

STATE OF ILLINOIS)
) SS.
COUNTY OF MADISON)

<input type="checkbox"/>	Injured Workers' Benefit Fund (§4(d))
<input type="checkbox"/>	Rate Adjustment Fund (§8(g))
<input type="checkbox"/>	Second Injury Fund (§8(e)18)
<input type="checkbox"/>	PTD/Fatal denied
<input checked="" type="checkbox"/>	None of the above

BEFORE THE ILLINOIS WORKERS' COMPENSATION COMMISSION

Laura A. Weidler ,

Petitioner,

vs.

NO: 08WC56581

Olin,

10IWCC0091

Respondent.

DECISION AND OPINION ON REVIEW

Timely Petition for Review having been filed by Respondent herein and notice given to all parties, the Commission, after considering the issue of the nature and extent of Petitioner's permanent disability and being advised of the facts and law, affirms and adopts the Decision of the Arbitrator, which is attached hereto and made a part hereof.

IT IS THEREFORE ORDERED BY THE COMMISSION that the Decision of the Arbitrator filed August 13, 2009 is hereby affirmed and adopted.

IT IS FURTHER ORDERED BY THE COMMISSION that the Respondent pay to Petitioner interest under §19(n) of the Act, if any.

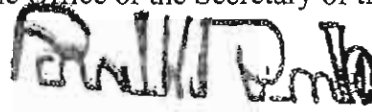
IT IS FURTHER ORDERED BY THE COMMISSION that the Respondent shall have credit for all amounts paid, if any, to or on behalf of the Petitioner on account of said accidental injury.

Bond for removal of this cause to the Circuit Court by Respondent is hereby fixed at the sum of \$75,000.00. The probable cost of the record to be filed as return to Summons is the sum

10IWCC0091

of \$35.00, payable to the Illinois Workers' Compensation Commission in the form of cash, check or money order therefor and deposited with the Office of the Secretary of the Commission.

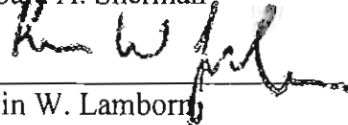
DATED: FEB 1 2010



Paul W. Rink



Barbara A. Sherman



Kevin W. Lamborn

PWR:bjg
0-1/19/10
68

WEIDLER, LAURA A

Employee/Petitioner

Case# 08WC056581

10IWCC0091

OLIN

Employer/Respondent

On 08/13/2009, an arbitration decision on this case was filed with the Illinois Workers' Compensation Commission in Chicago, a copy of which is enclosed.

If the Commission reviews this award, interest of 0.28% shall accrue from the date listed above to the day before the date of payment; however, if an employee's appeal results in either no change or a decrease in this award, interest shall not accrue.

A copy of this decision is mailed to the following parties:

JOSEPH E HOEFERT
ATTORNEY AT LAW PC
1600 WASHINGTON AVE
ALTON, IL 62002

0299 KEEFE & DEPAULI PC
PATRICK KEEFE
#2 EXECUTIVE DR
FAIRVIEW HTS, IL 62208

STATE OF ILLINOIS)
)
COUNTY OF MADISON)

<input type="checkbox"/>	Injured Workers' Benefit Fund (§4(d))
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<input type="checkbox"/>	Second Injury Fund (§8(e)(18))
<input checked="" type="checkbox"/>	None of the above

ILLINOIS WORKERS' COMPENSATION COMMISSION
ARBITRATION DECISION
REGARDING THE NATURE AND EXTENT OF THE INJURY

LAURA A. WEIDLER
Employee/Petitioner

Case # 08 WC 56581

v.

OLIN
Employer/Respondent

10IWCC0091

An *Application for Adjustment of Claim* was filed in this matter, and a *Notice of Hearing* was mailed to each party. The matter was heard by the Honorable Andrew Nalefski, arbitrator of the Commission, in the city of Collinsville, on 7/24/09. The only disputed issue is the nature and extent of the injury. By stipulation, the parties agree on the following items:

- On 7/8/08, the respondent Olin Corporation was operating under and subject to the provisions of the Act.
- On this date, the relationship of employee and employer did exist between the petitioner and respondent.
- On this date, the petitioner sustained accidental injuries that arose out of and in the course of employment.
- Timely notice of this accident was given to the respondent.
- In the year preceding the injury, the petitioner earned \$ 52,000.00, and the average weekly wage was \$857.35.
- At the time of injury, the petitioner was 33 years of age, *single* with 0 children under 18.
- Necessary medical services have been provided by the respondent.
- The respondent shall pay the petitioner temporary total disability benefits of \$ 571.57/week for 10 weeks, from 12/15/08 through 2/22/09, which is the period of temporary total disability for which compensation is payable.
- To date, \$ 5,715.60 has been paid for TTD and/or maintenance benefits.

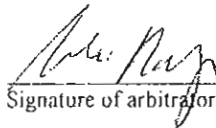
After reviewing all of the evidence presented, the arbitrator hereby makes findings regarding the nature and extent of the injury, and attaches the findings to this document.

ORDER

- The respondent shall pay the petitioner the sum of \$ 514.41/week for a further period of 183.2 weeks, as provided in Section 8(e) of the Act, because the injuries sustained caused the loss of 20 % of each hand and 20 % of each arm.
- The respondent shall pay the petitioner compensation that has accrued from 3/11/09 through 7/24/09 and shall pay the remainder of the award, if any, in weekly payments.
- The respondent shall pay \$ N/A for medical services, as provided in Section 8(a) of the Act.

RULES REGARDING APPEALS Unless a Petition for Review is filed within 30 days after receipt of this decision, and a review is perfected in accordance with the Act and Rules, then this decision shall be entered as the decision of the Commission.

STATEMENT OF INTEREST RATE If the Commission reviews this award, interest at the rate set forth on the *Notice of Decision of Arbitrator* shall accrue from the date listed below to the day before the date of payment; however, if an employee's appeal results in either no change or a decrease in this award, interest shall not accrue.



Signature of arbitrator

8/11/09
Date

ICArbDecN&E p.2

AUG 13 2009

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The Arbitrator finds the following facts;

Petitioner worked as a loader packer for Respondent. She developed bilateral carpal tunnel syndrome and bilateral cubital tunnel syndrome as a result of her job duties.

She received treatment for her conditions from Dr. Dehghan, a hand surgeon. Dr. Dehghan performed a right carpal tunnel release and right cubital tunnel release on 12/15/08. He performed a left carpal tunnel release and left cubital tunnel release on 1/5/09. Petitioner was off work from 12/15/08 through 2/22/09. She was released for normal work activity on 2/23/09. Dr. Dehghan last saw Petitioner on 3/11/09. At that time she stated that the numbness and tingling in her upper extremity digits had resolved. She had been back to full duty without any major problems. She was released from care at that time at maximum medical improvement.

Petitioner testified that she has not seen Dr. Dehghan or any other physician for these conditions since she was released on 3/11/09. She does not take any prescription medication for her conditions but does take OTC medication daily. She does not wear any type of brace or splint on her hands, wrists or elbows. She said that her hands ache and cramp up daily. She has some loss of dexterity in her fingers, worse on the right than the left. Her right ring finger does not fully extend. She said she feels pain on the medial aspect of both elbows almost every day. She agreed with Dr. Dehghan's assessment as of 3/11/09. She said the problems she has now returned the day she went back to work.

Therefore the Arbitrator concludes;

1. As a result of her injuries Petitioner has sustained the loss of 20% of each hand and 20% of each arm.