APPEAL NO. 041732
FILED SEPTEMBER 3, 2004

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 June 22, 2004. The hearing officer determined that the respondent (claimant) sustained a compensable injury in the form of an occupational disease, with a date of injury of _____; that the claimant had disability resulting from the compensable injury of _____, for the period beginning on December 2, 2003, and continuing through March 1, 2004; and that the appellant (self-insured) is not relieved from liability under Section 409.002, because the claimant did timely notify the employer pursuant to Section 409.001. The self-insured appealed the hearing officer's injury and disability determinations based on sufficiency of the evidence grounds. The claimant filed a response, urging affirmance.

DECISION

Affirmed.

Section 401.011(34) defines occupational disease as including repetitive trauma injuries. Whether the claimant sustained a compensable injury in the form of an occupational disease and whether the claimant had disability are generally questions of fact for the hearing officer to resolve. It was the hearing officer's prerogative to believe all, part, or none of the testimony of any witness, including that of the claimant. Aetna Insurance Company v. English, 204 S.W.2d 850 (Tex. Civ. App.-Fort Worth 1947, no writ). The hearing officer's determinations with respect to the disputed issues are supported by the evidence. The Appeals Panel will not disturb the challenged factual findings of a hearing officer unless they are so against the great weight and preponderance of the evidence as to be clearly wrong or manifestly unjust and we do not find them to be so in this case. Cain v. Bain, 709 S.W.2d 175, 176 (Tex. 1986); In re King's Estate, 150 Tex. 662, 224 S.W.2d 660 (1951).

The self-insured asserts that the hearing officer erred as a matter of law in failing "to state with any specificity the nature, diagnosis or location of the Claimant's alleged compensable injury" and "to make legally sufficient findings of fact establishing that Claimant sustained an occupational disease in the form of the repetitive trauma injury *tenosynovitis*." (Emphasis in the original.) The claimant responded that the hearing officer made a finding of fact and conclusion of law based on the certified issue at the CCH, and that the self-insured complains for the first time on appeal what is in essense an extent-of-injury issue. We agree with the claimant. The certified injury issue was as follows: Did the claimant sustain a compensable injury, in the form of an occupational disease, with a date of injury of _____? Section 410.168(a) only requires the hearing officer to make findings of fact and conclusions of law, determine whether benefits are due, and award benefits, if any. In view of the evidence presented, the hearing officer's injury finding was not improper, nor was it so against the great

weight and preponderance of the evidence as to be clearly wrong or manifestly unjust. Cain, *supra*.

We affirm the hearing officer's decision and order.

The true corporate name of the insurance carrier is **STATE OFFICE OF RISK MANAGEMENT (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:

JONATHAN BOW, 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:

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

_____
Veronica L. Ruberto
Appeals Judge

CONCUR:

_____
Daniel R. Barry
Appeals Judge

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Gary L. Kilgore
Appeals Judge