BEFORE THE IOWA WORKERS' COMPENSATION COMMISSIONER

JEANNA PACHTINGER, Claimant, vs. FAMILY DOLLAR SERVICES, LLC, Employer, and SAFETY NATIONAL CASUALTY CORP., Insurance Carrier, Defendants.	File No. 20002580.01 A R B I T R A T I O N D E C I S I O N Head Note Nos. 1803, 1108, 4000.2

STATEMENT OF THE CASE

The claimant, Jeanna Pachtinger, filed a petition for arbitration and seeks workers' compensation benefits from Family Dollar Services, LLC, employer, and Safety National Casualty Corporation, insurance carrier. The claimant was represented by Randy Schueller. The defendants were represented by Dru Moses. Madison Lewis was also present for defendants.

The matter came on for video hearing on July 27, 2023, before deputy workers' compensation commissioner Joe Walsh in Des Moines, Iowa via Zoom. The record in the case consists of Joint Exhibits 1 through 6; Claimant's Exhibits 1 through 4; and Defense Exhibits A through F. The claimant testified at hearing. Lori Massanelli served as the court reporter. The matter was fully submitted on August 28, 2023.

ISSUES

The parties submitted the following issues for determination:

1. Nature and extent of permanent partial disability.

2. Penalty benefits.

STIPULATIONS

Through the hearing report, the parties stipulated to the following:

1. The parties had an employer-employee relationship.

2. Claimant sustained an injury which arose out of and in the course of employment on February 20, 2020.

3. Temporary disability/healing period and medical benefits are no longer in dispute.

4. The weekly rate of compensation is $385.52.

5. Medical expenses are not in dispute.

6. Affirmative defenses have been waived.

FINDINGS OF FACT

Claimant Jeanna Pachtinger was 38 years old as of the date of hearing. She resides in the small town of Monmouth, Iowa. She testified live and under oath at the Zoom hearing on July 27, 2023. I find her testimony to be highly credible. She was not a sophisticated witness; however, she was an excellent historian. Her answers were straightforward and consistent with other portions of the record. There was nothing about her demeanor which caused me any concern about her truthfulness.

Ms. Pachtinger earned her high school diploma from Cascade High School. This is the extent of her formal education. She testified she was an average student. Since high school, she has worked in manual labor and service sector type jobs, including working in kitchens, cleaning and warehouse work. She started working for Family Dollar in the warehouse on February 10, 2020. The job description is in evidence and includes some heavy to medium lifting. (Claimant's Exhibit 4) In essence, the job involved placing product on a conveyer belt to fill orders.

The parties stipulated that on February 20, 2020, Ms. Pachtinger sustained an injury which arose out of and in the course of her employment. She testified on that date she stumbled backward on some plastic while performing her normal job duties. She initially had pain in a number of her body parts, but her left foot and leg quickly became the primary focus. At hearing, her shoulder and rib conditions were reported to be resolved. The defendants accepted the claim and directed medical treatment.

Ms. Pachtinger was initially seen at Jackson County Emergency Room on the date of the accident. The foot pain was documented as "throbbing and constant in nature and worse with attempted ambulation and movement." (Joint Exhibit 1, page 1) X-rays were taken and she was provided an ortho shoe, crutches, and medications. She was instructed not to bear weight. (Jt. Ex. 1, p. 6)

The following day she followed up with Genesis Occupational Health. Swelling and bruising was documented, as well as the constant pain which was described as sharp and throbbing. (Jt. Ex. 2, pp. 1-4) Specific restrictions were set at this time, which essentially amounted to no weight bearing of any kind. (Jt. Ex. 2, p. 4) She was

instructed to use crutches and the fracture shoe when walking.

From February 28, 2020, through June 2020, Ms. Pachtinger returned to Genesis several times. Each time the same type of sharp, stabbing (or burning) pain was documented, made worse by pressure. She consistently reported swelling and bruising. (Jt. Ex. 2, pp. 7-34) Physical therapy and repeat x-rays were performed during this time as the medical providers attempted to ascertain a precise diagnosis. The working diagnosis at that time seems to be a sprain of the "tarsometatarsal ligament of the left foot." (Jt. Ex. 2, p. 17) She was instructed to wear a shoe with a rigid sole. She apparently returned to work with restrictions during this time period and complained the activities were worsening her symptoms. (Jt. Ex. 2, p. 31)

Ms. Pachtinger finally saw a specialist, Elizabeth Jacobsen, DPM, on June 19, 2020. Dr. Jacobsen reviewed the facts with Ms. Pachtinger and also reviewed and summarized her relevant treatment records. She also thoroughly examined both feet and legs. (Jt. Ex. 3, pp. 2-4) Dr. Jacobsen documented the following:

> I did have a conversation with the patient there is concern for development of Chronic Regional Pain Syndrome (CRPS) and how this is becoming a concern, as the patient's pain level is worsening over time and becoming somewhat out of proportion for the injury sustained. She is also now voicing concern over skin changes and temperature changes she has noted compared to the other leg.…

(Jt. Ex. 3, p. 5)

Ms. Pachtinger was placed in an immobilizer.

Dr. Jacobsen continued to treat Ms. Pachtinger through October 2020, utilizing a working diagnosis of CRPS (amongst other diagnoses). (Jt. Ex. 3, pp. 6-25) In September 2020, the following is documented:

> Today the patient states she has been walking more at work, up to 10 miles/shift, and has been going up/down steps and ladders. She has been working her restricted hours with frequent breaks. With the increased physical activity at work, patient states she has had an increase in swelling to her foot, and pain that is generalized across the top of her foot, the outside of her foot, and her instep (arch) area.

(Jt. Ex. 3, p. 20)

In the period from June through October 2020, Dr. Jacobsen attempted several treatment modalities including restrictions, the immobilizer, a brace, inserts, medications, pain injections and physical therapy.

On October 30, 2020, John Femino, M.D., evaluated Ms. Pachtinger. Dr. Femino reviewed records and performed a thorough examination. (Jt. Ex. 4, pp. 1-4) Dr. Femino

did not address the potential CRPS diagnosis and instead focused on the mechanics of the foot. "Ms. Pachtinger is most likely suffering from a cervical ligament rupture which is consistent with her known mechanism of injury." (Jt. Ex. 4, p. 5) He recommended advanced imaging studies and possibly surgery. (Jt. Ex. 4, pp. 5-6) He further recommended transferring care to him "of this relatively complex and rare injury." (Jt. Ex. 4, p. 7) On December 22, 2020, she underwent an ultrasound-guided injection and MRI of the left ankle. "She was indicated today for cervical ligament reconstruction and left ankle arthroscopy for debridement and release of superficial peroneal nerve." (Jt. Ex. 4, p. 11) She remained on light-duty and had the procedure on March 3, 3021. (Jt. Ex. 4, p. 21)

The surgery was not successful. On March 25, 2021, she returned to Dr. Femino who documented that Ms. Pachtinger was having difficulty controlling her pain. (Jt. Ex. 4, p. 27) He assigned work restrictions of seat work only and required her to elevate her foot for 15 minutes every two hours. (Jt. Ex. 4, p. 28) Dr. Femino rechecked her in September 2021. She described her symptoms in pretty much the same way she did prior to the surgery, including constant and throbbing pain in the same area. (Jt. Ex. 4, p. 29) Dr. Femino included the diagnosis of chronic left foot pain and "fibromyalgia" at this visit. He attempted further treatments including adjusting her ankle brace, physical therapy and a different type of injection. (Jt. Ex. 4, p. 31) Dr. Femino continued to treat Ms. Pachtinger thereafter, including adjusting medical restrictions and providing a handicap sticker. In March 2022, he recommended surgery to remove hardware in hopes this would relieve her symptoms. (Jt. Ex. 4, p. 43) This surgery was performed in April 2022. (Jt. Ex. 4, p. 46) This surgery was also not successful. She continued to report consistent symptoms thereafter and her chronic pain was not relieved. By August, Dr. Femino noted that she had been off work as the employer was unable to accommodate her restrictions. She was still in physical therapy at this time. Dr. Femino documented the following:

> We had a long discussion with Jeanna today regarding her foot and ankle. We discussed that her ankle is very stable on exam today. At this point, she just needs to progress strengthening to work towards full return to work and activities. Advised that we would like her to discontinue use of her Aircast ankle brace. She may use this on uneven ground if she would like but otherwise should discontinue its use. We also would like her to discontinue use of her crutch and begin ambulating without assistive devices. We would like her to continue attending physical therapy. Would like them to begin work conditioning. We would also like her to continue working on exercises at home.

(Jt. Ex. 4, p. 58)

Ms. Pachtinger followed this plan and attempted to return to work with the work restrictions provided. In September through October 2022, she began calling Dr. Femino's office, repeatedly reporting increased pain in her ankle with work. (Jt. Ex. 4, pp. 60-61) Dr. Femino's PA documented that he returned her call and noted: "She may have some neuralgia." (Jt. Ex. 4, p. 60)

At her attorney's request, Ms. Pachtinger was evaluated by Sunil Bansal, M.D., on November 14, 2022. (Cl. Ex. 2) Dr. Bansal took history from Ms. Pachtinger, reviewed (and summarized) appropriate medical records and thoroughly examined her. At that time, she reported the following symptoms:

> Ms. Patchinger continues to have pain in her left foot, and has significant difficulty with stairs and with walking on uneven ground. On a good day, the most she can stand or walk is about a half hour. She reports stiffness and extreme weakness of her left foot with difficulty remaining steady.
>
> Over the last month she has developed numbness and tingling below her left ankle. She also complains of a burning and numb sensation that radiates throughout her entire left foot and up her left leg. Occasionally her left foot turns purple, and the longer she is on it, the warmer it gets. She has significant hypersensitivity of her left foot, and even her shoes and socks bother her.

(Cl. Ex. 2, pp. 11-12)

Dr. Bansal diagnosed the following: Chronic left foot pain, left cervical ligament rupture, ankle impingement, and superior peroneal nerve entrapment, painful hardware in the left foot and Chronic Regional Pain Syndrome (CRPS). (Cl. Ex. 2, p. 13) He opined she should be placed at maximum medical improvement as of the date of her next appointment with Dr. Femino (December 2, 2022). (Cl. Ex. 2, p. 13) He assigned a 10 percent whole person rating for CRPS using Table 13-15. He recommended permanent restrictions including no standing or walking more than 30 minutes at a time, avoid uneven ground/incline and avoid stairs and climbing. (Cl. Ex. 2, p. 15)

Ms. Pachtinger followed up with Brandon Marshall, M.D., a physician-resident affiliated with Dr. Femino, on December 2, 2022. Dr. Marshall provided the following opinion:

> In the interim she reports that she has had progression of her pain to include constant burning/tingling/numbness in the sural nerve distribution over the lateral aspect of her left foot. The pain radiates over the top of her foot into the tops of her toes. It also radiates proximally from the heel up along the area of the sural nerve. She states that with increased activity and weight she has increased pain and has had no relief with her gabapentin that she has restarted. She also notes some color change and swelling.

(Jt. Ex. 4, p. 64)

Dr. Marshall listed neuralgia and neuritis as part of her diagnosis. While he did not directly define the term neuritis, I understand this to mean inflammation of a peripheral nerve. He confirmed the following restrictions.

Limited work to 40 hours/week.
60 minutes of work followed by 5 minutes of break.
50 and occasionally 55 pounds lifting restriction
Ankle brace as needed
Limited stairs.

(Jt. Ex. 4, p. 68)

Dr. Femino examined Ms. Pachtinger for a final time on May 9, 2023. He also listed neuralgia and neuritis as part of the diagnoses. (Jt. Ex. 4, p. 76) He placed her at MMI, assigned an 18 percent left lower extremity impairment rating and recommended an FCE. (Jt. Ex. 4, p. 79)

The employer terminated Ms. Pachtinger on May 16, 2023. (Hearing Transcript, page 11)

A valid FCE was conducted on May 31, 2023 by Athletico. Dr. Femino recommended the final permanent restrictions as follows.

12" to waist lift, 50 lb. consistently, up to 52 lb. occasionally.

Waist to shoulder lift, 50 lb. consistently, up to 52 lb. occasionally.

Overhead lifting, 45 lb. occasionally.

Bending, squatting, climbing stairs, occasionally.

(Jt. Ex. 4, p. 82)

CONCLUSIONS OF LAW

The primary question submitted is the nature of the claimant's disability. This is primarily an issue of the correct diagnosis of her condition. The parties have stipulated that the claimant has suffered an injury to her left foot and leg. The defendants contest the diagnosis, at least so far as permanency is concerned, of complex regional pain syndrome (CRPS).

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" refer 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 Elec. 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 testi+7mony 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.

In Collins v. Dept. of Human Services, 529 N.W.2d 627 (Iowa Ct. App. 1995), the Iowa Court of Appeals held that an injury to the sympathetic nervous system is an injury to the body as a whole. The claimant "suffered an injury to a scheduled member, her

hands, and also to a part of the body not included in the schedule, her nervous system. Reflex sympathetic dystrophy is a dysfunction of the sympathetic nervous system." Id. at 629. The condition of reflex sympathetic dystrophy (RSD) is also known as complex regional pain syndrome (CRPS).

By a preponderance of evidence, I find that Ms. Pachtinger was properly diagnosed with CRPS, among other conditions in her left foot and leg. This is based upon the expert opinion of Dr. Bansal and confirmed by the opinions and treatment records of Dr. Femino, Dr. Marshall and Dr. Jacobsen, as well as Ms. Pachtinger's highly credible sworn testimony regarding her symptoms.

The defendants have raised highly technical defenses regarding the diagnosis issue which I do not find compelling.

Having found that CRPS is an appropriate diagnosis, I further find that her disability should be evaluated to her body as a whole, rather than limited to her impairment rating. Iowa Code section 85.34(2)(v) (2023).

Since claimant has an impairment to the body as a whole, an industrial disability has been sustained. Industrial disability was defined in Diederich v. Tri-City Ry. Co. of Iowa, 219 Iowa 587, 258 N.W. 899 (1935) as follows: "It is therefore plain that the Legislature intended the term 'disability' to mean 'industrial disability' or loss of earning capacity and not a mere 'functional disability' to be computed in terms of percentages of the total physical and mental ability of a normal man." Functional impairment is an element to be considered in determining industrial disability which is the reduction of earning capacity, but consideration must also be given to the injured employee's age, education, qualifications, experience, motivation, loss of earnings, severity and situs of the injury, work restrictions, inability to engage in employment for which the employee is fitted and the employer's offer of work or failure to so offer. McSpadden v. Big Ben Coal Co., 288 N.W.2d 181 (Iowa 1980); Olson v. Goodyear Service Stores, 255 Iowa 1112, 125 N.W.2d 251 (1963); Barton v. Nevada Poultry Co., 253 Iowa 285, 110 N.W.2d 660 (1961).

Compensation for permanent partial disability shall begin at the termination of the healing period. Compensation shall be paid in relation to 500 weeks as the disability bears to the body as a whole. Section 85.34.

The refusal of defendant-employer to return claimant to work in any capacity is, by itself, significant evidence of a lack of employability. Pierson v. O'Bryan Brothers, File No. 951206 (App. January 20, 1995). Meeks v. Firestone Tire & Rubber Co., File No. 876894, (App. January 22, 1993); See also, 10-84 Larson's Workers' Compensation Law, section 84.01; Sunbeam Corp. v. Bates, 271 Ark. 609 S.W.2d 102 (1980); Army & Air Force Exchange Service v. Neuman, 278 F. Supp. 865 (W.D. La. 1967); Leonardo v. Uncas Manufacturing Co., 77 R.I. 245, 75 A.2d 188 (1950). An employer who chooses to preclude an injured worker's re-entry into its workforce likely demonstrates by its own action that the worker has incurred a substantial loss of

earning capacity. As has previously been explained in numerous decisions of this agency, if the employer in whose employ the disability occurred is unwilling to accommodate the disability, there is no reason to expect some other employer to have more incentive to do so. Estes v. Exide Technologies, File No. 5013809 (App. December 12, 2006).

Considering all of the relevant factors of industrial disability, I find that claimant has sustained a 75 percent loss of earning capacity as a result of her work injury. Ms. Pachtinger was only 38 years old at the time of hearing. She has a work history primarily in the service sector and warehouse type work. She does not have significant demand skills in the competitive workforce. She lives in a rural area.

I find that she has significant and complex conditions affecting her foot and ankle, as well as her nervous system and whole body. While she has CRPS, it is likely she has other conditions set forth by the treating physicians and Dr. Bansal as well. She has a significant impairment from all of these conditions. Her healing period was drawn out and extensive and she has been out of the workforce or on light-duty for an extended period as a result of her healing. Her current symptoms, well-summarized by Dr. Bansal, make securing and maintaining gainful employment significantly challenging. (Cl. Ex. 2, pp. 11-12) I find that the restrictions from both Dr. Femino and Dr. Bansal are appropriate for her condition. She is certainly no longer well-suited to warehouse type work or any type of work which requires constant standing or walking.

While Ms. Pachtinger does have a significant industrial disability, I find that she has failed to meet her burden of proof that she is permanently and totally disabled. The FCE opined that she is "functionally employable at this time" in the light or medium category. (Jt. Ex. 5, p. 1) She is likely limited to light service sector level work which does not require constant standing unless she obtains further skills. This is admittedly a significant industrial loss which is why I have found her loss of earning capacity is 75 percent.

I conclude that a 75 percent loss of earning capacity entitles the claimant to three hundred seventy-five (375) weeks of compensation at the stipulated rate, commencing on the date after the rating was issued by Dr. Femino.

The final substantive issue is penalty. Ms. Pachtinger seeks an award of penalty benefits pursuant to Iowa Code section 86.13.

Iowa Code section 86.13(4) provides:

> a. If a denial, a delay in payment, or a termination of benefits occurs without reasonable or probable cause or excuse known to the employer or insurance carrier at the time of the denial, delay in payment, or termination of benefits, the workers' compensation commissioner shall award benefits in addition to those benefits payable under this chapter, or chapter 85, 85A, or 85B, up to fifty percent of the amount of benefits that were denied, delayed, or terminated without reasonable or probable cause or excuse.

> b. The workers' compensation commissioner shall award benefits under this subsection if the commissioner finds both of the following facts:
> (1) The employee has demonstrated a denial, delay in payment, or termination in benefits.
> (2) The employer has failed to prove a reasonable or probable cause or excuse for the denial, delay in payment, or termination of benefits.
> c. In order to be considered a reasonable or probable cause or excuse under paragraph "b," an excuse shall satisfy all of the following criteria:
> (1) The excuse was preceded by a reasonable investigation and evaluation by the employer or insurance carrier into whether benefits were owed to the employee.
> (2) The results of the reasonable investigation and evaluation were the actual basis upon which the employer or insurance carrier contemporaneously relied to deny, delay payment of, or terminate benefits.
> (3) The employer or insurance carrier contemporaneously conveyed the basis for the denial, delay in payment, or termination of benefits to the employee at the time of the denial, delay, or termination of benefits.

Dr. Femino placed Ms. Pachtinger at maximum medical improvement and assigned an impairment rating of 18 percent of the left lower extremity on May 9, 2023. (Jt. Ex. 4, p. 79) The defendants should have immediately commenced permanency benefits upon receipt of this rating. The employer had this rating by at least the following day. (Def. Ex. E, p. 40) Instead of commencing payments or sending her an explanation regarding benefits, the employer sent her a letter offering her a job.

Defendants argue at hearing that the reason they did not commence payments to Ms. Pachtinger is because she was receiving unemployment compensation at this time. (Def. Brief, p. 14) Iowa Code section 85.34(3)(d) (2019) disallows receipt of permanent total disability benefits concurrently with unemployment compensation. I conclude this provision has no impact on this case, as claimant is not permanently and totally disabled. The employer clearly did not believe she was permanently and totally disabled. In any event, even if this provision did apply, the defendants have failed to demonstrate the precise period of time that Ms. Pachtinger was receiving unemployment compensation. It is at least unclear in this record the exact date benefits started or ended. Most importantly though, for purposes of penalty, there is no evidence in this record that the defendants contemporaneously conveyed this or any basis for refusing to commence permanency benefits. Based upon the record before me, it does not appear that they conveyed anything to her regarding benefits. Instead, as soon as Ms. Pachtinger was placed at MMI, the employer immediately extended a job offer to her.

I find that a full 50 percent penalty is warranted for unpaid permanency benefits from May 10, 2023, through the date of hearing, July 27, 2023.

ORDER

THEREFORE IT IS ORDERED:

Defendants shall pay the claimant three hundred seventy-five (375) weeks of permanent partial disability benefits at the rate of three hundred eighty-five and 52/100 dollars ($385.52) per week from May 9, 2023.

Defendants shall pay accrued weekly benefits in a lump sum.

Defendants shall pay interest on unpaid weekly benefits awarded herein as set forth in Iowa Code section 85.30.

Defendants shall be given credit for the weeks previously paid.

Defendants are responsible for a fifty (50) percent penalty on PPD benefits from May 10, 2023, through the date of hearing.

Defendants shall file subsequent reports of injury as required by this agency pursuant to rule 876 IAC 3.1(2).

Costs are taxed to defendants.

Signed and filed this 17th day of November, 2023.

JOSEPH L. WALSH
DEPUTY WORKERS'
COMPENSATION COMMISSIONER

The parties have been served as follows:

Randall Schueller (via WCES)

Dru Moses (via WCES)

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, 10A) of the Iowa Administrative Code. The notice of appeal must be filed via Workers' Compensation Electronic System (WCES) unless the filing party has been granted permission by the Division of Workers' Compensation to file documents in paper form. If such permission has been granted, the notice of appeal must be filed at the following address: Workers' Compensation Commissioner, Iowa Division of Workers' Compensation, 150 Des Moines Street, Des Moines, Iowa 50309-1836. The notice of appeal must be received by the Division of Workers' Compensation 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 legal holiday.