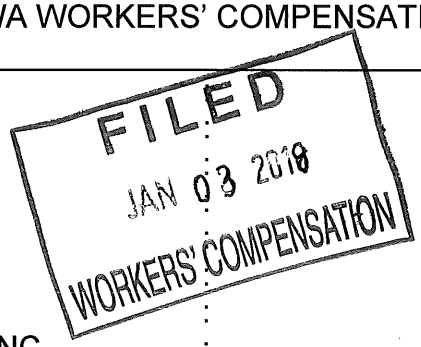
BEFORE THE IOWA WORKERS' COMPENSATION COMMISSIONER



CALVIN Q. BANKS, Claimant, vs. J.B. HUNT TRANSPORT, INC., Employer, and NEW HAMPSHIRE INSURANCE COMPANY, Insurance Carrier, Defendants.	File No. 5054877 ARBITRATION DECISION Head Notes: 1108.50, 1402.30, 1402.40, 1803, 2204

STATEMENT OF THE CASE

Calvin Q. Banks, claimant, filed a petition in arbitration seeking workers' compensation benefits from J.B. Hunt Transport, Inc., employer and New Hampshire Insurance Company, insurance carrier, as defendants. Hearing was held on July 24, 2017 in Des Moines, Iowa.

Claimant, Calvin Banks, and Marcella Banks both testified live at trial. The evidentiary record also includes joint exhibits JE1-JE6, claimant's exhibits 1-10, defendants' exhibits A-L.

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.

The parties submitted post-hearing briefs on August 25, 2017.

ISSUES

The parties submitted the following issues for resolution:

1. Whether the stipulated injury is the cause of permanent disability? If so, the extent of industrial disability claimant sustained as a result of the stipulated December 20, 2013 work injury.

2. The appropriate commencement date for the permanent partial disability benefits.

3. Whether the claimant is entitled to healing period benefits from November 1, 2014 through March 17, 2017?

4. Whether claimant is entitled to past medical benefits?

5. Whether claimant is entitled to reimbursement for an IME under Iowa Code section 85.39?

6. Whether claimant is entitled to alternate medical care?

7. Assessment of costs.

FINDINGS OF FACT

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

Claimant, Calvin Banks, was involved in a motor vehicle accident while working for J.B. Hunt Transport, Inc. on December 20, 2013. Mr. Banks was parked at a rest stop, sleeping in the cab of his truck when his truck, which was not pulling a trailer, was struck from behind. Mr. Banks was displaced from his bunk and landed on the floor. He testified that he was thrown against the cab and was briefly knocked out. Mr. Banks is alleging injury to his head, back, pelvis, left hip, cardiac arrhythmia, and mental issues as a result of this accident.

Immediately following the accident an ambulance was called to the scene. The notes from the Altoona Fire Department sate that Mr. Banks,

> was sleeping in his sleeper of his semi when he was struck by another vehicle at a low speed. The collision was enough to knock him onto the floor out of bed. EMT states that initially pt was unsure whether he wanted to be transported . . . While en route to the hospital they noticed his pulse was slow and irregular so they requested a paramedic . . . He denies any CP or SOB. Has no cardiac history . . . Pt states he is not aware of any heart arrhythmias. . . Pt was tolerating arrhythmia fine and was non-symptomatic, no intervention needed.

(Testimony; Jt. Ex. 3, p. 22)

Mr. Banks was taken to the emergency department at Mercy Hospital in Des Moines. The impression was back pain with no acute fracture, PVCs on EKG; ECHO and troponin negative. Mr. Banks was discharged with instructions to follow up with his primary care physician. (JE4)

Mr. Banks was seen at Concentra Medical Center in Kansas City on December 26, 2013. He complained of pain in his back, which was injured on December 20, 2013. Mr. Banks stated, "I was hit from the rear, I was bob tailing and sleep *[sic]* in the bunk. I was knocked out for a minute." (JE2, p. 8) He reported immediate pain on both sides of his neck and both sides of his thoracic and lumbar spine. He denied any chest pain. The doctor's assessment included, lumbar pain and strain, sacroiliac strain, thoracic spine pain and strain, cervical strain, cervicalgia and multiple unifocal PVCs. The notes state, "Explained to the patient that his cardiac problems are not related to the event 21/20,13 [sic] and that he should continue to see his physician as he already has appointment for holtger [sic] monitor." (JE2, p. 10) He was medically unable to work. He continued to receive conservative treatment for his spine from Concentra. (JE2, pp. 12-20)

Mr. Banks has treated with the V.A. Hospital on several occasions. As of February 3, 2014, he was cleared to return to work without restrictions from a cardiac standpoint. Since that time, he has continued to be cleared from the V.A. from a cardiac standpoint to return to work without restrictions. (Def. Ex. H, p. 60; Jt. Ex. 5, pp. 36-37)

It should be noted that claimant was released to full-duty work on February 6, 2014. He returned to work for the defendant employer and continued to work there until he sustained another injury on November 1, 2014. This injury occurred in Missouri and affected Mr. Banks' left knee. He has not returned to work since that November 1, 2014 injury. (JE 2, p. 18; Def. Ex. D, p. 10; Testimony) Mr. Banks is pursuing permanent total disability benefits in the State of Missouri for his November 1, 2014 work injury. There are expert reports related to the November 1, 2014 injury in evidence.

At Mr. Banks' request, Terry Cordray of Rehabilitation Expertise, LLC, conducted a vocational assessment. Mr. Cordray interviewed Mr. Banks in the Spring of 2016. Mr. Cordray noted that at the time of the vocational interview Mr. Banks was not working and that his last day of work was November 1, 2014. Mr. Cordray stated that at the date of the November 1, 2014 injury Mr. Banks was "fully physically capable of performing his job. . . . His accident in December 2 [sic], 2013, did result in residual problem; however, he was able to return to work in a full-duty fashion." (Def. Ex. G, p. 37) Mr. Cordray also stated, "It is my opinion that Mr. Banks did not have pre-existing injuries or medical problems that had posed a hindrance or obstacle to employment or had prevented him from working." (id.) Mr. Cordray opined that as a result of the November 1, 2014 work injury Mr. Banks is permanently and totally disabled. (Ex. G)

Mr. Banks also obtained the opinion of James L. Stuckmeyer, M.D., an orthopaedic surgeon, who conducted an IME at the claimant's request on February 4,

2016. Dr. Stuckmeyer ultimately opined that should "Mr. Banks be deemed permanently and totally disabled, it would be the opinion of this examiner within a reasonable degree of medical certainty that the prevailing cause for this permanent and total disability would be the workplace accident occurring on November 1, 2014, considered in isolation alone." (Def. Ex. D, p. 13)

Obviously, these opinions are not favorable to Mr. Banks with regard to his December 20, 2013 injury. However, these experts were hired by Mr. Banks and therefore, it can hardly be said that they are somehow biased against him. I find that their opinions carry great weight.

Numerous other experts have also provided their opinions regarding Mr. Banks.

First, we turn to Mr. Banks' cardiac claims. There are two experts who have issued reports based on record reviews.

On November 3, 2016, Mayer Rashtian, M.D. issued a missive as the result of a records review. Dr. Rashtian is a cardiologist who is certified in the field of Cardiovascular Disease and Cardiac Electrophysiology. The doctor noted that Mr. Banks suffered from syncope at the time of the accident, followed by new onset chest pain, and new onset atrial and ventricular arrhythmia consistent with cardiac/myocardial contusion. (CL. Ex. 4, p. 141) He opined that the "atrial and ventricle arrhythmia was precipitated and caused by myocardial contusion, due to his truck accident on December 20, 2013." (Cl. Ex. 4, p. 147)

On July 8, 2017, Michael William Farrar, M.D. authored a missive based on the records review he performed regarding Mr. Banks. The cardiologist stated:

> It has been opined that Mr. Banks suffered a myocardial contusion at the time of his accident December 20, 2013 and that his ventricular and atrial arrhythmias all developed as a result of the myocardial contusion. However, when examining the data from this case, the patient had absolutely no findings to suggest that a myocardial contusion occurred. He had no chest pain or tenderness to suggest chest trauma. His troponin over 4 hours after the accident was normal. His echocardiogram showed no abnormalities other than mild diastolic dysfunction, likely related to his hypertension. His ECG had nonspecific abnormalities. While the presence of ventricular arrhythmias immediately after an automobile accident should alert one to the possibility of a myocardial contusion, there was nothing here to confirm the diagnosis or suggest that it was even likely. I believe the opinion rendered that a myocardial contusion occurred as a result of the accident and caused the arrhythmias is pure conjecture and has no factual basis.

(Def. Ex. E., p. 18)

The doctor went on to state that he believed that most likely Mr. Banks had preexisting arrhythmias that were largely asymptomatic and were simply uncovered by the accident.

Ultimately, Dr. Farrar concluded that:

> Mr. Banks has paroxysmal atrial flutter and fibrillation, an exceedingly common medical condition. He has PVCs and NSVT of uncertain cause, but likely related to hypertensive heart disease with left ventricular hypertrophy. I do not believe these were caused or aggravated by his accident. These do not cause permanent impairment or prevent him from working as a truck driver. He has no permanent restrictions from a cardiac standpoint.

(Def. Ex. E., p. 19)

On July 20, 2017, Dr. Rashtian issued a supplemental report criticizing the report from Dr. Farrar. However, Dr. Rashtian does not persuasively address Dr. Farrar's concern that Mr. Banks did not have any findings to suggest that a myocardial contusion occurred during the accident. I find that the rationale provided by Dr. Farrar to support his opinions is persuasive, logical, and consistent with the record as a whole. Thus, I find that with regard to Mr. Banks' cardiac claims, the opinions of Dr. Farrar are more persuasive than those of Dr. Rashtian. I find that claimant has failed to carry his burden of proof to show by a preponderance of the evidence that he sustained any injury to his heart as a result of the December 20, 2013 work injury. Because claimant failed to carry his burden of proof to show that he sustained any injury to his heart as a result of the December 20, 2013 injury, he is not entitled to any weekly or medical benefits under the Iowa Workers' Compensation Act, related to his heart.

We now turn to Mr. Banks' claim for a physical-mental injury. Claimant alleges that as a result of the December 20, 2013 accident he has sustained permanent disability due to a mental/psychological injury.

In support of his claim, the claimant relies on the expert opinions of Craig B. Rypma, Ph.D. Unfortunately, Dr. Rypma did not evaluate Mr. Banks until November of 2016; after both the December 20, 2013 and November 2014 work injuries. Dr. Rypma's diagnostic impressions include major depressive disorder, rule out cognitive disorder, and somatic symptoms disorder. With regard to the major depressive disorder, Dr. Rypma opines that "Mr. Banks qualifies for this disorder and this disorder was caused specifically by the accidents that were work related and outlined above in this report." (Ex. 7, p. 207) Dr. Rypma also relates the Somatic Symptoms Disorder to the injuries. Unfortunately, Dr. Rypma did not evaluate Mr. Banks until years after both injuries occurred. The doctor states that both injuries caused the claimant's mental symptoms. (Ex. 7) The doctor makes no distinction regarding the onset of symptoms or causal connection with regard to the two injuries. Additionally, Dr. Rypma failed to provide any rationale for his opinions. When the report

is placed in the context of the record as a whole I do not find the report to be persuasive or helpful.

When the record is considered as a whole, I find that claimant has failed to carry his burden of proof to show he sustained any mental injury as a result of the December 20, 2013 work injury. Mr. Banks testified that he is depressed because he had been working since he was six years old and now he is no longer able to work. Following the December 2013 injury Mr. Banks was able to return to full-time work. However, once he sustained the November 2014 injury he did not return to work. Additionally, a review of the treatment records following the December 2013 injury, reveals a lack of symptoms or complaints from Mr. Banks regarding depression or mental health. The record simply does not support Mr. Banks' claim. Because Mr. Banks failed to carry his burden of proof to show that he sustained any mental injury as a result of the December 20, 2013 work injury he is not entitled to any weekly or medical benefits under the Iowa Workers' Compensation Act related to his mental health.

We now turn to the remainder of Mr. Banks' claim for physical injury.

In July of 2014, at his attorney's request, Mr. Banks was evaluated by Daniel Zimmerman, M.D., an internal medicine doctor. Dr. Zimmerman noted that Mr. Banks had been provided treatment at Concentra and was advised the cardiac arrhythmia was not a consequence of the December 20, 2013 accident. Dr. Zimmerman's report says, "I would state as a direct, proximate, and prevailing factor that the accident on December 20, 2013 caused lumbar disc disease at L5-S1." (Cl. Ex. 2, p. 11) Dr. Zimmerman assigned 30 percent permanent functional disability to the body as a whole due to permanent residuals of lumbar disc disease at L5-S1 causally related to the December 20, 2013 work injury. Notably, Dr. Zimmerman did not assign any permanent restrictions. (Cl. Ex. 2, pp. 6-12)

In October of 2014 David J. Clymer, M.D., orthopaedic surgeon, examined Mr. Banks at the request of the defendants. Dr. Clymer opined that the work injury of December 20, 2013, involved multiple areas of contusion and simple neck and low back strains or sprains. He felt that the symptoms responded nicely with time, physical therapy, and conservative medical management. The doctor noted that Mr. Banks was able to resume full activity and work approximately six weeks after the injury date. There were no objective findings of radiculopathy and there was good range of motion of his low back. The doctor found no objective evidence to suggest any ongoing injury or disability related to the work injury. He noted that the x-rays of the lumbar spine did reveal findings consistent with a gentleman of his age and consistent with very minor degenerative disc disease. However, he did note that Mr. Banks had some increased subjective discomfort regarding his low back. Thus, the doctor felt that some of his current complaints may be related to the low back injury. He assigned 3 percent whole person impairment related to the increased subjective complaints caused by the motor vehicle accident. Dr. Clymer felt Mr. Banks could continue to work without restriction and did not anticipate the need for any additional care other than occasional use of non-steroidal anti-inflammatory medications. (Ex. C)

At the request of the claimant, Jacqueline Stoken, D.O., conducted an independent medical examination (IME) on November 28, 2016. Dr. Stoken stated that Mr. Banks reached MMI for the December 20, 2013 accident on March 1, 2014. She placed him in the DRE Lumbar Category II and assigned 8 percent whole person impairment as a result of his lumbar injury. For his cervical injury with muscle tension headaches, she awarded him 8 percent impairment of his whole person. Utilizing the combined values chart of the AMA Guides her ratings result in a total impairment rating of 15 percent of the body as a whole. Dr. Stoken recommended permanent restrictions as set forth in the November 22, 2016 functional capacity evaluation (FCE). The undersigned notes that this FCE did not distinguish which restrictions were necessitated by the December 20, 2013 injury and which were necessitated by the November 1, 2014 injury. For these reasons, the undersigned cannot rely on the findings of the November FCE. Likewise, the undersigned cannot rely on Dr. Stoken's recommendations for permanent restrictions.

At the request of the claimant, Kent Jayne issued a report containing his vocational opinions. (Cl. Ex. 8) However, in his report Mr. Jayne based his opinions on Mr. Banks having restrictions as set forth in the November FCE. For the reasons set forth above, the undersigned did not find the FCE to be persuasive in this matter. Thus, the opinions of Mr. Jayne are also not persuasive.

I find the opinions of Dr. Clymer are logical, well-reasoned, and consistent with the record as a whole. Thus, I find the opinions of Dr. Clymer to be persuasive. I find that as a result of the December 20, 2013 work injury Mr. Banks sustained 3 percent permanent functional disability to his body as a whole. I further find that as a result of the December 20, 2013 work injury Mr. Banks does not have any permanent restrictions placed on his activities.

Although Mr. Banks does not have any permanent restrictions placed on his activities he does have some ongoing symptoms which he attributes to the December 20, 2013 work injury. Dr. Clymer felt that some of his current complaints may be related to the low back injury. At hearing, Mr. Banks testified that he cannot do all of the things he used to be able to do before the injury. Mr. Banks also testified that although he returned to work without restrictions after the December 20, 2013 injury, he did have some difficulty performing his duties. While he was able to perform his job, it was not without symptoms. (Testimony)

Considering Mr. Banks' age, educational background, employment history, ability to retrain, the amount of motivation he has demonstrated to obtain a job, length of healing period, permanent impairment, and lack of permanent restrictions, and the other industrial disability factors set forth by the Iowa Supreme Court, I find that he has sustained a 5 percent loss of future earning capacity as a result of his December 20, 2013 work injury.

I find that Mr. Banks' healing period ended on February 3, 2014 when he was released to return to work. (Ex. H, p. 60) Therefore, permanency benefits shall commence on February 4, 2014.

Claimant is seeking alternate medical care. Specifically, he is seeking treatment related to the cardiac and mental claim that he has made. However, claimant failed to demonstrate by a preponderance of the evidence that those conditions are related to the December 20, 2013 work injury. Thus, claimant's request for alternate medical care is denied.

The hearing report indicates that claimant is seeking payment of past medical expenses. These expenses were incurred at the Veteran's Administration by the claimant. However, at the time of the hearing the claimant had not received an itemization from the V.A. related to the services rendered. Thus, there is no evidence in the record regarding these expenses. As such, I find that claimant has failed to carry his burden of proof to show that these alleged expenses are related to the December 20, 2013 work injury.

Claimant is seeking reimbursement for the IME of Dr. Stoken which took place on November 28, 2016. Defendants had previously obtained a rating from Dr. Clymer. It appears the prerequisites of Iowa Code section 85.39 were met. Thus, I conclude defendants shall reimburse claimant in the amount of $1,400.00 for the IME of Dr. Stoken.

Finally, claimant is seeking an assessment of costs. I find that claimant was only partially successful in his claim. Thus, I exercise the discretion granted in 876 IAC 4.33 to award some of the costs to the claimant. I find that the $100.00 filing fee is an allowable and appropriate cost. However, I did not find the reports of Dr. Rypma or Dr. Rashtian to be helpful. Therefore, I exercise discretion and do not assess the costs of their reports as costs. Thus, defendants are assessed costs in the amount of one hundred and 00/100 dollars ($100.00).

CONCLUSIONS OF LAW

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).

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).

Because 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.

Based on the above findings of fact, the undersigned concludes that claimant failed to prove by a preponderance of the evidence that he sustained cardiac or mental injury which arose out of and in the course of his employment. However, claimant did carry his burden of proof to show that he sustained permanent disability as a result of his physical injuries related to the December 20, 2013 work injury. Claimant demonstrated that he sustained 5 percent industrial disability as a result of the December 20, 2013 work injury. Therefore, Mr. Banks is entitled to 25 weeks of permanent partial disability benefits. Claimant's permanent partial disability benefits shall commence on February 4, 2014.

Defendants have paid healing period benefits from December 20, 2013 through February 3, 2014. Claimant is seeking additional healing period benefits from November 1, 2014, the date of his left knee injury, through March 17, 2017. Healing period compensation describes temporary workers' compensation weekly benefits that precede an allowance of permanent partial disability benefits. Ellingson v. Fleetguard, Inc., 599 N.W.2d 440 (Iowa 1999). Section 85.34(1) provides that healing period benefits are payable to an injured worker who has suffered permanent partial disability until the first to occur of three events. These are: (1) the worker has returned to work; (2) the worker medically is capable of returning to substantially similar employment; or (3) the worker has achieved maximum medical recovery. Maximum medical recovery is achieved when healing is complete and the extent of permanent disability can be determined. Armstrong Tire & Rubber Co. v. Kubli, Iowa App., 312 N.W.2d 60 (Iowa 1981). Neither maintenance medical care nor an employee's continuing to have pain or other symptoms necessarily prolongs the healing period. Based on the above findings of fact, the undersigned concludes that claimant has failed to show entitlement to any additional healing period benefits as a result of the December 20, 2013 work injury.

Claimant is also seeking payment for past medical expenses. The employer shall furnish reasonable surgical, medical, dental, osteopathic, chiropractic, podiatric, physical rehabilitation, nursing, ambulance, and hospital services and supplies for all conditions compensable under the workers' compensation law. The employer shall also allow reasonable and necessary transportation expenses incurred for those services. The employer has the right to choose the provider of care, except where the employer has denied liability for the injury. Section 85.27. Holbert v. Townsend Engineering Co., Thirty-second Biennial Report of the Industrial Commissioner 78 (Review-Reopening October 1975). Based on the above findings of fact, I conclude that claimant has failed to carry his burden of proof to show that these alleged expenses are related to the December 20, 2013 work injury.

Claimant is seeking alternate medical care for his alleged cardiac and mental conditions. However, claimant failed to show that these conditions were compensable

as part of the December 20, 2013 work injury. Thus, defendants are not responsible for medical treatment of these conditions.

Mr. Banks is seeking reimbursement for the IME of Dr. Stoken. 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. I conclude that Mr. Banks is entitled to reimbursement for the IME in the amount of one thousand four hundred and 00/100 dollars ($1,400.00).

Costs are to be assessed at the discretion of the deputy commissioner or workers' compensation commissioner hearing the case unless otherwise required by the rules of civil procedure governing discovery. 876 IAC 4.33. Defendants are assessed costs in the amount of one hundred and 00/100 dollars ($100.00).

ORDER

THEREFORE, IT IS ORDERED:

All weekly benefits shall be paid at the rate of three hundred eighty-five and 02/100 dollars ($385.02).

Defendants shall pay twenty-five (25) weeks of permanent partial disability benefits commencing on February 4, 2014.

All past due weekly benefits shall be paid in lump sum with applicable interest pursuant to Iowa Code section 85.30.

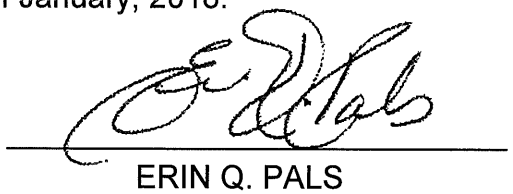
Defendants shall be entitled to credit for all weekly benefits paid to date.

Defendants shall reimburse claimant for the IME in the amount of one thousand four hundred and 00/100 dollars ($1,400.00).

Defendants shall reimburse claimant's costs in the amount of one hundred and 00/100 dollars ($100.00).

Defendants shall file subsequent reports of injury (SROI) as required by this agency pursuant to rules 876 IAC 3.1 (2) and 876 IAC 11.7.

Signed and filed this 3rd day of January, 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.