APPEAL NO. 000821

This appeal arises pursuant to the Texas Workers' Compensation Act, TEX. LAB. CODE ANN. § 401.001 *et seq.* (1989 Act). A contested case hearing (CCH) was held on March 29, 2000. The hearing officer determined that the respondent's (claimant) compensable injury of _____, extended to and included the claimant's left carpal tunnel syndrome (CTS); and that the appellant (self-insured) did not waive the right to contest the compensability of the claimed CTS.

The self-insured appealed the determination on the extent of injury, arguing that neither the mechanism of injury or earlier medical records substantiates her claim for left-handed CTS. The self-insured argues that because claimant has bilateral CTS, this condition was "obviously" preexisting. The claimant responded that she met her burden of proof and the decision should be affirmed.

DECISION

The decision is affirmed.

The compensability of claimant's injury on _____, was not disputed. The only issue was an injury to the left hand, manifesting later as CTS. The claimant is a 50-year-old kitchen worker at a high school operated by the self-insured. She described a variety of duties she performed, none of which was asserted or established as repetitious in nature. On the day of her injury, she slipped and fell backwards in front of a soft drink machine. She said she caught herself with her left hand. She said she injured her neck, mid-back, and left hand and foot. She was treated by (medical clinic).

Highlights of the medical clinic records that relate to the left wrist are:

1) 9/04/98: Claimant reported with left wrist pain. This was one area x-rayed.

2) 11/02/98: Normal left wrist x-ray. Wrist reported as feeling fine.

3) 1/05/99: Patient reported tingling pain down right arm in connection with cervical pain.

4) 3/04/99: Upper left extremity EMG and nerve conduction testing was abnormal, consistent with severe left median neuropathy, such as seen in CTS. The self-insured denied referral to a hand surgeon.

Tingling and numbness in the left extremity are indicated in subsequent reports.

Claimant was examined by Dr. S for the self-insured on October 4, 1999. Dr. S also testified at the CCH by telephone. Dr. S agreed that the claimant had CTS. However, he stated that given what he perceived as the lack of indication in early medical records of trauma to the left hand on _____, and because the CTS was bilateral, he did not believe that her current CTS was related to that incident. Dr. S's report noted that CTS on the right side was "minimal and borderline" according to the results of the EMG/NCV that was done on January 14, 1999, but severe on the left.

In response to questions from the self-insured's attorney, Dr. S stated that CTS could be caused, or aggravated, by acute (as opposed to repetitive) trauma. Although asked a leading question as to whether car accidents were the most common cause of traumatically-induced CTS, Dr. S responded that he could not state what the most common traumatic cause was. He said that he had read an article in the *Journal of the American Medical Association* stating that women more commonly had CTS than men, and that the article suggested to him the possibility that CTS could be considered an ordinary disease of life since there was some percentage of CTS not accounted for by single or repetitive trauma.

The claimant said that at an earlier benefit review conference it was agreed that she would be examined by a specialist, Dr. H, specifically on the issue of relationship of the CTS. Dr. H stated that he believed that the CTS was related to her fall, although he based much of this on the lack of reported symptoms prior to that fall. He termed the mechanism of injury of claimant catching herself with her left hand as a "dorsiflexion injury to her left wrist."

We would note at the outset that while chronology alone does not establish a causal connection between an accident and a later diagnosed injury (Texas Workers' Compensation Commission Appeal No. 94231, decided April 8, 1994), neither does a delayed manifestation nor the failure to immediately mention injury to a health care provider necessarily rule out a connection. *See* Texas Employers Insurance Company v. Stephenson, 496 S.W.2d 184 (Tex. Civ. App.-Amarillo 1973, no writ). A claimant's testimony alone may establish that an injury has occurred and disability has resulted from it. Houston Independent School District v. Harrison, 744 S.W.2d 298, 299 (Tex. App.-Houston [1st Dist.] 1987, no writ). Generally, lay testimony establishing a sequence of events which provides a strong, logically traceable connection between the event and the condition is sufficient proof of causation. Morgan v. Compugraphic Corp., 675 S.W.2d 729, 733 (Tex. 1984).

In this case, we cannot agree that the hearing officer's decision is so against the great weight and preponderance of the evidence as to be manifestly unfair or unjust; her decision is sufficiently supported by the evidence, including part of Dr. S's testimony.

We affirm the decision and order.

Susan M. Kelley
Appeals Judge

CONCUR:

Tommy W. Lueders
Appeals Judge

Philip F. O'Neill
Appeals Judge