

APPEAL NO. 001620

On June 12, 2000, a contested case hearing (CCH) was held. The CCH was held under the provisions of the Texas Workers' Compensation Act, TEX. LAB. CODE ANN. § 401.001 *et seq.* The hearing officer resolved the disputed issue by deciding that the appellant/cross-respondent's (claimant) compensable injury of _____, extends to the right elbow but does not extend to reflex sympathetic dystrophy (RSD) of the left elbow or to high blood pressure. The claimant requests that the hearing officer's decision that the compensable injury does not extend to RSD of the left elbow or to high blood pressure be reversed and that a decision be rendered that the compensable injury does extend to RSD of the left elbow and to high blood pressure. The respondent/cross-appellant (carrier) requests that the hearing officer's decision that the compensable injury extends to the right elbow be reversed and that a decision be rendered that the compensable injury does not extend to the right elbow.

DECISION

Affirmed.

The parties stipulated that the claimant sustained a compensable injury on _____. The parties also stipulated that American Risk Funding was the workers' compensation insurer for employer on the date of injury and thus in this decision it is identified as the carrier and not Continental Insurance Company. The claimant testified that on _____, while working for the employer, his right hand got caught in a chain on a conveyor belt and that he yanked his hand out of the chain. Medical records reflect that the claimant sustained lacerations and nerve damage to the fingers of his right hand. The claimant had surgery on the fingers of his right hand on the day of injury. Dr. R is the claimant's treating doctor. The claimant underwent a right carpal tunnel release in March 1997. The claimant said that he was not treated for high blood pressure prior to his _____ injury and that he did not know that he had high blood pressure until the March 1997 surgery had to be postponed for a week because he was found to have high blood pressure. In June 1997, the claimant had a second surgery on the fingers of his right hand.

The claimant testified that Dr. R referred him for physical therapy for his hand and that while in physical therapy, doing gripping and squeezing exercises for his right hand, he developed right elbow pain. Dr. R wrote in July 1997 that the claimant had right elbow pain secondary to working his hand with a hand gripper at physical therapy and he gave claimant an injection in his right elbow. Dr. R wrote in December 1997 that the claimant has possible RSD of the right fingers. Dr. R wrote in June 1998 that the claimant needs a right elbow lateral epicondylar release that Dr. R stated is secondary to the claimant's rehabilitation for his hand, particularly with the stretching of the extensors in trying to regain his grip. In July 1998, Dr. R wrote that the claimant's right elbow pain "is a result of the severe injury and lacerations that he obtained of the digits on the right hand and his

subsequent rehab of the hand.” In November 1998, the claimant underwent right elbow surgery for lateral epicondylitis.

Dr. R wrote in September 1998 that the claimant had had a problem with his blood pressure since his _____, injury; that the claimant had not had a history of high blood pressure before that injury, and that “there must be some problem related to stress in the injury itself and the treatment of the injury and the process of being treated for the injury that has resulted in this patient becoming hypertensive.”

In January 1999, Dr. R wrote that the claimant was concerned about his blood pressure and that he would document the claimant’s high blood pressure when the claimant’s pain is worse. In February 1999, Dr. R wrote that the claimant was having symptoms in his left arm and the next month Dr. R wrote that it is possible that the claimant’s left arm is related to overuse syndrome because the claimant had not been using his right arm very much.

The claimant said that he had shoulder surgery, apparently to the right shoulder, in July 1999. In January 2000, Dr. R wrote that he believes that the claimant has developed RSD as a result of the nerve damage to the claimant’s fingers. Dr. R wrote in February 2000 that the claimant has left lateral epicondylitis and that that is due to an overuse syndrome because the claimant has not been using his right arm very much because of “shoulder hand syndrome on the right side,” which Dr. R stated was another name for RSD.

At the carrier’s request, Dr. P, performed an extensive review of the claimant’s medical records and he reported that in his opinion the claimant’s right elbow epicondylitis is not a result of the claimant’s injury to his right hand; that the diagnosis of RSD is not substantiated in the medical records, is erroneous, and is unrelated to the claimant’s injury of _____; that there is inadequate medical documentation to prove that the claimant’s hypertension is in any way related to the injury of _____; and that the claimant’s left upper extremity complaints are unrelated to the injury of _____.

The hearing officer found that the claimant’s right elbow injury “naturally flowed” from the physical therapy given for the compensable injury and concluded that the claimant’s compensable injury of _____, extends to the right elbow. The carrier contends that the hearing officer’s findings and decision on the right elbow injury are against the great weight and preponderance of the evidence.

The hearing officer found that there is little evidence of RSD in the claimant’s left elbow, that there is little evidence documenting the claimant’s blood pressure, and that the claimant’s “left elbow/upper extremity (RSD) problems and high blood pressure do not naturally flow from the compensable injury.” The hearing officer concluded that the claimant’s _____, compensable injury does not extend to the RSD of the left arm or to high blood pressure. The claimant appeals the hearing officer’s findings and decision regarding his left elbow and high blood pressure.

In Western Casualty and Surety Company v. Gonzales, 518 S.W.2d 524, 526 (Tex. 1975), the court noted that the site of the trauma and its immediate effects are not necessarily determinative of the nature and extent of the compensable injury and that the full consequences of the original injury, together with the effects of its treatment, upon the general health and body of the worker are to be considered. There is conflicting evidence in this case on the issue of the extent of the claimant's compensable injury. The hearing officer is the sole judge of the weight and credibility of the evidence. Section 410.165(a). As the trier of fact, the hearing officer resolves conflicts in the evidence and may believe all, part, or none of the testimony of any witness. Texas Workers' Compensation Commission Appeal No. 950084, decided February 28, 1995. We conclude that the hearing officer's decision on the extent-of-injury issue is supported by sufficient evidence and that it is not so contrary to the overwhelming weight of the evidence as to be clearly wrong and unjust.

The hearing officer's decision and order are affirmed.

Robert W. Potts
Appeals Judge

CONCUR:

Alan C. Ernst
Appeals Judge

Philip F. O'Neill
Appeals Judge