BEFORE THE IOWA WORKERS' COMPENSATION COMMISSIONER

CAROL A. MCLAUGHLIN,

Claimant,

vs.

EATON CORPORATION,

Employer,

and

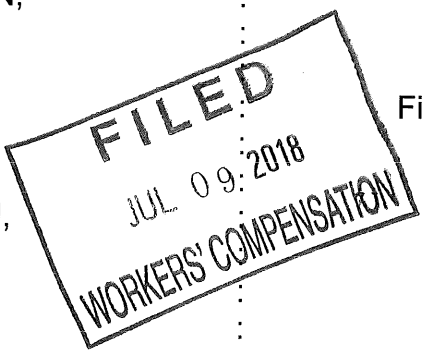
OLD REPUBLIC INS. CO.

Insurance Carrier,

and

SECOND INJURY FUND OF IOWA,

Defendants.



File Nos. 5057339, 5057340, 5057341, 5057342

ARBITRATION

DECISION

Head Note No.: 1803, 2907, 3203

STATEMENT OF THE CASE

Claimant, Carol McLaughlin, filed petitions in arbitration seeking workers' compensation benefits from Eaton Corporation (Eaton), employer, Old Republic Insurance Company (Old Republic), insurer, and Second Injury Fund of Iowa (Fund), all as defendants. These cases were heard in Council Bluffs, Iowa on April 9, 2018 with a final submission date of May 4, 2018.

The record in this case consists of Claimant's Exhibits 1-3, Defendants Eaton/Old Republic's Exhibits A through H, and Defendant Fund's Exhibit AA.

The record also consists of Joint Exhibit A, Exhibits 1-8 (File No. 5057339), Joint Exhibit B, Exhibits 1-7 (File Nos. 5057340 and 5057341) and Joint Exhibit C, Exhibits 1-8 (File No. 5057342). The Joint Exhibits were labeled A through C by the undersigned for clarity of the record.

The parties filed a hearing report at the commencement of the arbitration hearing. On the hearing report, the parties entered into various stipulations. All of those stipulations were accepted and are hereby incorporated into this arbitration

decision and no factual or legal issues relative to the parties' stipulations will be raised or discussed in this decision. The parties are now bound by their stipulations.

ISSUES

For File No. 5057339 (Date of Injury October 27, 2009):

1. The extent of claimant's entitlement to permanent partial disability benefits.
2. Costs.

For File No. 5057340 (Date of Injury February 20, 2012):

1. The extent of claimant's entitlement to permanent partial disability benefits.
2. Whether claimant has a qualifying first and second injury for the purposes of Fund benefits.
3. The extent of claimant's entitlement to Fund benefits.
4. Costs.

For File No. 5057341 (Date of Injury August 16, 2013):

1. The extent of claimant's entitlement to permanent partial disability benefits.
2. Whether claimant has a qualifying first and second injury for the purposes of Fund benefits.
3. The extent of claimant's entitlement to Fund benefits.
4. Costs.

For File No. 5057342 (Date of Injury January 15, 2016):

1. The extent of claimant's entitlement to permanent partial disability benefits.
2. Whether claimant has a qualifying first and second injury for the purposes of Fund benefits.
3. The extent of claimant's entitlement to Fund benefits.
4. Costs.

FINDINGS OF FACT

Claimant was 59 years old at the time of hearing. Claimant graduated from high school. Claimant worked at a hospital. Claimant did home care for an elderly woman.

Claimant worked for approximately 10 years at Pella Windows doing line production work.

Claimant began with Eaton in 2003. Claimant worked on heavy truck transmissions for Eaton, doing production line work. Claimant testified the work was heavy and repetitive.

Claimant had a first injury to her right knee on October 27, 2009. Claimant testified the injury occurred when her left foot became caught in a pallet and she turned her body.

On August 13, 2010 claimant was evaluated by James Kalar, M.D. for a right knee injury. Claimant was assessed as having a medial meniscus tear. (Joint Exhibit A, Exhibit 1, pages 1-3)

Conservative care failed to reduce claimant's symptoms. On February 14, 2011 claimant underwent a right knee diagnostic arthroscopy. Claimant was assessed as having right knee degenerative joint disease with right knee osteonecrosis of the medial femoral condyle. Surgery was performed by Thomas Atteberry, M.D. (JTA, Ex. 4, pp. 9-12)

On September 16, 2011 claimant underwent a second knee surgery consisting of a chondroplasty of the patellofemoral compartment and a microfracture of the medial and femoral condyle. Surgery was performed by Joshua Urban, M.D. (JTA, Ex. 7, p. 43)

In a May 18, 2012 letter, Dr. Urban found claimant had a 7 percent permanent impairment to the right lower extremity. He found claimant was at maximum medical improvement (MMI) on December 20, 2011. (JTA, Ex. 6, p. 23)

On or about February 12, 2012 claimant began to have pain in both upper extremities.

On February 20, 2012 claimant was evaluated by Dr. Kalar with complaints of bilateral hand and wrist pain. Claimant was assessed as having bilateral carpal tunnel syndrome. EMGs and nerve conduction velocity (NCV) studies were recommended. (JTB, Ex. 1, pp. 1-2)

On February 23, 2012 claimant underwent EMG/NCV studies. Testing showed claimant had mild carpal tunnel syndrome on the right and mild to moderate carpal tunnel syndrome on the left. (JTB, Ex. 2, pp. 5-9)

On April 3, 2012 claimant underwent a carpal tunnel release and a medial and lateral tennis elbow debridement on the right. Surgery was performed by Nicholas Bruggeman, M.D. (JTB, Ex. 4, pp. 35-36)

On May 8, 2012 claimant underwent a left carpal tunnel release and a medial epicondylar debridement. Surgery was performed by Dr. Bruggeman. (JTB, Ex. 4, pp. 37-38)

On July 10, 2012 claimant was returned to work at full duty and found to be at maximum medical improvement (MMI). (JTB, Ex. 3, p. 14)

In a September 4, 2012 letter Dr. Bruggeman found claimant at MMI for bilateral upper extremity problems on July 10, 2012. Claimant had no permanent restrictions. He opined claimant had a 4 percent permanent impairment to the bilateral upper extremities. (JTB, Ex. 3, p. 18)

On March 1, 2013 claimant underwent a third knee surgery performed by Dr. Urban. The surgery consisted of a chondroplasty of the patella and medial femoral condyle and a removal of loose bodies in the medial compartment. (JTA, Ex. 7, p. 45)

On April 12, 2013 claimant was given a cortisone injection in the right knee by Dr. Urban. (JTA, Ex. 6, p. 37)

In a May 10, 2013 note Dr. Urban found claimant was at MMI and returned to work with no restrictions. (JTA, Ex. 6, p. 39)

In a November 7, 2013 note, Dr. Bruggeman found claimant at MMI for her upper extremity problems. He opined any problems claimant would continue to have were due to non-work-related reasons. (JTB, Ex. 3, p. 32)

On February 27, 2014 claimant was returned to work at full duty regarding her upper extremity problems by James Devney, D.O. (JTB, Ex. 6, p. 54)

In a March 2, 2014 letter Dr. Devney opined claimant's upper extremity condition was due to her work at Eaton. He indicated claimant may require restrictions or more medical treatment in the future. (JTB, Ex. 6, p. 55)

In an April 8, 2014 report, Ian Crabb, M.D. gave his opinions of claimant's condition following an independent medical evaluation (IME). Claimant had continued pain in the wrist and thumb, right worse than the left. Claimant indicated she used ice on her hands to get ready for work. Dr. Crabb opined claimant's continued symptoms were related to her work at Eaton. He found claimant had not yet reached MMI. He recommended claimant have a cortisone injection for pain and would potentially require further surgery. (JTB, Ex. 7)

On May 16, 2014 claimant underwent another right knee surgery performed by Dr. Urban. The surgery consisted of a medial meniscectomy and removal of a loose body in all three compartments of the right knee. (JTA, Ex. 7, p. 47)

On May 27, 2017 claimant saw Dr. Urban regarding an infection at the incision site. (JTA, Ex. 8, p. 56)

On May 27, 2014 claimant underwent another right knee surgery to treat the infection. (JTA, Ex. 7, p. 49)

On July 15, 2014 claimant was found to be at MMI for the right knee. In an August 13, 2014 note Dr. Urban again opined claimant had a 7 percent permanent impairment to the right lower extremity. Claimant had no permanent restrictions. (JTA, Ex. 8, pp. 64-67)

On August 20, 2014 claimant was evaluated by Dr. Devney. He assessed claimant as having shoulder joint pain, limb pain and osteoarthritis. (JTB, Ex. 6, p. 74)

On January 17, 2014 claimant was found to be at MMI for her bilateral upper extremity problems. Claimant was treating with a rheumatologist for inflammatory arthritis. (JTB, Ex. 6, p. 77)

In a November 23, 2014 note Dr. Devney assessed claimant as having tenosynovitis exacerbated by repetitive work activity. He found claimant had reached MMI as of September 17, 2014. He opined claimant had rheumatoid arthritis exacerbated by her work activities at Eaton. He found claimant's exacerbation resolved and that claimant had no permanent impairment regarding her recent flare up to tenosynovitis. (JTB, Ex. 6, pp. 78-79)

In a December 11, 2014 report, Michael Morrison, M.D., gave his opinions of claimant's condition following an IME. He opined claimant's recent symptoms were related to an autoimmune disorder and not work. He found claimant had no permanent impairment to her wrists, and any present symptoms were due to claimant's autoimmune disorder. He recommended follow up with a rheumatologist. (Ex. A)

On March 2, 2015 claimant was treated for pain all over her body. Claimant was assessed as having inflammatory arthritis. Claimant was counseled to reduce use of alcohol. (Ex. F, pp. 29-31)

On January 5, 2016 claimant was leaving work when she slipped and fell on ice in the Eaton parking lot. Claimant landed on her right knee.

On January 14, 2016 claimant was evaluated by Dr. Urban for right knee pain. Claimant was returned to full-duty work and recommended to have physical therapy. (JTC, Ex. 1, pp. 1-3)

On February 12, 2016 claimant was taken off work due to her knee. (JTC, Ex. 1, p. 7)

While claimant was off work in April of 2016, the Eaton plant closed. Claimant testified her last day at work was March 30, 2016.

On April 22, 2016 claimant had another right knee surgery performed by Dr. Urban. Surgery consisted of chondroplasty of the medial compartment and the patellofemoral compartment. (JTC, Ex. 2, pp. 31-32)

Claimant returned to Dr. Urban on July 28, 2016. Claimant had an 80-85 percent relief in symptoms. Claimant was released from care. (JTC, Ex. 1, pp. 18-19)

Claimant was seen by Robert Palmer, M.D. on October 14, 2016. Claimant had more pain. Claimant was assessed as having diffuse myofascial pain syndrome. Dr. Palmer believed claimant's fibromyalgia was a source of most of her pain. Claimant had increased depression with loss of her job. Claimant was treated with medication. (Ex. F, pp. 38-40)

In an October 27, 2016 letter Dr. Urban found claimant was at MMI for the second knee injury as of July 28, 2016. Dr. Urban found claimant still had a 7 percent permanent impairment to the right lower extremity. He did not believe claimant would require further treatment for the knee injury. (JTC, Ex. 1, pp. 22-23)

In an October 28, 2016 letter Dr. Urban reiterated that claimant was at MMI and did not require further medical care for the 2016 knee injury. (Ex. H, p. 53)

Claimant returned to Dr. Urban on January 19, 2017. Claimant had woken up two days prior with extreme right knee pain. Claimant was unable to bear weight or extend her knee. Dr. Urban had a difficult time evaluating claimant because of her emotional condition. Dr. Urban forwarded claimant to the emergency room at Bellevue Medical Center. The physician at the emergency room indicated claimant just needed to "settle down." Claimant was treated with medication and told to continue use of crutches. (Ex. H, pp. 54-56)

In a March 26, 2017 letter Dr. Urban noted he believed claimant's knee surgery of April 2016 was a result of the October 2009 injury and that all treatment being provided to the right knee was a result of the October 2009 work injury. (JTC, Ex. 1, pp. 27-28)

In an April 4, 2017 report Erik Otterberg, M.D. gave his opinions of claimant's condition following an IME. Claimant had constant pain in the right knee made worse with activity. Dr. Otterberg opined the October 2009 injury resulted in a 7 percent permanent impairment to the right lower extremity. He assessed claimant as having pre-patellar bursitis on the right knee and an exacerbation of the right knee arthritis with the January 2016 injury. He did not believe claimant was at MMI. He did not believe claimant needed permanent restrictions regarding the right knee. He recommended referring claimant to a pain specialist. (JTC, Ex. 3)

Claimant underwent injections and a radiofrequency ablation to the right knee to reduce pain. (JTC, Ex. 5, pp. 70, 73, 75) Claimant testified the injection provided her temporary relief. She testified the ablation did nothing for her symptoms.

On October 11, 2017 claimant underwent a functional capacity evaluation (FCE) performed by Neal Wachholtz, PT. Claimant was found to have given consistent effort. Claimant was restricted from kneeling or crawling. She was limited to squatting and stair climbing occasionally. She was limited to occasionally lifting up to 30 pounds. She was limited to lifting 15 pounds frequently. Claimant was found to be able to work in the light to medium employment demand category. (JTC, Ex. 7, pp. 80-84)

In a November 7, 2017 letter Dr. Devney found claimant had a 25 percent permanent impairment to the right lower extremity. Dr. Devney agreed with the permanent restrictions as outlined in the FCE. (JTC, Ex. 5, p. 77)

In a January 9, 2018 report Sunil Bansal, M.D., gave his opinions of claimant's condition following an IME. Claimant had pain in the right upper extremity and left hand. Claimant also indicated constant right knee pain. Dr. Bansal found claimant at MMI for the right knee on February 2, 2017 regarding the 2016 injury. He found claimant was at MMI for the 2009 injury on June 19, 2014. (Claimant's Exhibit 1, pp. 28-31)

Dr. Bansal found claimant had a 21 percent permanent impairment to the right knee. He found claimant had a 5 percent permanent impairment to the right upper extremity. He found claimant had a 4 percent permanent impairment to the left upper extremity. The combined values for both upper extremity injuries resulted in a 5 percent permanent impairment to the body as a whole. He agreed with the permanent restrictions given in the October 2017 FCE and again recommended claimant should not engage in frequent bending, squatting, climbing or kneeling. (Cl. Ex. 1, pp. 31-33)

Claimant testified that after the Eaton plant shut down, Eaton was required under NAFTA to provide claimant, and other employees, with vocational rehabilitation. Claimant testified she sought assistance with Iowa Vocational Rehabilitation around five to six times. Claimant said she did not apply for any jobs through Iowa Vocational Rehabilitation.

Claimant also engaged in vocational rehabilitation in Missouri. She began working with the state of Missouri in late April or May of 2017. (JTC, Ex. 4, pp. 44-61)

Claimant indicated in an intake interview that her attorney ". . . didn't want her looking for work at the time she was under a workers [sic] comp case. . ." (JTC, Ex. 4, p. 50)

Claimant testified she tried to work for a day at a Dollar General store and at a Casey's store. She said she was unable to complete work at either place because she found walking too difficult. Claimant also applied for a job at a business called Nebs in Maryville, Missouri in early 2018. Claimant was not hired. Claimant testified she is still working with the state of Missouri in finding a job. She testified she was given leads for a job with Tyson and with Burger King but did not try either job, as she did not feel she could perform the work.

Claimant testified she cannot walk for an extended period of time and cannot climb ladders due to her right knee. She said her wrists both hurt. She says she has difficulty driving due to wrist pain. Claimant says she has difficulty sleeping due to wrist pain.

Claimant testified she does not believe she could return to work at Eaton or any of her prior jobs given her limitations. She testified she was working her normal hours and normal job duties at Eaton, before the plant closed.

CONCLUSIONS OF LAW

The first issue to be determined is the extent of claimant's entitlement to permanent partial disability benefits from Eaton.

The party who would suffer loss if an issue were not established has the burden of proving that issue by a preponderance of the evidence. Iowa R. App. P. 6.14(6).

Under the Iowa Workers' Compensation Act, permanent partial disability is compensated either for a loss or loss of use of a scheduled member under Iowa Code section 85.34(2)(a)-(t) or for loss of earning capacity under section 85.34(2)(u). The extent of scheduled member disability benefits to which an injured worker is entitled is determined by using the functional method. Functional disability is "limited to the loss of the physiological capacity of the body or body part." Mortimer v. Fruehauf Corp., 502 N.W.2d 12, 15 (Iowa 1993); Sherman v. Pella Corp., 576 N.W.2d 312 (Iowa 1998). The fact finder must consider both medical and lay evidence relating to the extent of the functional loss in determining permanent disability resulting from an injury to a scheduled member. Terwilliger v. Snap-On Tools Corp., 529 N.W.2d 267, 272-273 (Iowa 1995); Miller v. Lauridsen Foods, Inc., 525 N.W.2d 417, 420 (Iowa 1994).

Regarding claimant's right knee injury, claimant seeks permanent partial disability benefits for her October 2009 injury and her January 2016 injury to her right knee. Medical records indicate claimant underwent approximately six surgeries for her right knee. (JTA, Ex. 4, p.9; Ex. 7, pp. 43, 45, 47, 49; JTC, Ex. 2, p. 31) Dr. Urban performed all but one of those surgeries. Despite the fact that claimant has undergone at least six different surgeries, Dr. Urban maintains claimant has only sustained a 7 percent permanent impairment to her right lower extremity. (JTA, Ex. 6, p. 26; JTA, Ex. 8, p. 66; JTC, Ex. 1, p. 22)

Dr. Bansal evaluated claimant for an IME. He found claimant had a 21 percent permanent impairment to the right knee. (Cl. Ex. 1, pp. 31-33)

Dr. Devney treated claimant for an extended period of time. Dr. Devney is an authorized treating physician. Dr. Devney opined claimant has a 25 percent permanent impairment to the right lower extremity. (JTC, p. 84)

Dr. Devney has far more experience with claimant's medical history and her presentation than does Dr. Bansal. As noted, claimant has undergone six surgical

procedures to the right knee. Given the multiple surgeries claimant has had on the right knee, I find Dr. Devney's opinion regarding permanent impairment to the right knee more convincing than those of Dr. Urban. Given this record, it is found that Dr. Devney's opinion that claimant has a 25 percent permanent impairment to the right lower extremity is more convincing than the ratings of Drs. Urban and Bansal.

Dr. Urban opined all of claimant's problems and permanent impairment were related to the original 2009 injury. (JTC, Ex. 1, p. 27) There is no opinion contrary to Dr. Urban's opinions regarding apportionment. Based on this, it is found all of claimant's permanent impairment is due to the 2009 fall. Claimant is due 55 weeks for the 2009 injury and should take nothing in permanent partial disability benefits from the 2016 injury (220 weeks x 25%).

Regarding claimant's injury to the upper extremities, claimant contends she is entitled to permanent partial disability benefits for bilateral upper extremity injuries on February 20, 2012 and August 16, 2013.

The record indicates claimant began experiencing bilateral upper extremity symptoms in early 2012. The record also indicates defendant employer and insurer accept liabilities for the February 2012 date of injury. Claimant underwent surgery for both upper extremities in 2012. (JTB, Ex. 4, pp. 35-37) The August 16, 2013 date of injury appears to correspond to the date claimant returned in follow up care with Dr. Bruggeman. (JTB, Ex. 3, p. 19) There is no evidence claimant sustained a separate and distinct injury to her bilateral upper extremities on August 16, 2013. Based on this, it is found all the permanent impairment claimant sustained for her bilateral upper extremities is due to the February 20, 2012 date of injury.

Dr. Bruggeman opined claimant had a 4 percent permanent impairment to both upper extremities. (JTB, Ex. 3, p. 18) Dr. Bansal opined claimant had a 5 percent permanent impairment to the left upper extremity and a 4 percent permanent impairment to the right upper extremity resulting in a 5 percent permanent impairment to the body as a whole. (Cl. Ex. 1, pp. 34-35)

Dr. Bansal's opinions regarding permanent impairment are more detailed than that of Dr. Bruggeman. I am able to follow how Dr. Bansal arrived at his findings of permanent impairment using the AMA Guides to the Evaluation of Permanent Impairment, Fifth Edition. Based on this, it is found Dr. Bansal's opinions regarding claimant's permanent impairment to both upper extremities is more convincing than that of Dr. Bruggeman. Claimant is entitled to 25 weeks of permanent partial disability benefits under Iowa Code section 85.34(2)(s) (5% x 500 weeks).

The next issue to be determined is whether claimant is entitled to Fund benefits.

Section 85.64 governs Second Injury Fund liability. Before liability of the Fund is triggered, three requirements must be met. First, the employee must have lost or lost the use of a hand, arm, foot, leg, or eye. Second, the employee must sustain a loss or

loss of use of another specified member or organ through a compensable injury. Third, permanent disability must exist as to both the initial injury and the second injury.

The Second Injury Fund Act exists to encourage the hiring of handicapped persons by making a current employer responsible only for the amount of disability related to an injury occurring while that employer employed the handicapped individual as if the individual had had no preexisting disability. See Anderson v. Second Injury Fund, 262 N.W.2d 789 (Iowa 1978); 15 Iowa Practice, Workers' Compensation, Lawyer, Section 17:1, p. 211 (2014-2015).

The Fund is responsible for the industrial disability present after the second injury that exceeds the disability attributable to the first and second injuries. Section 85.64. Second Injury Fund of Iowa v. Braden, 459 N.W.2d 467 (Iowa 1990); Second Injury Fund v. Neelans, 436 N.W.2d 335 (Iowa 1989); Second Injury Fund v. Mich. Coal Co., 274 N.W.2d 300 (Iowa 1970).

Claimant had a permanent impairment to the right knee occurring in 2009. She has a permanent impairment to her bilateral extremities for 2012. Given this record, claimant has carried her burden of proof she has a qualifying first and second injury for the purposes of Fund benefits.

The next issue to be determined is the extent of claimant's entitlement to Fund benefits.

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 R. Co., 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 the 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.

A loss of earning capacity due to voluntary choice or lack of motivation to return to work is not compensable. Rus v. Bradley Puhrmann, File No. 5037928 (App.

December 16, 2014); Gaffney v. Nordstrom, File No. 5026533 (App. September 8, 2011); Snow v. Chevron Phillips Chemical Co., File No. 5016619 (App. October 25, 2007). Copeland v. Boone Book and Bible Store, File No. 1059319 (App. November 6, 1997). See also Brown v. Nissen Corp., 89-90 IAWC 56, 62 (App. 1989) (no prima facie showing that claimant is unemployable when claimant did not make an attempt for vocational rehabilitation).

Claimant was 59 years old at the time of hearing. Claimant graduated from high school. She worked at a hospital. Claimant has done elderly care. Claimant worked for Pella Windows doing production work for nearly 10 years. Claimant began work at Eaton in 2003 building heavy truck transmissions on a production line.

Claimant has a 25 percent permanent impairment to the right lower extremity. She has a 5 percent permanent impairment to the left upper extremity and a 4 percent permanent impairment to the right upper extremity. Claimant has permanent restrictions that allow her to perform light to medium level work. She has been restricted to lifting 35 pounds occasionally and 15 pounds frequently. (JXC, Ex. 7)

Claimant was working full time at Eaton until she was taken off work shortly before the plant closed down. (Tr. pp. 20, 80)

The Eaton plant closed in April of 2016. Claimant testified she tried to work at a Casey's and a Dollar General store but quit after one day, as she found walking too strenuous. Other than the two attempts at Casey's and Dollar General, claimant has only applied for one job since Eaton closed. (Tr. pp. 45, 73, 82) The records in evidence also suggest claimant is not entirely motivated to return to work. (JT3, Ex. 4, p. 50) No doctor has opined claimant cannot return to work at 40 hours per week. No vocational expert has opined claimant has lost any access to the employment market due to her injuries.

Given this record, it is found claimant has a 40 percent loss of earning capacity or industrial disability.

The Fund is due a credit of 80 weeks (55 weeks + 25 weeks). Claimant is due 120 weeks of Fund benefits (200 weeks – 80 weeks).

ORDER

Therefore it is ordered:

Regarding File No. 5057339 (Date of Injury October 27, 2009):

That defendants Eaton and Old Republic shall pay claimant fifty-five (55) weeks of permanent partial disability benefits at the rate of five hundred twenty-five and 14/100 dollars ($525.14) per week commencing on December 31, 2011.

That defendants shall pay accrued weekly benefits in a lump sum.

That defendants shall pay interest on unpaid weekly benefits as ordered above and as set forth in Iowa Code section 85.30.

That defendants shall receive a credit for benefits previously paid.

Regarding File No. 5057342 (Date of Injury January 5, 2016) and File No. 5057341 (Date of Injury August 16, 2013):

That claimant shall take nothing in the way of additional benefits.

Regarding File No. 5057340 (Date of Injury February 20, 2012):

That defendants Eaton and Old Republic shall pay claimant twenty-five (25) weeks of permanent partial disability benefits at the rate of six hundred twenty-nine and 16/100 dollars ($629.16) per week commencing on June 25, 2012.

That defendants shall pay accrued weekly benefits in a lump sum.

That defendants shall pay interest on unpaid weekly benefits as ordered above and as set forth in Iowa Code section 85.30.

That defendants shall receive a credit for benefits previously paid.

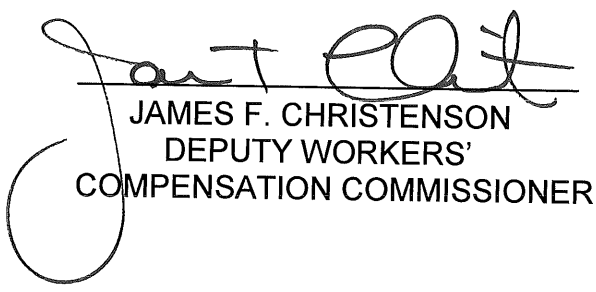
That defendant Fund shall pay claimant one hundred twenty (120) weeks of permanent partial disability benefits at the rate of six hundred twenty-nine and 16/100 dollars ($629.16) per week commencing eighty (80) weeks after June 25, 2012.

Regarding all files:

The Second Injury Fund Act does not provide for costs to be paid from the Fund, and Iowa Code section 85.66 expressly prohibits expenditures from the Fund for other purposes. Second Injury Fund v. Greenman, File No. 5003370 (App. October 19, 2004); Second Injury Fund of Iowa v. Greenman, No. 05-0855 (Iowa Court of Appeals, October 25, 2006), unpublished 725 N.W.2d 658 (table). Defendants Eaton and Old Republic shall pay costs regarding File Nos. 5057339 and 5057340. Claimant, Eaton and Old Republic shall pay their own costs regarding File Nos. 5057342 and 5057341.

Defendants Eaton and Old Republic shall file subsequent reports of injury as required by this agency regarding File Nos. 5057339, 5057340, and 5057342.

Signed and filed this 9th day of July, 2018.



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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.