidence.

The parties also submitted a hearing report, which contains stipulations. The parties' stipulations are accepted and relied upon in entering this decision. No findings or conclusions will be entered with respect to the parties' stipulations, and the parties are bound by those agreements.

ISSUES

The parties submitted the following disputed issues for resolution:

1. Whether claimant sustained an injury arising out of and in the course of his employment on either or both alleged dates of injury, including an idiopathic defense allegation.
2. Whether the alleged injuries caused a temporary disability during a period of recovery.
3. Whether the alleged injuries caused a permanent disability.
4. Whether claimant is entitled to reimbursement or payment of past medical expenses.
5. Whether claimant is entitled to reimbursement for an independent medical evaluation pursuant to Iowa Code section 85.39.
6. Whether costs should be assessed against either party.

FINDINGS OF FACT

The undersigned, having considered all of the evidence and testimony in the record, finds:

Shaun Brunt is a 36-year-old man who alleges work injuries to his left shoulder on March 19, 2014 and again on April 25, 2014. Mr. Brunt worked as a welder for Vermeer Corporation from February 2012 through May 2014. (Claimant's testimony; Exhibit 6, page 3 (deposition transcript, p. 12); Ex. 11, p. 1) Mr. Brunt was terminated on May 8, 2014 because he failed to disclose a prior left shoulder injury on his job application, which came to light after his alleged work injuries. (Ex. 6, p. 11 (depo., tr., p. 42))

Mr. Brunt was a certified welder at Vermeer. He enjoyed his job and it was the highest paying employment he has ever held. (Claimant's testimony) On March 19, 2014, claimant alleges that he was welding some swing arms within the scope of his employment at Vermeer. He testified that he reached above his head with his left arm to hook something and felt a "pop" in his left shoulder. Mr. Brunt testified that he experienced immediate numbness and tingling up and down his left arm, hand, and shoulder. (Claimant's testimony)

Mr. Brunt reported his alleged injury to his supervisor and went to the on-site health services. A nurse as well as a physician, Matthew Doty, M.D., evaluated claimant on March 19, 2014. (Ex. 2, p. 1; Ex. 2, p. 5) Claimant testified that he told Dr. Doty about the prior bike accident, his belief that he had experienced a partial dislocated clavicle as a result of the bike accident, as well as his pre-existing numbness and tingling in his left arm and hand. Dr. Doty's medical note of March 19, 2014 indicates:

Shaun states that for the last 10 or 15 years, he has had numbness to his left thumb, index and long finger that he dates back to a left shoulder injury. He states that he was in Des Moines and went over the handlebars of his mountain bike. He landed on his left shoulder. He was evaluated at the Broadlawns emergency room and he states he was given a diagnosis of partially dislocated left clavicle. He said he was given hydrocodone and he never followed up with a physician. He states since that time he has had numbness to his thumb, index and long finger, a popping sensation in his left shoulder, and chronic pain in his left shoulder. He said his shoulder has always felt loose and unstable ever since that accident.

(Ex. 2, p. 1)

Dr. Doty referred claimant to the Pella Regional Hospital for x-rays of his left shoulder. (Ex. 2, p. 2) Dr. Doty told claimant to remain off work for 1-2 days and then to follow up with his personal physician. (Claimant's testimony) Claimant selected Peter Hoftiezer, M.D., in Oskaloosa as his personal physician for followup.

Dr. Hoftiezer evaluated claimant on March 25, 2014, ordered a left shoulder MRI, and referred him to an orthopaedic surgeon, Sreedhar Somisetty, M.D. Dr. Somisetty evaluated claimant on April 2, 2014 and diagnosed claimant with left shoulder rotator cuff tendinitis, impingement syndrome, and degenerative arthritis of the left shoulder. (Ex. 3, p. 6) Dr. Somisetty recommended physical therapy.

While visiting in-laws in the Iowa City area, claimant experienced a deep pain as well as a pins and needles sensation in his left arm and hand. He sought emergent care through the University of Iowa Hospitals and Clinics on April 10, 2014.

Mr. Brunt returned to light duty work at Vermeer in April 2014. However, he alleges he sustained another injury or aggravation as a result of work duties on April 25, 2014. Specifically, Mr. Brunt alleges that he hit his shoulder on the frame of a part while washing parts for painters. He testified that he experienced immediate pain after hitting his left shoulder. Claimant could not recall whether he reported the alleged April 25, 2014 injury to the employer, but he left work and went home as a result of that incident. (Claimant's testimony)

Following the April 25, 2014 incident, Mr. Brunt filed a formal workers' compensation claim with Vermeer. Vermeer investigated the claim, ultimately denied

liability for the claims, and terminated claimant's employment for the inaccuracies claimant provided on his employment application and during his pre-employment physical pertaining to pre-existing left shoulder injuries and symptoms.

Mr. Brunt continued to seek medical treatment for his left shoulder after being terminated. Ultimately, he sought care with an orthopaedic surgeon, Dr. Wolf, at the University of Iowa Hospitals and Clinics. Dr. Wolf performed two surgeries on claimant's left shoulder. Dr. Wolf performed the initial surgery on August 11, 2014 and described it as a left shoulder arthroscopy with a distal clavicle resection and subacromial decompression. (Ex. 5, p. 14; Ex. 5, pp. 18-19) I did not identify an operative note for the second surgery, but Dr. Wolf's note dated January 7, 2015 indicates that he recommended a scapulothoracic arthroscopy with bursectomy. (Ex. 5, p. 38) Dr. Wolf has not yet discharged claimant from his care or declared Mr. Brunt to have achieved maximum medical improvement.

During his trial testimony, Mr. Brunt denied ongoing left shoulder pain prior to March 19, 2014. However, he provided incredible testimony in this regard. He denied that he told Vermeer he had prior problems for years when reporting the March 2014 injury date. Yet, the employer's incident report contains this information and was signed by claimant. (Ex. 2, p. 3) Mr. Brunt had no explanation why he would sign this document with this information if it was not true. (Claimant's testimony)

Mr. Brunt also told the employer that he believed his symptoms after the March 19, 2014 incident were "related to a personal injury several years ago that didn't heal properly." (Ex. 2, p. 4) Mr. Brunt admits that he may have told the employer this when reporting the March 19, 2014 incident.

The March 19, 2014 Vermeer Occupational Health Services note records that claimant reported daily popping and grinding with discomfort in his left shoulder prior to the March 19, 2014 incident. Claimant proclaims that he did not tell the Vermeer nurse this, but also acknowledges that she would have had no way of knowing this information unless claimant told her. The report of daily popping and grinding with discomfort directly contradicts claimant's testimony that he had no pain in shoulder prior to the March 2014 incident. I find the contemporaneous medical note to be credible and convincing. The Vermeer nurse would not have this information available without claimant having made this comment.

Similarly, in his March 19, 2014 note, Dr. Doty noted that claimant had chronic pain for the past 15 years with numbness and tingling in three fingers, all dating back to a bike accident. Dr. Doty recorded a history from claimant of popping in the left shoulder and chronic pain as a result of the bike accident. Dr. Doty similarly noted that claimant reported his left shoulder was always unstable since the bike accident. (Ex. A, p. 6)

Mr. Brunt denies telling Dr. Doty all of the information recorded in Exhibit A, page 6. Yet, Mr. Brunt admits that he was never evaluated or treated by Dr. Doty prior to

March 2014 for left shoulder complaints. (Claimant's testimony) Dr. Doty would not have access to or otherwise know the information contained in Exhibit A, page 6 unless he received that information from Mr. Brunt. I find Exhibit A, page 6 to be convincing and credible. It directly contradicts Mr. Brunt's testimony and damages Mr. Brunt's credibility.

Defense counsel also confronted claimant with Dr. Doty's March 24, 2014 office note. (Ex. 2, p. 6) In that office note, Dr. Doty records, "In talking with him, Shaun expressed to me that he does not feel that the symptoms he is having are related to his work. He said that really he had not done anything other than reach up above his head and since he has had long term symptoms of numbness in his hand and some shoulder pain, he feels that the symptoms he is having are related to his previous injury." (Ex. 2, p. 6) Having been confronted with this medical note, claimant denied making a statement about pre-existing shoulder pain to Dr. Doty. Mr. Brunt once again specifically testified that he did not have shoulder pain before the date of injury. Yet, Mr. Brunt admits that Dr. Doty would not have had any of the information contained in his March 24, 2014 office note unless it was relayed to him by claimant. (Claimant's testimony)

Once again, I find Dr. Doty's contemporaneous medical note to be accurate, credible and convincing. Mr. Brunt's denial of having made statements to Dr. Doty contained in that office note and his denial of any pre-existing left shoulder pain are not credible or convincing.

During cross-examination, claimant conceded that he knew he needed to tell doctors the truth about his medical conditions. Having denied any pre-existing left shoulder pain more than once at trial, claimant was then confronted with an October 19, 2006 medical note from the University of Iowa Hospitals and Clinics (UIHC). (Ex. A, p. 1)

The 2006 medical record from UIHC notes, "He has had trouble with his left shoulder for some time now. It is painful." (Ex. A, p.1) Mr. Brunt acknowledged this treatment, but testified that he may or may not have told UIHC that he had left shoulder pain. When asked to explain his prior testimony that he did not have ongoing left shoulder pain after the bike accident and prior to the alleged March 2014 injury date, claimant became agitated by the cross-examination and his responses were delayed and sarcastic in tone. Claimant ultimately testified, "I don't know which story you should believe." (Claimant's testimony)

In a March 25, 2014 note authored by the family physician selected by claimant, Dr. Hoftiezer, claimant was recorded as having reported that his current symptoms felt the same as when he had wrecked his bike. Claimant acknowledged that he had never been examined or treated by Dr. Hoftiezer prior to March 25, 2014. Therefore, all information recorded by the physician was information received directly from Mr. Brunt.

In an office note dated April 28, 2014 (Ex. 2, p. 7), claimant was recorded as having reported that his symptoms were back to baseline. In that office note, claimant was recorded as having reported pain symptoms of five out of ten on a pain scale, which he considered to be similar to the pain he experienced before the alleged March 2014 date of injury. Mr. Brunt admits that he told Dr. Doty this information on April 28, 2014. Yet, he offered no explanation for his contradictory prior repeated testimony that he had no shoulder pain prior to the March 2014 incident. In fact, claimant specifically denied that the medical records prepared contemporaneous with his medical treatment would be more accurate than his memory at the present time.

Defendants also challenge claimant's veracity by pointing out his criminal history. Mr. Brunt is a convicted felon, having been convicted of burglary and forgery. Defendants also obtained concessions from claimant that he filed several job applications after his left shoulder surgeries with employers for positions he knew he could not physically perform for the sole purpose of obtaining unemployment benefits. (Claimant's testimony) Mr. Brunt admits that he certified he was ready, willing and able to work and drew unemployment benefits during a period of time after surgery when he was not medically released to return to work by his surgeon. Mr. Brunt also admitted that he now requests award of workers' compensation benefits for temporary disability benefits during that same period of time off work.

Claimant also called his wife, Crystal Brunt, to testify. Mrs. Brunt testified that claimant never complained that he was unable to physically do things before the March 2014 date of injury as a result of his left shoulder. Mrs. Brunt testified that she and her husband had a close relationship. However, she admitted that claimant did not tell her about his injury in March 2014 until several days after the alleged incident. Similarly, claimant did not tell his wife about his initial medical treatment on the alleged date of injury. Mrs. Brunt's testimony was not particularly helpful and was not sufficient to rehabilitate claimant's credibility issues.

I find that claimant's testimony is not credible regarding his left shoulder condition and symptoms prior to March 2014. I find that claimant had ongoing left shoulder symptoms, including pain, as noted in contemporaneous medical records.

Having found Mr. Brunt's testimony about his pre-existing condition to be incredible, I find that his testimony is not worthy of reliance as to the cause of his March or April 2014 alleged injuries. Instead, I turn to the medical opinions pertaining to causation to determine this issue.

Claimant's independent medical evaluator, Farid Manshadi, M.D., opines:

I believe Mr. Shaun Brunt suffered injuries into his left shoulder arising out of and in the course of his employment, first on March 19, 2014 and then on April 25, 2014 while working for Vermeer as a welder. Further, I also believe Mr. Brunt materially aggravated his underlying AC joint arthritis initially on March 19, 2014 and then on April 25, 2014. Dr. Wolf's

diagnosis of degenerative arthritis at the acromioclavicular joint is certainly pre-existing.

However, I also believe that the work injuries of March 19 and April 25, 2014 caused significant aggravation of the left shoulder to the point of requiring care for his left shoulder, which is well documented in the records. I don't find any records to indicate that Mr. Brunt had been seeking care for his left shoulder prior to his employment or while being employed prior to his work injuries of March 19 and April 25, 2014. Further, under the operative report, it is documented that there were two small osseous loose bodies superior to the AC joint as well as significant synovitis around the distal clavicle and around these two small loose bodies. To me, that indicates that this is probably a new injury.

(Ex. 1, pp. 7-8)

By contrast, Dr. Doty opined, "I concur with Shaun that I do not feel the symptoms he is experiencing could have occurred from simply reaching above his head and feel that his symptoms are related to a preexisting condition/injury." (Ex. 2, p. 6)

Claimant's treating surgeon, Dr. Wolf, offered four medical reports pertaining to causation. In his first report, dated December 16, 2014, Dr. Wolf noted, "it is apparent that Mr. Brunt has stated on prior outside visits that his shoulder pain was related to prior injury dating back to years ago and not related to his injuries in his left shoulder in March and April 2014." (Ex. A, p. 3) Dr. Wolf explained:

Mr. Brunt has two clinical problems relative to his shoulder. He has degenerative arthritis at his acromioclavicular joint. This has been treated with an arthroscopy and distal clavicle resection. He also continues to have significant scapulothoracic crepitus or "snapping scapula." This has not responded to physical therapy. He is still undergoing treatment for this condition including an injection into the area. The scapulothoracic crepitus is also usually a degenerative condition that occurs while compensating for shoulder pathology. I would theorize that he has been dealing with chronic arthritic change in his left acromioclavicular joint for some time and has subsequently developed a snapping scapula due to altered mechanics in his shoulder.

(Ex. A, p. 3) In a report dated January 15, 2015, Dr. Wolf clarified his opinions, stating, "I believe these conditions are related to the injury which predates the workers' compensation claim." (Ex. A, p. 4)

In correspondence in which the physician simply checked off his responses, Dr. Wolf indicated that claimant's underlying chronic condition may have been aggravated or lighted up by his reported work injuries in March and April 2014. (Ex. 8, p. 1) This report was admitted over defendants' objection. Therefore, defendants were

permitted to obtain and introduce Exhibit A, page 4-A, which is a supplemental report from Dr. Wolf.

In Exhibit A, page 4-A, Dr. Wolf opines that his response to claimant's counsel in Exhibit 8, page 1 was not intended to change or modify his prior causation opinions as outlined in his December 16, 2014 and January 15, 2015 reports. Dr. Wolf also addressed the opinions offered by Dr. Manshadi about the loose bodies in claimant's left shoulder as identified during surgery. Dr. Wolf indicated that these loose bodies were likely associated with claimant's chronic underlying condition, rather than evidence of a new, acute injury. (Ex. A, p. 4-A)

Weighing the competing medical opinions, I ultimately accept the causation opinions of Dr. Wolf and Dr. Doty. Dr. Wolf had the opportunity to evaluate claimant numerous times and performed surgery on claimant's shoulder. Dr. Wolf is the vice-chairman of the University of Iowa Hospitals and Clinics' Department of Orthopaedics and Rehab. He is obviously highly qualified and experienced. Dr. Wolf is the most qualified physician to offer an opinion as to the cause of the loose bodies in claimant's left shoulder, and I find his opinions to be reasonable, credible, and convincing.

Dr. Doty bases his opinions upon the history provided by claimant. Claimant denies providing much of the history recorded by Dr. Doty. However, I found the contemporaneous medical records generated by Dr. Doty to be convincing and accurate and the testimony offered by claimant to be incredible.

Dr. Manshadi was a one-time evaluator. He provides no analysis of the pre-existing symptoms or medical records documenting chronic, ongoing pain in claimant's left shoulder before the alleged dates of injury. Dr. Manshadi's opinions as to the loose bodies in claimant's left shoulder are specifically contradicted by the treating surgeon. Dr. Manshadi also records, "Mr. Brunt subjectively reports that he really didn't have any problems with pain when lifting, etc. with the left shoulder." (Ex. 1, p. 6) Having found Mr. Brunt's testimony in this regard to be incredible, I find Dr. Manshadi's reliance upon these subjective reports to be unreasonable and damaging to the credibility of his medical opinions in this case.

When considering each of the competing medical opinions, coupled with my disbelief of claimant's testimony pertaining to the mechanisms of injury and pre-existing symptoms, I find that Mr. Brunt has not proven by a preponderance of the evidence that he sustained work injuries to his left shoulder on March 19, 2014 and/or April 25, 2014. Similarly, I find that Mr. Brunt has not proven that these alleged incidents caused either temporary or permanent disability. Rather, I find that Mr. Brunt had significant pre-existing degenerative conditions in his left shoulder related to a prior bike accident and that his current symptom and condition are related to and directly caused by the prior bike accident.

CONCLUSIONS OF LAW AND REASONING

The claimant has the burden of proving by a preponderance of the evidence that the alleged injury actually occurred and that it both arose out of and in the course of the employment. Quaker Oats Co. v. Ciha, 552 N.W.2d 143 (Iowa 1996); Miedema v. Dial Corp., 551 N.W.2d 309 (Iowa 1996). The words "arising out of" referred to the cause or source of the injury. The words "in the course of" refer to the time, place, and circumstances of the injury. 2800 Corp. v. Fernandez, 528 N.W.2d 124 (Iowa 1995). An injury arises out of the employment when a causal relationship exists between the injury and the employment. Miedema, 551 N.W.2d 309. The injury must be a rational consequence of a hazard connected with the employment and not merely incidental to the employment. Koehler Electric v. Wills, 608 N.W.2d 1 (Iowa 2000); Miedema, 551 N.W.2d 309. An injury occurs "in the course of" employment when it happens within a period of employment at a place where the employee reasonably may be when performing employment duties and while the employee is fulfilling those duties or doing an activity incidental to them. Ciha, 552 N.W.2d 143.

The claimant has the burden of proving by a preponderance of the evidence that the injury is a proximate cause of the disability on which the claim is based. A cause is proximate if it is a substantial factor in bringing about the result; it need not be the only cause. A preponderance of the evidence exists when the causal connection is probable rather than merely possible. George A. Hormel & Co. v. Jordan, 569 N.W.2d 148 (Iowa 1997); Frye v. Smith-Doyle Contractors, 569 N.W.2d 154 (Iowa App. 1997); Sanchez v. Blue Bird Midwest, 554 N.W.2d 283 (Iowa App. 1996).

The question of causal connection is essentially within the domain of expert testimony. The expert medical evidence must be considered with all other evidence introduced bearing on the causal connection between the injury and the disability. Supportive lay testimony may be used to buttress the expert testimony and, therefore, is also relevant and material to the causation question. The weight to be given to an expert opinion is determined by the finder of fact and may be affected by the accuracy of the facts the expert relied upon as well as other surrounding circumstances. The expert opinion may be accepted or rejected, in whole or in part. St. Luke's Hosp. v. Gray, 604 N.W.2d 646 (Iowa 2000); IBP, Inc. v. Harpole, 621 N.W.2d 410 (Iowa 2001); Dunlavey v. Economy Fire and Cas. Co., 526 N.W.2d 845 (Iowa 1995). Miller v. Lauridsen Foods, Inc., 525 N.W.2d 417 (Iowa 1994). Unrebutted expert medical testimony cannot be summarily rejected. Poula v. Siouxland Wall & Ceiling, Inc., 516 N.W.2d 910 (Iowa App. 1994).

A personal injury contemplated by the workers' compensation law means an injury, the impairment of health or a disease resulting from an injury which comes about, not through the natural building up and tearing down of the human body, but because of trauma. The injury must be something that acts extraneously to the natural processes of nature and thereby impairs the health, interrupts or otherwise destroys or damages a part or all of the body. Although many injuries have a traumatic onset, there is no

requirement for a special incident or an unusual occurrence. Injuries which result from cumulative trauma are compensable. Increased disability from a prior injury, even if brought about by further work, does not constitute a new injury, however. St. Luke's Hosp. v. Gray, 604 N.W.2d 646 (Iowa 2000); Ellingson v. Fleetguard, Inc., 599 N.W.2d 440 (Iowa 1999); Dunlavey v. Economy Fire and Cas. Co., 526 N.W.2d 845 (Iowa 1995); McKeever Custom Cabinets v. Smith, 379 N.W.2d 368 (Iowa 1985). An occupational disease covered by chapter 85A is specifically excluded from the definition of personal injury. Iowa Code section 85.61(4) (b); Iowa Code section 85A.8; Iowa Code section 85A.14.

Having found that Mr. Brunt failed to carry his burden of proof to establish a work injury occurred on March 19, 2014 and/or April 25, 2014, I conclude that Mr. Brunt is not entitled to either weekly benefits or medical benefits in this claim. Having found that Mr. Brunt failed to prove by a preponderance of the evidence that either of the alleged events, or injuries, caused either temporary or permanent disability, I similarly find that claimant failed to establish entitlement to any weekly or medical benefits in this claim.

Section 85.39 permits an employee to be reimbursed for subsequent examination by a physician of the employee's choice where an employer-retained physician has previously evaluated "permanent disability" and the employee believes that the initial evaluation is too low. The section also permits reimbursement for reasonably necessary transportation expenses incurred and for any wage loss occasioned by the employee attending the subsequent examination.

Defendants are responsible only for reasonable fees associated with claimant's independent medical examination. Claimant has the burden of proving the reasonableness of the expenses incurred for the examination. See Schintgen v. Economy Fire & Casualty Co., File No. 855298 (App. April 26, 1991). Claimant need not ultimately prove the injury arose out of and in the course of employment to qualify for reimbursement under section 85.39. See Dodd v. Fleetguard, Inc., 759 N.W.2d 133, 140 (Iowa App. 2008).

Claimant obtained an independent medical evaluation performed by Dr. Manshadi on March 20, 2015. In an office note dated April 28, 2014, Dr. Doty indicated that claimant had achieved maximum medical improvement and was released without any permanent disability from the alleged April 24, 2014 injury. (Ex. 2, p. 7) This permanent impairment opinion would have qualified claimant for an independent medical evaluation to assess permanent impairment. Iowa Code section 85.39. However, Dr. Manshadi renders no opinions pertaining to permanent impairment in his independent medical evaluation report. (Ex. 1) Therefore, Dr. Manshadi's evaluation was not for purposes of evaluating permanent impairment or permanent disability, as required and permitted by Iowa Code section 85.39. I conclude that claimant failed to establish entitlement to reimbursement of his independent medical evaluation fee pursuant to Iowa Code section 85.39.

Claimant seeks assessment of costs. Assessment of costs is a discretionary function of the agency. Iowa Code section 86.40. Mr. Brunt has not carried his burden of proof to establish a compensable work injury. Therefore, I exercise the agency's discretion and conclude that claimant's request for assessment of costs should be denied.

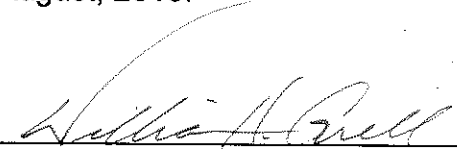
ORDER

THEREFORE, IT IS ORDERED:

Claimant shall take nothing.

The parties shall bear their own costs.

Signed and filed this 5th day of August, 2015.


WILLIAM H. GRELL
DEPUTY WORKERS'
COMPENSATION COMMISSIONER

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WHG/sam

Right to Appeal: This decision shall become final unless you or another interested party appeals within 20 days from the date above, pursuant to rule 876-4.27 (17A, 86) of the Iowa Administrative Code. The notice of appeal must be in writing and received by the commissioner's office within 20 days from the date of the decision. The appeal period will be extended to the next business day if the last day to appeal falls on a weekend or a legal holiday. The notice of appeal must be filed at the following address: Workers' Compensation Commissioner, Iowa Division of Workers' Compensation, 1000 E. Grand Avenue, Des Moines, Iowa 50319-0209.