APPEAL NO. 030194
FILED MARCH 13, 2003

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 December 11, 2002. The hearing officer resolved the disputed issues by deciding that the respondent's (claimant) compensable injury of _____, includes an injury to the right knee, right ankle, both shoulders, neck, and low back, and that the claimant's impairment rating (IR) is 17% as reported by the designated doctor chosen by the Texas Workers' Compensation Commission (Commission). The appellant (self-insured) appealed. No response was received from the claimant.

DECISION

Affirmed.

It is undisputed that the claimant sustained a compensable injury to her left knee on _____. Conflicting evidence was presented at the CCH on the issue of the extent of the compensable injury. While the claimant said that she thought that her neck pain was from her shoulders, the treating doctor's reports reflect that he has been treating the claimant for her injuries sustained on _____, and that treatment has been for the claimant's shoulders, neck, low back, and knees. The claimant's initial report of injury to the self-insured included her neck, shoulders, back, knees, and ankles. Although there is conflicting evidence in this case, we conclude that the hearing officer's determination on the issue of the extent of the compensable injury is supported by sufficient evidence and that it is not so against the great weight and preponderance of the evidence as to be clearly wrong and unjust. Cain v. Bain, 709 S.W.2d 175 (Tex. 1986). We note that in Peterson v. Continental Casualty Company, 997 S.W.2d 893 (Tex. App.-Houston [1st Dist.] 1999, no pet.), the court held that the aggravation of a preexisting condition is a compensable injury for purposes of the 1989 Act, and noted that lay opinion testimony may be sufficient to establish a new injury.

Section 408.125(e) provides that if the designated doctor is chosen by the Commission, the report of the designated doctor shall have presumptive weight, and the Commission shall base the IR on that report unless the great weight of the other medical evidence is to the contrary. The designated doctor reported that the claimant reached maximum medical improvement (MMI) on June 26, 2001, and that the claimant has a 17% IR. The parties stipulated that the claimant reached MMI on June 26, 2001. A referral doctor reported that the claimant has a 6% IR. The hearing officer determined that the great weight of the other medical evidence is not contrary to the designated doctor's report and concluded that the claimant has a 17% IR. We conclude that the hearing officer's determination on the IR issue is supported by sufficient evidence and that it is not so against the great weight and preponderance of the evidence as to be clearly wrong and unjust. Cain, *supra*.

We affirm the hearing officer's decision and order.

The true corporate name of the insurance carrier is **(a self-insured governmental entity)** and the name and address of its registered agent for service of process is

For service in person the address is:

RON JOSSELET, EXECUTIVE DIRECTOR
STATE OFFICE OF RISK MANAGEMENT
300 W. 15TH STREET
WILLIAM P. CLEMENTS, JR. STATE OFFICE BUILDING, 6TH FLOOR
AUSTIN, TEXAS 78701.

For service by mail the address is:

RON JOSSELET, EXECUTIVE DIRECTOR
STATE OFFICE OF RISK MANAGEMENT
P.O. BOX 13777
AUSTIN, TEXAS 78711-3777.

_____
Robert W. Potts
Appeals Judge

CONCUR:

_____
Elaine M. Chaney
Appeals Judge

_____
Thomas A. Knapp
Appeals Judge