

BEFORE THE IOWA WORKERS' COMPENSATION COMMISSIONER

AMANDA KLEIN,	:	
Claimant,	:	
vs.	:	
MANN'S McDONALD'S RESTAURANT,	:	File Nos. 5026480, 5030263
Employer,	:	ARBITRATION
and	:	DECISION
ACCIDENT FUND INSURANCE CO.,	:	
Insurance Carrier,	:	
Defendants.	:	Head Note Nos.: 1100, 1108, 1803

STATEMENT OF THE CASE

These are proceedings in arbitration that claimant, Amanda Klein, has brought against the employer, Mann's McDonald's Restaurant, and its insurance carrier, Accident Fund Insurance Co., to recover benefits under the Iowa Workers' Compensation Act as a result of injuries claimant alleges she sustained on May 2, 2007 and June 22, 2007.

This matter came on for hearing before the undersigned deputy workers' compensation commissioner at Burlington, Iowa on May 19, 2009. The record consists of the testimony of claimant, and of Tacoia McDonald, Jody Dague, Misty Kale, Jessica Warth, and Kristi Wallerish, as well as claimant's exhibits 1 through 8 and 11 through 29 and defendants' exhibits A through H. Briefs as submitted were reviewed. The matter was fully submitted as of June 3, 2009.

ISSUES

The stipulations of the parties contained within the hearing report filed at the time of hearing are accepted and incorporated into this decision by reference to that report. Pursuant to those stipulations, claimant was single on both dates of injury. Gross weekly earnings were \$174.13 on May 2, 2007 and \$193.20 for June 22, 2007. The appropriate weekly rate of compensation for both dates is \$151.34.

The issues remaining to be decided for both dates of injury are:

- 1) Whether claimant sustained an injury that both arose out of and was in the course of the employment;

- 2) Whether the injury is a cause of claimant's claimed temporary and permanent disability;
- 3) If so, the extent of any disability benefit entitlement;
- 4) Whether defendants' are liable for payment of certain medical costs under Iowa Code section 85.27;
- 5) Whether claimant is entitled to alternate medical care; and
- 6) Whether pursuant to Iowa Code section 86.13, claimant is entitled to additional benefits as a penalty for defendant's unreasonable delay or denial of benefits.

FINDINGS OF FACT AND ANALYSIS

The undersigned deputy workers' compensation commissioner, having heard the testimony and considered the evidence, finds:

Claimant, Amanda Klein, (Amanda) was 19 years old at the time of hearing. She had been a 17 year old, high school student when she began part-time employment as a crew member with Mann's McDonald's in April 2007.

Amanda had two different incidents at work involving her left knee in spring 2007; the first on May 2, 2007; the second on June 22, 2007. The parties dispute what happened in each incident.

Amanda offered the following testimony. On May 2, 2007, she was engaged in the job duty of restocking napkins in the restaurant's drive up area. The napkins were stored in a supply room at the back of the restaurant. The cart to be restocked was in the restaurant service area, near both the drive up window and the fry prep station. The cart had several shelves; napkins were placed on a lower shelf. Amanda testified as follows: She brought the napkins from the back supply room and then squatted with her knees bent in order to place them on the cart shelf. She heard and felt her left knee pop, tried to stand up immediately, but could neither move nor straighten her knee. A coworker, Tacoia McDonald, brought Amanda a chair. After sitting down, Amanda passed out, fell out of the chair, and hit her head on the restaurant floor. An ambulance was called and she was transported to Great River Medical Center.

Tacoia McDonald corroborated Amanda's testimony as did Britney Potter and Danelle Lee, although the latter two shift workers were not actually present at the time of the May 2, 2007 incident and were reporting only the workplace "buzz" they had heard about the incident. Britney acknowledged that she also had been told that claimant was just walking.

Additionally, Emily Schwartz, a shift manager on May 2, 2007, wrote up an apparently contemporaneous statement concerning the incident, which is in evidence as Exhibit 29. That statement also is consistent with claimant's testimony.

Other witnesses' statements and testimony contradict claimant's account of the May 2, 2007 incident, however. McDonald's crew member, Misty Kale, testified that on May 2, 2007 she "supposed" Amanda was just walking when Amanda fell down, as Misty looked over from the drive up window where Misty was presenting food to customers and saw that Amanda had fallen.

Kristie Wallerish is a long time McDonald's store manager. She was not in the store on May 2, 2007, however. She testified that Misty Kale and Emily Schwartz called her after the incident and told her that Amanda had simply been walking when her knee popped and she blacked out. Ms. Wallerish never expressly asked Amanda about the incident. Ms. Wallerish testified that, after the June 22, 2007 incident, she advised Amanda that neither incident would be reported to the workers' compensation insurance carrier, as Amanda had just been walking on both occasions when Amanda's knee popped.

Ms. Wallerish further testified that Amanda did not contradict or otherwise explain the incidents differently, but only stated that her mother was submitting the medical bills for payment through her health insurance. Amanda credibly testified that she did attempt to further explain the circumstances of both the May 2, 2007 and the June 22, 2007 incidents to Ms. Wallerish, but Ms. Wallerish did not permit Amanda to go forward with her explanations. Ms. Wallerish's demeanor, as observed throughout the hearing, suggested to this deputy that Ms. Wallerish is a highly directive individual who does not generally expect to be contradicted. That characteristic likely serves Ms. Wallerish in carrying out her job duties of overseeing adolescent and young adult workers. It also makes it very plausible that a 17-year-old worker would have difficulty directly confronting and contradicting Ms. Wallerish.

Jessica Warth, who was an assistant shift manager at McDonald's in spring 2007, offered testimony about claimant walking and not feeling well at work. When considered in their entirety, Ms. Warth's recollections did not appear to relate to either the May 2, 2007 or the June 22, 2007 incidents, however.

Amanda was transported to and evaluated at the Great River Medical Center Emergency Department on May 2, 2007. An EM stat report of that date states that Amanda "had been working when she felt a pop in her knee causing her to sit down and feel like she was going to pass out." (Exhibit 1, page 2) A nursing note records that [Amanda] presented complaining of left knee pain. It records that she had crouched down at work and heard a pop. (Ex. 1, p. 5) An emergency physician record states that [Amanda] felt her left knee pop when she bent over at work and felt the knee pop again when she stood up. (Ex. 1, p. 6) A triage report states: "left knee pain... at work and bent down (crouched) & heard her knee 'pop' ..." (Ex. 1, pp. 9 & 13)

The May 2, 2007 medical notations are the best evidence of what actually happened in the May 2, 2007 work incident. Medical professionals prepared these written records in the ordinary course of their business of providing medical care. One can reasonably presume that these professionals accurately recorded the history that Amanda gave them on May 2, 2007. On that day, Amanda was an average 17-year-old high school student. As such, it is likely that questions of workers' compensation coverage were not foremost in her mind. Given that, it is highly unlikely that she lied in describing the work incident to her medical care providers.

The description in the medical records is most consistent with Amanda's own corroborated testimony concerning the May 2, 2007 work incident testimony. It is expressly found that on May 2, 2007, Amanda was at work at McDonald's performing the work duty of restocking napkins, which required their placement on a lower cart shelf. Amanda needed to crouch with her knees bent to place the napkins on the lower shelf. While crouching, she heard and felt a pop in her left knee and experienced severe knee pain.

It is further expressly found that the arrangement of the McDonald's working environment required Amanda to crouch while engaging in the job duty of restocking napkins. In other words, the nature of the work place exposed Amanda to the risk of injury.

The May 2, 2007 medical impression was that claimant had a left knee sprain with possible internal derangement. (Ex. 1, p. 7) Claimant was placed in an immobilizer and subsequently was off work for three days. She then returned to her normal job duties until June 22, 2007, when her second left knee incident occurred.

The parties contest the circumstances of that second incident as well.

Amanda offered the following testimony. On June 22, 2007, she was presenting food to customers at the drive up window. To complete an order she needed to retrieve a carton of milk from the cooler. The supply of milk cartons in the cooler was low. Therefore, she had to squat to reach into the back of the cooler to retrieve a carton. As she did so, she experienced a pop with left knee pain similar to that of May 2, 2007. She could not straighten the left knee. Britney Potter and Kristal, two coworkers who were in the store but not on duty at the time, drove Amanda to the Great River Medical Center immediately subsequent to the incident.

Jody Dague, the shift manager in training present on June 22, 2007, corroborated claimant's testimony as did Britney Potter. Ms. Wallerish testified that she also was not in the store on June 22, 2007, but had questioned Jessica Warth about the incident, and from such questioning, had ascertained that Amanda was simply walking when her knee popped on June 22, 2008. Ms. Wallerish acknowledged that she did not seek Amanda's input while investigating the June 22, 2008 incident. The conversation Ms. Wallerish had with Amanda after June 22, 2008 during which Ms. Wallerish advised

Amanda that Ms. Wallerish was declining to treat either incident as a work injury is set forth above and need not be repeated.

A Great River Medical Center emergency record of June 22, 2007 notes that Amanda presented complaining of left knee pain, that she stated a history of knee problems, and that she had crouched to bend and felt the knee pop. (Ex. 1, p. 18) An emergency physician record reports that [Amanda was] squatting down and felt a pop in [her left] knee. (Ex. 1, p. 19) A triage report of that date states that [Amanda presented] "stating she was bending over at work and thinks she dislocated left knee". (Ex. 1, p. 22) An Emergency Department Generic Assessment Form records that Amanda stated she bent over, crouched and felt/knew her left knee had dislocated, as does an EDM patient record. (Ex. 1, pp. 24 & 26)

For the reasons set forth relative to the May 2, 2007 incident, the June 22 medical notations are the best evidence of what actually occurred relative to claimant's knee on June 22, 2007.

It is expressly found that Amanda was working as a food presenter at the drive up window at McDonald's on June 22, 2007. Her job duties required that she retrieve a carton of milk for a customer. The milk was in a cooler and the supply of milk was low. Amanda had crouched down in order to reach back into the cooler. As she crouched down, her left knee popped and became painful such that she could not straighten out.

It is further expressly found that the arrangement of the McDonald's working environment required Amanda to crouch while engaging in the job duty of retrieving a carton of milk. In other words, the nature of the workplace exposed Amanda to the risk of injury.

On cross-examination, Amanda acknowledged that she does occasionally crouch as part of her nonwork activities. Amanda is morbidly obese. She weighed 298 pounds on March 5, 2007. (Ex. C, p. 3)

At age 11, Amanda was struck by a car and bruised her knee. She testified that the knee pain she had after that accident had resolved after a few weeks and that she was not having left knee symptoms prior to May 2, 2007.

Amanda's emergency room assessment on June 22, 2007 was left knee sprain and internal derangement. (Ex. 1, p. 27) Emergency personnel placed Amanda on crutches, took her off work, and directed her to Michael Hendricks, M.D., of Southeast Iowa Orthopedics and Sports Medicine, PC. On June 27, 2007, he assessed her with derangement of the posterior horn of the left medial meniscus. (Ex. 3, p. 2) On July 20, 2007, Dr. Hendrix performed an arthroscopic partial lateral meniscectomy of Amanda's left knee. (Ex. 1, p. 29)

Dr. Hendrix has advised claimant that she should lose weight because "increased weight puts a tremendous amount of stress and strain on the knees." (Ex. 3, p. 19)

On March 25, 2009, Dr. Hendrix agreed that crouching and bending as Amanda did in her May and June 2007 work incidents was "consistent with and the cause of" the left knee medial tear, for which he performed surgery. He also stated that Amanda had sustained two percent [permanent partial] left lower extremity impairment. (Ex. 3, p. 21)

Charges for claimant's medical care related to her meniscus tear and its treatment total \$12,243.00. (Ex. 11, p. 3) Additionally, accrued medical mileage costs total \$80.43. (Ex. 12, p. 1)

Charles Buck, M.D., of Mercy Hospital Occupational Health, independently evaluated Amanda at defendants' request on November 7, 2008. Amanda then occasionally had dull achy knee pain, but had no knee locking or instability. She was walking and biking regularly, working full duty, and was able to perform all activities of daily living without restrictions. (Ex. 7, p. 6) Dr. Buck concurred with Dr. Hendrix's assessment of two percent permanent partial left lower extremity impairment pursuant to the AMA Guides to the Evaluation of Permanent Impairment, Fifth Edition. (Ex. 7, p. 7)

Dr. Buck offered the following comments relative to the cause of claimant's meniscus tear:

Ms. Klein was performing her usual work activities in bending or squatting to remove materials from a lower shelf. She had done this on numerous occasions in the past without difficulty. This is a normal posture activity of daily living. There was nothing unusual about the circumstances of this activity in terms of body posture, mechanics, or the environment. She did not slip, fall, or engage in any unusual movement. It is also well known that obesity, particularly severe obesity[,] is a significant risk factor for a knee injury. The forces exerted on the posterior elements of the knee associated with squatting are significant and this is greatly amplified by obesity. There are data that indicate for a BMI of 45. (Sic) The risk may be as much as 25 times normal for knee derangement. The work activity of squatting and obesity are factors in the causation of this tear to her lateral meniscus. It is my opinion to a reasonable degree of medical probability that obesity is more significant than squatting in the causation of her meniscus injury.

(Ex. 7, p. 7)

On April 21, 2009, Dr. Buck reiterated his opinion that claimant's extreme obesity was the primary underlying cause of her condition and the most significant factor in the

development of her meniscus tear. He also stated it was possible that simply walking across the floor could have provoked claimant's symptoms. He further stated:

All activities of locomotion and movement can put stress on the knee[,] including standing, walking, bending, kneeling, and squatting. These are all the normal daily activities that could be associated with the onset of her condition. On that basis, the actual tear of her meniscus could have predated one or both of these incidents at work...

(Ex. B, p. 1)

CONCLUSIONS OF LAW AND ADDITIONAL ANALYSIS

The above findings of fact and analysis lead to the following conclusions of law:

The first two issues, namely, whether Amanda received injuries that arose out of in the course of her employment and whether any disability that Amanda's meniscus tear produced is causally connected to either the May 2, 2007 or the June 22, 2007 work incident are both intertwined and will be considered concurrently.

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

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.

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 "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 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 words "arising out of" refer to the cause or source of the injury. 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 natural incident of the work, that is, a rational consequence of a hazard connected with the employment. The injury must not have only coincidentally occurred while at work, the injury must in some way be caused by or related to the working environment or the conditions of employment. Myers v. IBP, 710 N.W. 2d 213 (Iowa 2006); Koehler Electric v. Wills, 608 N.W.2d 1 (Iowa 2000); Miedema, 551 N.W.2d 309.

Additionally, the Iowa Supreme Court has adapted the actual risk rule is part of the arising out of analysis. Under that rule, the employment need not subject the employee to a risk or hazard that is greater than that of the general public. That the work environment or work conditions actually placed the employee at risk of injury is sufficient. Lakeside Casino v. Blue, 743 N.W.2d 169 (Iowa 2007).

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).

Dr. Hendricks clearly relates claimant's meniscus tear to the activity of crouching at work. Dr. Buck agrees that crouching was a factor in claimant's meniscal injury. He opines that her morbid obesity played a greater role in producing the tear. Indeed, he states that claimant's obesity was a risk factor that stressed her lower extremities during

all locomotion, such that she possibly had had the meniscus tear even prior to either work incident.

Dr. Buck's language of possibility is strongly discounted, as the record evidence in its entirety clearly demonstrates that Amanda's knee derangement came about because she crouched at work. Likewise, that Amanda's morbid obesity placed her at greater risk of knee injury from crouching is not controlling, as, per Dr. Buck, the act of crouching dependently produces a risk of knee injury, and claimant's work duties required that she crouch both to restock napkins on a cart and to retrieve milk from a cooler. It is black letter workers' compensation law that the employer takes the employee as the employee is and not as the employer might wish the employee to be.

The medical opinion evidence establishes that Amanda's knee condition or conditions, for which she received medical treatment on May 2, 2007 and June 22, 2007, are causally connected to her crouching at work on those dates. The opinion evidence also establishes that claimant's need for further medical treatment for her knee, including her need for surgery, directly related to the May and June 2007 work incidents, as does her resulting two percent lower extremity permanent partial impairment.

Clearly, Amanda's knee injuries occurred in the course of her employment. Each injurious incident took place at work, during work hours, and while Amanda was fulfilling a work duty. Likewise, Amanda's knee injuries did not coincidentally occur while she was working. Amanda's left knee injuries were causally related to the fact that fulfilling work duties required that she crouch. In the first incident, the placement of the napkins low on the cart produced the need to crouch; in the second, the location of the milk carton at the back of the cooler produced the need to crouch. In both instances, a rational consequence of Amanda's act of crouching was mechanical stress to the left knee that ultimately produced a meniscus tear.

It is unclear on this record whether the May 2, 2007 work incident or the June 22, 2007 work incident ultimately produced claimant's meniscal tear that required surgical treatment. Amanda clearly injured her left knee in both incidents and whether each incident was a separate injury to knee or whether the latter incident merely continued and further manifested the injury initially produced by the former incident is a fine point. What is clear is that claimant has ascertainable disability related to her injurious work related knee condition.

Wherefore, it is concluded that claimant has established injuries on May 2, 2007 and on June 22, 2007 that arose out of and in the course of her employment.

Wherefore, it is concluded that claimant has established a causal relationship between her temporary and permanent disabilities and her work injuries of May 2, 2007 and June 22, 2007.

Pursuant to the parties' stipulation, claimant is entitled to healing period benefits from May 3, 2007 through May 5, 2007 and from June 22, 2007 through September 14, 2007.

The extent of claimant's scheduled member permanent partial disability is at issue.

Under the Iowa Workers' Compensation Act permanent partial disability is categorized as either to a scheduled member or to the body as a whole. See section 85.34(2). Section 85.34(2)(a)-(t) sets forth specific scheduled injuries and compensation payable for those injuries. 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). Compensation for scheduled injuries is not related to earning capacity. 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).

Amanda is doing well. The record evidence does not suggest she has significant residual limitations or restrictions as a result of her meniscal tear. For that reason, the best evidence of claimant's functional disability is the two percent impairment rating that doctors Hendricks and Buck both assigned.

Wherefore, it is concluded that claimant has established two percent permanent partial disability to her left leg, which entitles her to 4.4 weeks of permanent partial disability benefits payable at the applicable weekly rate of \$151.34 and commencing on September 15, 2005.

Claimant seeks payment of medical costs related to her left knee injury as well as reimbursement of medical mileage expenses related to her left knee injury.

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).

Clearly, claimant's medical care resulted from her work incidents. Defendants are liable to pay the medical charges in the total amount of \$12,243.00 and to reimburse claimant her medical mileage expenses in the total amount of \$80.43.

Claimant requests that defendants be required to authorize a treating physician. The record evidence does not established that claimant currently needs treatment for her knee condition; it also does not establish that any need for treatment causally relates to the work injuries. Under those circumstances, an order of alternate medical care by way of authorization of a physician to treat claimant is not appropriate.

Claimant seeks an award of additional benefits under the penalty provisions of Iowa Code section 86.13.

If weekly compensation benefits are not fully paid when due, section 86.13 requires that additional benefits be awarded unless the employer shows reasonable cause or excuse for the delay or denial. Robbennolt v. Snap-on Tools Corp., 555 N.W.2d 229 (Iowa 1996). A reasonable cause or excuse exists if either the delay was necessary for the insurer to investigate the claim or the employer had a reasonable basis to contest the employee's entitlement to benefits. Christensen v. Snap-On Tools Corp., 554 N.W.2d 254, 260 (Iowa 1996).

Significant factual disputes existed in this case as did a legal dispute related to the question of whether claimant's injurious knee condition arose out of her employment. Under those circumstances, claimant is not entitled to an additional award of benefits under Iowa Code section 86.13.

ORDER

THEREFORE, IT IS ORDERED THAT:

Defendants pay claimant healing period benefits from May 3, 2007 through May 5, 2007 and from June 22, 2007 through September 14, 2007 at the applicable rate of one hundred fifty-one and 34/100 dollars (\$151.34).

Defendants pay claimant four point four (4.4) weeks of permanent partial disability benefits of at the applicable rate of one hundred fifty-one and 34/100 dollars (\$151.34), with those benefits to commence on September 15, 2007.

Defendants pay accrued amounts in a lump sum and pay interest as Iowa Code section 85.30 provides.

Defendants receive credit for any amounts previously paid.

Defendants pay claimant's costs of medical treatment in the total amount of twelve thousand two hundred forty-three and no/100 dollars (\$12,243.00) and defendants reimburse claimant medical mileage costs in the total amount of eighty and 43/100 dollars (\$80.43).

Defendants receive credit for any medical charges previously paid.

Defendants file subsequent reports of injury as this division requires.

Defendant pay costs of these proceedings pursuant to rule 876 IAC 4.33.

Signed and filed this 20th day of July, 2009.

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DEPUTY WORKERS'
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