

APPEAL NO. 002072

On August 1, 2000, a contested case hearing (CCH) was held in. 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 respondent (claimant) sustained a compensable left carpal tunnel syndrome (CTS) injury as a result of the compensable injury of _____. The appellant (carrier) requests that the hearing officer's decision be reversed and that a decision be rendered in its favor. The claimant requests that the hearing officer's decision be affirmed.

DECISION

Affirmed.

It is undisputed that the claimant, a licensed vocational nurse, sustained a compensable injury on _____. The claimant testified that on that day she was standing on a stool putting medical supplies on a shelf when she slipped off the stool and felt a pop in her neck, and that to keep from falling to the floor, she grabbed on to a door with her left hand. The carrier said that it accepted liability for a cervical injury and for cervical radiculopathy. The issue at the CCH was whether the claimant sustained a compensable left CTS injury as a result of the compensable injury of _____.

The claimant said that she is left-handed and has diabetes. She described her work activities. The claimant said that she first began to experience pain in her left wrist on _____, after her accident on that day. Initial medical reports for the _____, injury and the claimant's incident report do not mention a left upper extremity problem. The cervical MRI report of February 10, 1999, noted that the claimant had complaints of neck pain and numbness in the left arm and hand and the radiologist reported that the claimant has a disc herniation at C6-7.

Dr. B, the claimant's treating doctor, reported that an EMG done on March 15, 1999, showed left carpal tunnel entrapment and paraspinal denervation at C6-7. Dr. B referred the claimant to Dr. G, who performed a cervical fusion at C6-7 on April 28, 1999. Dr. B performed another EMG on August 13, 1999, and reported that it showed left carpal tunnel entrapment and irritability of the left C7 nerve root. Dr. B performed an EMG of the claimant's lower extremities in September 1999 and reported that it was abnormal.

On September 22, 1999, Dr. B reported that the claimant's CTS is not related to her neck problem and that the CTS is related to the claimant's work activities that she performed with her hands over the years that she worked. Dr. B referred the claimant to Dr. M, who wrote that the claimant's upper extremity problem is due to vascular engorgement due to postural and shoulder girdle deconditioning problems.

Dr. MA, reviewed the claimant's medical records at the request of the carrier and he testified that the claimant has polyneuropathy. Dr. MA reported that the claimant does

not have CTS, that the claimant has cervical radiculitis, and that slowing of the nerves is due to a metabolic disorder of diabetes. Dr. C reviewed the claimant's medical records at the request of the carrier and he reported that the claimant's CTS was an incidental finding on the EMG and is not clinically significant and that the CTS is not related to the claimant's injury of _____.

Dr. B referred the claimant to Dr. D, who reported on February 25, 2000, that the claimant's CTS is likely work related. In response to written questions from the carrier which asked Dr. D whether a traumatic injury is the cause of the claimant's CTS and, if so, to identify the injury and the date of injury, Dr. B identified the traumatic injury as the injury of _____, when the claimant caught hold of the door to prevent herself from falling and incurred a traction injury to her hand, wrist, and upper extremity. Dr. B also wrote that repetitive trauma is not likely the cause of the claimant's CTS, considering the work injury she incurred.

The hearing officer found that the claimant's fall on _____, also caused traumatic CTS in the claimant's left wrist when the claimant grabbed the door to break her fall and the hearing officer concluded that the claimant sustained a compensable left CTS injury as a result of the compensable injury of _____. The carrier contends that the hearing officer's decision is against the great weight and preponderance of the evidence. 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. We conclude that the hearing officer's decision 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 in the instant case concerning the _____, compensable injury was signed by the hearing officer on August 11, 2000. On April 24, 2000, a CCH was held on the issue of whether the claimant sustained a compensable injury in the form of an occupational disease. The claimant claimed in that case that she had left CTS from repetitive work activities. In a decision on that issue signed on August 11, 2000, the hearing officer decided that the claimant did not sustain a compensable injury in the form of an occupational disease on _____. The hearing officer's decision on the occupational disease claim was not appealed. The carrier contends that the hearing officer's decision on the occupational disease claim is res judicata in regard to the claimant's claim that she sustained left CTS in her accident of _____. We disagree with the carrier's contention because the hearing officer's decision against the claimant on her claim of an occupational disease injury in the form of left CTS from repetitive work activities over time did not decide the claimant's claim that her left CTS resulted from the specific accident at work on _____.

The hearing officer's decision and order are affirmed.

Robert W. Potts
Appeals Judge

CONCUR:

Thomas A. Knapp
Appeals Judge

Judy L. Stephens
Appeals Judge